

# interChange Provider Important Message

## **Inpatient Hospital Providers – Inpatient Delivery Stays and Prior Authorization (PA) Reminder**

The Department of Social Services' (DSS) criterion for identifying a delivery for an inpatient stay is based on the primary diagnosis code submitted on the claim. If the primary reason for the stay was a delivery, Prior Authorization (PA) is not required. The list of diagnosis codes to identify a delivery stay is expansive. For your convenience, the following provides some examples of diagnosis codes that will bypass PA on a delivery inpatient stay when billed as the primary:

O11.4, O11.5, O13.4, O14.04, O14.14, O14.24, O14.94, O16.4, O22.33, O30.113, O30.012, O23.02, O23.593, O24.425, O34.211, O34.32, O34.513, O34.63, O34.83, O36.1130, O36.5931 - O36.5935, O36.8120, O36.8130, O36.8330, O36.8930, O40.9XX0 - O40.9XX3, O42.90, O44.23, O44.33, O44.43, O34.513, O41.1220 - O41.1222, O41.1230 - O41.1235, O41.8X30, O43.893, O90.81, O99.214, Z36.89, Z37.0

The following diagnosis codes have previously been requested by the hospitals for addition to the list above, but were denied by DSS:

D58.2, D64.9, N36.1, Z34.03, O09.513, O09.523, O09.293, O10.013, O13.1, O14.12, O21.0 - O21.2, O22.43, O23.13, O24.410 - O24.415, O266.13, O26.86, O26.833, O26.893, O28.8, O30.009, O34.218, O35.1XX0, O41.8X10, O41.8X90, O99.613, O98.513, O98.813, O99.012, O99.013, O99.213, O99.283, O99.323 and O99.333

These requests were denied because either there was a childbirth specific diagnosis code in the series, which is the appropriate code to use instead of the trimester code (i.e. O10.013 "Pre-existing essential hypertension complicating pregnancy, third trimester", if there was a delivery the hospital should use O10.02 "Pre-existing essential hypertension complicating childbirth") or because the diagnosis code in question should not be considered as the primary diagnosis code on the claim. In other circumstances, the hospital should be using a more specific code under ICD-10 versus selecting "unspecified".

Any claims for an inpatient delivery stay that are not submitted with a primary diagnosis code on DSS' approved list will deny with explanation of benefits (EOB) code 3004 - Inpatient claim requires prior authorization.



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If after reviewing the guidance above and the primary diagnosis submitted on the claim the hospital believes the primary diagnosis submitted on the denied claim should be considered to bypass PA when a delivery occurs, please send claim examples (including ICN) to Gainwell Technologies at the following e-mail address: [ctxihospay@dxc.com](mailto:ctxihospay@dxc.com).