

OHIP Billing: Prenatal/Postnatal

Quick Reference Guide

This short guide provides key information to help you understand the various prenatal/postnatal codes and how to improve your patient billing.

Challenge	DoctorCare Best Practices and Recommendations
<p>What codes can I bill for prenatal patients?</p>	<p>There are three main codes to bill for prenatal patients. The Prenatal Major Visit (P003), The Prenatal Minor Visit (P004), The Antenatal Preventative Health Assessment (P005).</p> <ul style="list-style-type: none"> ● P003 – The Prenatal Major Visit - \$80.35 A prenatal general assessment includes a full history, an examination of all parts or systems, and advice to the patient. This can only be billed once per pregnancy. ● P004 – The Prenatal Minor Visit – \$38.15 This code includes all subsequent visits for pregnant patients. There is no limit to the amount of times this can be billed. ● P005 - The Antenatal Preventative Health Assessment - \$47.70 Completed by the most responsible physician for antenatal risk, examining all current psychosocial, genetic and medical issues affecting antenatal risk. This can be billed once per pregnancy.
<p>When should I be billing the different prenatal codes?</p>	<ul style="list-style-type: none"> ● The Prenatal Major Visit (P003) and Antenatal Preventative Health Assessment (P005) can each be billed once per pregnancy, while the Prenatal Minor Visit (P004) does not have a limit. ● P005 can be billed alongside P003 or P004. ● DoctorCare recommends billing the P003/P005 combination on the first visit to ensure the patient's major assessments are done and ensure the best care. ● DoctorCare can generate a list of patients for physicians who have missed billing P003 or P005 for their patients.

Challenge	DoctorCare Best Practices and Recommendations
<p>What is the prenatal special bonus/premium?</p>	<ul style="list-style-type: none"> ● This is a bonus/premium given to physicians when performing prenatal assessments on five enrolled patients. ● The codes that trigger this premium are the prenatal major visit (P003) and prenatal minor visit (P004). ● Once billed on five patients, you will receive a bonus of \$2,000 on your next Remittance Advice (RA).
<p>What postnatal codes can I bill?</p>	<ul style="list-style-type: none"> ● P008 – Postnatal Care in Office - \$36.85 <ul style="list-style-type: none"> ○ This should be billed within six weeks of birth. ○ There is no limit to how many times you can bill this code. ○ You can bill P008 if you assess the mother on the same day she comes in with her newborn baby. ● A002 - Enhanced 18 Month Well Baby Visits - \$62.20 <ul style="list-style-type: none"> ○ These visits can be done between the 17th and 24th month of life. ○ This visit must include age-appropriate developmental screening and concerns identified by the parent/guardian. ○ We recommend using the Rourke Baby Record and Nipissing District Developmental Screen (NDDS).

Quick Tips

- 1) You can bill the **P005** alongside either the **P003** or the **P004**
- 2) You can bill the **A002** between 17 and 24 months of age
- 3) **P003** or **P004** counts toward your prenatal bonus for enrolled patients
- 4) **P003/P004/P008** cannot be billed virtually; it is an in-person visit only. **P005** can be billed as a virtual assessment (video ONLY).
- 5) If **P005/P008** has already been billed, we recommend billing A007 or the most appropriate code.