



STATE OF OKLAHOMA  
OKLAHOMA HEALTH CARE AUTHORITY

OHCA 2019-22

October 23, 2019

**RE: Coverage of Obstetricians and Family Practice Physician for High Risk Obstetrical Services without Maternal Fetal Medicine Consultation**

Dear Provider,

Beginning November 1, 2019, the Oklahoma Health Care Authority (OHCA) will add coverage pursuant to Oklahoma Administrative Code [317:30-5-22.1](#). This will allow obstetricians and family practice physicians to request High Risk Obstetrical services without Maternal Fetal Medicine consultation; in appropriate cases.

The obstetricians and family practice physicians must be Board eligible or Board certified. Additionally, the family practice physician must have completed an Accreditation Council for Graduate Medical Education approved residency which included appropriate obstetric training. He or she must also be credentialed by the hospital at which he or she provides obstetrical services. Obstetricians and family practice physicians may request High Risk Obstetrical services for the following specific diagnoses only:

1. Dichorionic/Diamniotic twins
2. Gestational diabetes mellitus
3. Chronic hypertension
4. Placenta previa and low lying placenta
5. Size not equal to dates
6. Mild preeclampsia
7. BMI  $\geq$  40

All High Risk Obstetrical services still require prior authorization through the Medical Authorization Unit. Detailed instructions can be found on OHCA's [HROB web page](#). Requests for High Risk Obstetrical benefits for diagnoses not noted above require Maternal Fetal Medicine consultation. Please see the attached list of ICD-10 diagnosis codes.

If you have any questions, please visit the OHCA Medical Authorization Unit's website at: <http://www.okhca.org/mau> or call 800-522-0114.

Sincerely,

A handwritten signature in cursive script that reads "Melody Anthony".

Melody Anthony  
State Medicaid Director

**Dichorionic/Diamniotic twins**

ICD 10	
O30.041	Twin pregnancy, dichorionic/diamniotic, first trimester
O30.042	Twin pregnancy, dichorionic/diamniotic, second trimester
O30.043	Twin pregnancy, dichorionic/diamniotic, third trimester

**Chronic Hypertension**

ICD 10	
O10.011	Pre-existing essential HTN complicating pregnancy, first trimester
O10.012	Pre-existing essential HTN complicating pregnancy, second trimester
O10.013	Pre-existing essential HTN complicating pregnancy, third trimester
O10.111	Pre-existing hypertensive heart disease complicating pregnancy, first trimester
O10.112	Pre-existing hypertensive heart disease complicating pregnancy, second trimester
O10.113	Pre-existing hypertensive heart disease complicating pregnancy, third trimester
O10.211	Pre-existing hypertensive chronic kidney disease complicating pregnancy, first trimester
O10.212	Pre-existing hypertensive chronic kidney disease complicating pregnancy, second trimester
O10.213	Pre-existing hypertensive chronic kidney disease complicating pregnancy, third trimester
O10.311	Pre-existing hypertensive heart and chronic kidney disease complicating preg, first trimester
O10.312	Pre-existing hypertensive heart and chronic kidney disease complicating preg, second trimester
O10.313	Pre-existing hypertensive heart and chronic kidney disease complicating preg, third trimester
O10.911	Unspecified pre-existing HTN complicating pregnancy, first trimester
O10.912	Unspecified pre-existing HTN complicating pregnancy, second trimester
O10.913	Unspecified pre-existing HTN complicating pregnancy, third trimester
O13.1	Gestational (pregnancy induced) HTN without significant proteinuria, first trimester
O13.2	Gestational (pregnancy induced) HTN without significant proteinuria, second trimester
O13.3	Gestational (pregnancy induced) HTN without significant proteinuria, third trimester

**Gestational Diabetes**

ICD 10	
O24.410	Gestational diabetes mellitus in pregnancy, diet controlled
O24.414	Gestational diabetes mellitus in pregnancy, insulin controlled
O24.419	Gestational diabetes mellitus in pregnancy, unspecified controlled

### **Placenta Previa and low lying placenta**

<b>ICD 10</b>	
O44.01	Placenta previa specified as without hemorrhage, first trimester
O44.02	Placenta previa specified as without hemorrhage, second trimester
O44.03	Placenta previa specified as without hemorrhage, third trimester

### **Size not equal to dates**

<b>ICD 10</b>	
O36.591*	Maternal care for other known or suspected poor fetal growth, first trimester
O36.592*	Maternal care for other known or suspected poor fetal growth, second trimester
O36.593*	Maternal care for other known or suspected poor fetal growth, third trimester
	*:1=fetus 1, 2=fetus 2, 3=fetus 3, 4=fetus 4, 5=fetus 5, 9=other fetus, 0=not applicable or unspecified
O36.61	Maternal care for excessive fetal growth, first trimester
O36.62	Maternal care for excessive fetal growth, second trimester
O36.63	Maternal care for excessive fetal growth, third trimester

### **Mild Pre-eclampsia**

<b>ICD 10</b>	
O14.02	Mild to moderate pre-eclampsia, second trimester
O14.03	Mild to moderate pre-eclampsia, third trimester

### **BMI ≥ 40**

<b>ICD 10</b>	
O99.211	Obesity complicating pregnancy, first trimester
O99.212	Obesity complicating pregnancy, second trimester
O99.213	Obesity complicating pregnancy, third trimester
	(Use additional code to identify type of obesity-see code below)
E66.01	Morbid (severe) obesity due to excess calories
E66.09	Other obesity due to excess calories
E66.1	Drug induced obesity
E66.2	Morbid (severe) obesity with alveolar hypoventilation
	(Use additional code to identify BMI if known-see below)
Z68.41	Body mass index (BMI) 40.0-44.9, adult
Z68.42	Body mass index (BMI) 45.0-49.9, adult
Z68.43	Body mass index (BMI) 50.0-59.9, adult
Z68.44	Body mass index (BMI) 60.0-69.9, adult
Z68.45	Body mass index (BMI) 70 or greater, adult
Z68.54	Body mass index (BMI) pediatric, greater than or equal to 95th percentile for age