

NEW HOSPITAL PRECERTIFICATION AND BILLING PROCESSES FOR DELIVERIES

Effective with the dates of service on or after August 30, 2010, claims for deliveries are excluded from Precertification when the following conditions are met:

- 3 days are excluded from Precertification for vaginal deliveries if the admission date is equal to the date of delivery.
- 4 days are excluded from Precertification for vaginal deliveries if the delivery occurs the day after admission.
- 5 days are excluded from Precertification for C-Sections if the admission date is equal to the date of delivery.
- 6 days are excluded from Precertification for C-sections if the delivery date occurs the day after admission.

If the LOS exceeds the days allowed per the above conditions then precert IS required.

To Precert, submit a completed PCF01 and PCF02. The PCF02 should include clinical information supporting stays beyond the periods of time excluded in the above criteria. The PCF01 and PCF02 must be submitted on the expected discharge date. If the expected discharge date falls on a weekend or Molina holiday then submit the PCF01 and PCF02 the next business day following the expected discharge date.

Vaginal Delivery Precertification Example:

If the vaginal delivery day is equal to the admission date to the hospital then the patient must discharge home by day 4 of the hospitalization in order to be excluded from precert. If the mother does not discharge home on the 4th day of her hospitalization then the PCF01 & PCF02 must be submitted on the 4th day of hospitalization. The 4th day is the expected discharge day. If the 4th day falls on a weekend then the PCF01 & PCF02 are due on the next business day.

C-Section Precertification Example:

If the C-Section delivery date is the day after the admission date to the hospital then the patient must discharge home by day 7 of the hospitalization in order to be excluded from precert. If the mother does not discharge home on day 7 then precert is required. Submit a PCF01 & PCF02 on day 7 of the hospitalization. Day 7 is the expected discharge date. If the 7th day falls on a weekend then the PCF01 & PCF02 are due on the next business day.

Hospital Claims

With this change, billing processes for deliveries have been modified.

In cases that fall within the above conditions, the precert edits will be bypassed and a precert number is not required on the claim.

The following additional information is required on the claim:

Vaginal Deliveries

- The admit or primary diagnosis should be a vaginal delivery diagnosis.
- The secondary diagnosis or any other diagnosis excluding the admit diagnosis must be the appropriate <u>Outcome of delivery V- Code</u>.
- The surgical procedure code for the vaginal delivery and the date of the procedure must appear on the claim.

NOTE: If the delivery occurs on the date of admission, up to 3 days will be allowed for payment. If the delivery occurs on the date after admission, up to 4 days will be allowed for payment. Days exceeding will require precertification.

C-Section Deliveries

- The admit or primary diagnosis must be a C-section diagnosis.
- The secondary diagnosis or any other diagnosis excluding the admit diagnosis must be the appropriate <u>Outcome of delivery V-Code</u>.
- The C-section surgical procedure code and the date of the procedure must appear on the claim.

NOTE: If the delivery occurs on the date of admission, up to 5 days will be allowed for payment. If the delivery occurs on the date after admission, up to 6 days will be allowed for payment. Days exceeding will require precertification.