



Independent licensees of the Blue Cross Blue Shield Association.

Maternity Initiatives

Frequently Asked Questions

1. Which plans require us to follow the Birth Outcomes Initiatives (BOI) filing guidelines?

The BOI filing requirements apply to all BlueCross BlueShield of South Carolina and BlueChoice® HealthPlan plans, as well as out-of-state members (BlueCard®).

2. Should I submit the American Congress of Obstetricians and Gynecologists (ACOG) Patient Safety Checklist when I file a claim?

Complete the checklist and keep it in the patient's chart. We may request a copy of this for verification.

3. Do you give additional reimbursement for filing the UA modifier?

We do not give additional reimbursement for filing the UA modifier. We pay for procedures based on each provider's contract rate or fee schedule.

4. Is the UA modifier required for code 59514?

We do not require the UA modifier for code 59514. File whichever modifier is appropriate for this code based on the guidelines and what is medically appropriate.

5. If a surgical assistant is involved, do I file the UA modifier in addition to the assistance modifier?

Yes. If an assistant surgeon is providing services, you should file the UA modifier in conjunction with the assistant surgeon modifier (80). You should append modifiers to services as applicable in addition to the BOI modifier based on the BOI filing guidelines.

6. Should I bill the member for Screening, Brief Intervention, and Referral to Treatment (SBIRT) services if their plan does not participate in the program?

No. You should not hold members whose plans are not participating liable if you have provided services.

7. Do I need to file the U1 modifier for H0002 or H0004 for SBIRT services?

No. The South Carolina Department of Health and Human Services (SCDHHS) required the U1 modifier previously but is no longer required as of July 1, 2014. We do not require this modifier as well.

8. Is there an age restriction for SBIRT?

There is no age restriction for SBIRT. It is important to note that if a member's plan does not provide maternity coverage for dependents, we will not cover SBIRT for the dependent. Please be sure to verify eligibility and benefits prior to rendering services.

9. What are the reimbursement requirements for participation in the Centering Pregnancy Program? What reimbursements will participating providers receive?

Approved practices under contract with the Centering® Healthcare Institute (CHI) are eligible for program participation. Centering Pregnancy is a program of CHI, and independent company that provides wellness education information on behalf of BlueCross and BlueChoice.

Participating providers will receive reimbursement for providing the following services:

- 99078 with TH modifier – reimbursement is \$30.00 per visit, up to 10 visits
- 0502F – reimbursement is \$175.00 as a one-time retention incentive on or after the fifth visit

These services pay separately from global maternity benefits. You should file the appropriate pregnancy diagnosis code.

10. How do I become a Centering Pregnancy Program provider?

If you are interested in the Centering Pregnancy Program, please visit the CHI website at www.centeringhealthcare.com*.

Once you have membership with CHI and are also in the process of achieving Site Approval status, you must complete the Centering Pregnancy Application Form to apply for participation with BlueCross and BlueChoice.

**This link leads to a third-party site. That organization is solely responsible for the content and privacy policies on its site.*

11. Can midwives conduct Centering Pregnancy visits if the Centering Healthcare Institute contracts and approves the practice?

Certified nurse midwives (CNM) as well as physicians and nurse practitioners (NPs) can conduct Centering Pregnancy visits.

12. Is there an age restriction for Centering Pregnancy?

There is no age restriction for Centering Pregnancy. It is important to note that if a member's plan does not provide maternity coverage for dependents, we will not cover Centering Pregnancy services for the dependent. Please be sure to verify eligibility and benefits prior to rendering services.

13. How does the Moms Support Program work?

If an expectant mother has been referred to Companion Benefit Alternatives (CBA) for services, the member can enroll in the Moms Support Program. CBA is a separate company that administers mental health and substance abuse benefits on behalf of BlueCross and BlueChoice. CBA designed this program to help expectant and new mothers who may be experiencing depression or anxiety. The program provides guidance, support, assessment, and case management to mothers.