



Policy Update:

Billing Add-on Codes for Maternity-Related Anesthesia

(CPT codes 01967/01968, 01969)

Effective with date of processing November 25, 2014, typical add-on code processing rules were updated for obstetric anesthesia procedure codes 01967 and add-on codes 01968 and 01969. Add-on codes are not considered a full service, and in most cases, cannot be reimbursed without the primary procedure being billed and paid to the same attending provider. The exception to this is when more than one provider performs services over the duration of labor and delivery.

When an add-on code is used to fully define a maternity-related anesthesia service, the date of delivery should be the date of service for both the primary and the add-on procedure. This would apply regardless of whether the same or different providers bill for each service.

For questions related to this information as it pertains to legacy Medicaid or Bayou Health Shared Savings Plans claims processing, please contact Molina Medicaid Solutions Provider Services at (800) 473-2783 or (225) 924-5040.