

Postnatal Services Basics: Lactation Services/Counseling/Training Billing and Coding

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Presentation Objectives:

- Reduce Denials- discuss several current payer medical policies/administrative policies
- Stay Compliant-current coding
- Increase reimbursement - are you leaving money on the table?
- Test Your knowledge!

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Presentation Outline

- I. Introduction:
 - a. What are Postnatal Services?
 - b. Global Service Codes - OBGYN
 - c. What are Lactation Counseling/Training Services?
- II. Coding for the Services:
 - a. Preventive Care codes
 - b. Lactation Counseling/Training Codes – Other Qualified Professionals
 - c. Lactation Counseling/Training Codes – Physicians, Non-Physician Staff
 - d. Test Your Knowledge
- III. Medical Policies:
 - a. NYS Medicaid
 - b. BCBS IL
 - c. Cigna Preventive Administrative Policy
 - d. Colorado Medicaid MCO: Health First Colorado
 - e. CareFirst BCBS
 - f. Aetna: Lactation Consultants
 - g. Test Your Knowledge

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I. **Introduction**

a. What are postnatal services?

A range of services that give support and care to the mothers and the newborn, usually during the first 6-8 weeks following birth.

b. Global Service codes - OBGYN

Global OB service codes are codes that encompass the antepartum, delivery and postpartum care. These codes are used if the member has seen the same provider for the whole episode of care.

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b. Global Codes w/ descriptions:

59400- global antepartum, care, vaginal delivery and postpartum care

59510- global antepartum care, cesarean delivery and postpartum care

59610- ob care antepartum, vaginal delivery w/without episiotomy, and/or forceps, and postpartum care after a previous cesarean delivery

59618- ob care antepartum, cesarean delivery and postpartum care, attempted vaginal delivery after a previous cesarean delivery

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c. What are Lactation counseling/training services?

Services that focus on providing support to breastfeeding individuals by providing education, guidance and/or encouragement to help with feeding of the baby(s).

1. Counseling helps the patient to explore different techniques in addressing concerns and provide information to the patient so that the patient can make the informed decision about breastfeeding.
2. Education/Training: training techniques - positioning, latch, milk supply and address any other most common breastfeeding challenges.

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II. Coding for the Services

a. Preventive care codes - can be used for women well visit 3 months after giving birth (age):

99394- Preventive medicine service, established patient, 12-17 years old

99395- Preventive medicine service, established patient, 18-39 years old

99396- Preventive medicine service, established patient, 40-64 years old

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b. Lactation Counseling/Training Services Codes: Other Qualified Professionals

S9443- Lactation classes, non-physician

S9444-Parenting classes, non-physician, per session

S9445-patient education, not otherwise classified, non-physician provider, individual, per session

S9446-patient education, not otherwise classified, non-physician, group, per session

98960-98962- self management education codes (1 patient, 2-4 patients, 5-8 patients)

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c. Lactation Counseling/Training codes: Physicians, Non-Physician staff

59430- postpartum care, billed when the physician did not perform the delivery. Routine check up and other EM during the postpartum period, 6 weeks following the delivery

99401- preventive counseling individual 15 min

99402- preventive counseling individual 30 min

99403-preventive counseling individual 45 min

99411-preventive counseling group 30 min

99412-preventive counseling group 60 min

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d. Test Your Knowledge

Question 1: Based on the information discussed in the previous sections, can the other qualified non-physician perform/bill code 99395?

- a. Yes- this code falls under the counseling services and therefore other qualified non-physician can bill this code
- b. No- this code can only be billed by physicians
- c. Yes- this code fall under the preventive care: both physician and other qualified non-physicians can bill it
- d. No- this code is only for doulas

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d. Test Your Knowledge

Question 2:

As discussed in the previous sections, which code the provider is allowed to bill if the only seeing the member for the postpartum services and did not perform the delivery?

- A. 59400
- B. 59430
- C. 99401
- D. 98960

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III. Medical/Administrative Policies

a. NYS Medicaid Policy:

Effective for any DOS after 9/1/2022

Who is Allowed to perform/bill services?

-Physicians/NPs/PAs/Midwives/RNs that also have the certification from a nationally recognized accredited agency as lactation counselors.

When the services are done at the hospital outpatient department, the physician can submit for their professional services portion separately and receive reimbursement.

However, if the services are performed by NP, MW, PA, and/or RN- those services will be included in the APG payment of the facility.

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a. NYS Medicaid Policy: Cont'd

If the services are done in a Diagnostic and Treatment Center (D&TC), the professional component, including that when is performed by the physician is included in the APG payment of the facility

Coding:

S9445- patient education, not otherwise classified, non physician provider, individual, per session

S9446- patient education, not otherwise classified, non- physician provider, group, per session.

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b. BCBS IL: Medical Policy cont'd:

Policy#: CPCP043

Effective Date: 06/26/25

Lactation Support may include:

-Promoting breastfeeding, latching, positioning of the infant

-Managing different lactation problems- milk supply

-Counseling on returning to work or school

Non-physician providers are: Independent Lactation Consultants

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b. BCBS IL cont'd:

Coding:

For Independent Lactation consultants/counselors that have Certified Lactation Counselor certification or International Board-Certified Lactation Consultant Certification-

98960-98962 and S9443

For Physicians the codes are 99401-99404, 99412.

Unlisted code 99429 should not be reported.

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c. Cigna Preventative Administrative Policy:

Policy#: A004-Preventive Care Services:

Effective Date: 05/15/25

Next Review: 01/15/26

Covered as part of preventive Care services- services that may be provided during the wellness visit examination- Breastfeeding promotion/counseling support- Intimate partner/interpersonal and domestic violence screening/referral to support services.

- Breastfeeding support/counseling during pregnancy and after birth/with any DX: 99401-99404, 99411,99412, and S9443

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d. Colorado Medicaid MCO: Health First Colorado

The following provider types are allowed to perform the services and will be reimbursed (list not inclusive):

Licensed Physician (MD)

Certified Midwife (CM)

Licensed Registered Nurse (RN)- enrolled as a non-physician - individual with Health First Colorado

DOULAS- who also meet the IBCLC, CLC, or CLE qualifications may provide lactation support.

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d. Colorado Medicaid MCO: Health First Colorado cont'd:

Groups that are allowed to receive reimbursement (not all inclusive):

Clinic- enrolled at PT 16 type of provider

Lactation/doula Professional Group-PT 72

Non-Physician Practitioner Group-PT 25

Individual Type provider (list not all inclusive):

Licensed Physician MD

Licensed Advanced Practice Nurse (APN)

Certified Midwife (CM)

Certified Lactation Counselor or Certified Lactation Educator cannot bill directly to the plan, instead needs to be enrolled in a group and bill through the group information. Claims need to have the CLC/CLE NPI number as a rendering provider.

Services Can be done via telemedicine: ex. Modifier 95- synchronous telemedicine service was rendered via real-time interactive audio and video telecommunication system

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d. Colorado Medicaid MCO: Health First Colorado cont'd:

Coding:

S9443 is used for all types of eligible providers, including a physician.

There are 2 modifiers that the provider needs to add to the claim:

Modifier 1 position:

U1- individual session

U2- group session

Modifier 2 position: is used to indicate how many minutes the session was (there are several modifiers) List not all inclusive:

-U4: 23-37 minutes

-U6: 53-67 minutes

-U9: 98-112 minutes

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e. CareFirst BCBS Lactation Medical Policy

Policy number 4.01.010 Lactation Consultations last revision 12/01/2024

Some services that fall under lactation consultations may include (list not all inclusive):

Lactation classes

Assessment of breastfeeding performance and evaluation of milk transfer; and use of a breast pump or supplementation if indicated; and

Counseling to address breastfeeding related situations (ex. Mastitis, cracked nipples, etc), inadequate milk transfer or supply, premature infant, etc.

Lactation consultations are covered as preventive service for women.

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e. Carefirst BCBS policy cont'd:

Providers eligible to receive individual reimbursement are MDs, certified nurse midwife, nurse practitioner, or registered dietician, that are trained and certified as CLC or IBCLC.

Providers that are registered nurses, LPNs/LVNs, or Physician Assistants that are also certified as CLC, or IBCLC may also receive direct reimbursement for the services performed.

Non- licensed CLC, or IBCLC may be eligible for the services, however will need to bill under the network participating individual or practice.

No codes are given in this policy!

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f. Aetna Better Health of Illinois: Lactation Consultants Policy

Who can perform these services?:

Lactation consultants: International Board Certified Lactation Consultants, Certified Lactation Counselors (certified by Academy of Lactation Policy and Practice, Inc), Certified Lactation Specialists (certified by Lactation Education Consultants)

Code: S9443 with different modifiers-

HD- pregnant/parenting women's program- IBCLC

No modifier- CLC or CLS

HD, HQ (group Services 2+ members) IBCLCs

HQ (group services 2+ members) CLCs, or CLSs

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g. Test your knowledge:

Question 1:

True or False- as per NYS Medicaid when the breastfeeding support is done in an outpatient hospital setting will the physician that is providing services receive a separate reimbursement.

- A. True- professional component, needs to submit a separate professional claim
- B. False- breastfeeding services that are done in hospital outpatient departments will only be reimbursed as part of an APG facility payment

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g. Test Your Knowledge:

Question 2:

According to the medical/administrative policies previously discussed, which policy allowed codes 98960-98962 to be billed by the non-physician qualified health care professional?

- A. CareFirst BCBS
- B. NYS Medicaid
- C. BCBS of IL
- D. Colorado Medicaid MCO: Health First Colorado

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Thank you for listening!

Medical/Administrative Policies covered in this presentation will be attached. If you have any questions about the content that was covered in this presentation,

please contact me

via email: cskr2billing@gmail.com
