



FROM



MEMO

SUBJECT: GEORGIA REPRODUCTIVE HEALTH BILLING REQUIREMENTS UPDATE

Beginning March 1, 2024, the billing requirements are changing for Reproductive Health Services in the State of Georgia. Claims will adjudicate in accordance with state and federal laws. Claims received prior to the date of this publication will require a corrected claim to accurately reflect the service as detailed below. The below information offers further detail on specifics that are required to review and adjudicate the claim appropriately.

The following procedure codes are impacted by these changes:

Reproductive Health Procedure Codes
59414, 59812, 59820, 59821, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857, 59866, S0190, S0199, S2260, S2265, S2266, S2267, 59870, 59830

Claims for these services must be presented with a condition code:

Hyde Procedures*	
Condition Code	Description
AD	Life Endangerment
AF	Due To Emotional/Physical Health of Mother
AB	Incest
AA	Rape
Non-Hyde Futile Pregnancy Procedures	
AC	Due to serious fetal genetic defect, deformity, abnormality

Claims for these services must be presented with a modifier code:

Modifier	Description
G7	Pregnancy resulted from rape or incest or pregnancy certified by physician as life-threatening

- Procedures that are elective in nature or the result of incest or rape will not be covered.

*Hyde Procedures are cases involving rape, incest, or when the continuation of the pregnancy would endanger the mother's life.

**Non-Hyde procedures are cases involving an elective procedure or cases not included as a Hyde procedure.