

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201956 SEPTEMBER 26, 2019

IHCP amends high-risk pregnancy policy

Effective October 26, 2019, the Indiana Health Coverage Programs (IHCP) is amending its reimbursement policy regarding high-risk pregnancy care, as part of a statewide effort to improve health outcomes of mothers and babies. For dates of service (DOS) on or after October 26, 2019, the IHCP will reimburse for high-risk pregnancy care when provided by physicians or advanced practice registered nurses (APRNs).

Independently practicing and enrolled APRNs may bill for services provided for a high-risk pregnancy by listing their National Provider Identifier (NPI) in the rendering provider field. APRNs who are employed by physicians or are working in a physician-directed group or clinic under the supervision of a physician should bill using the physician's NPI as the rendering provider with the appropriate modifier to indicate the APRN performing the services.



The National Institutes of Health (NIH) defines a high-risk pregnancy as a pregnancy that threatens the health or life of the mother or her fetus and often requires specialized care from specially trained providers. Some pregnancies become high risk as they progress, while some women are at increased risk for complications even before they get pregnant for a variety of reasons. The IHCP does not determine conditions that may or may not complicate a pregnancy. Therefore, if the provider determines that an illness or injury could complicate a pregnancy or have an adverse effect on the pregnancy's outcome, the IHCP allows billing for covered services provided to treat the illness or injury.

Services must be deemed medically necessary or preventive healthcare services, and provided within the scope of the applicable license and certification. To document high-risk pregnancies for managed care members, providers may retain a copy of the submitted Notice of Pregnancy (NOP) in the patient's record for retrospective review. If a normal pregnancy becomes high risk at any time during the pregnancy, providers should use the NOP to document the change.

This reimbursement will apply to services rendered under the fee-for-service (FFS) and managed care delivery systems.

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