NOTICE OF MATERIAL CHANGE TO CONTRACT

Colorado | Anthem Blue Cross and Blue Shield | Commercial

October 1, 2026

Subject: Maternity Services update: coding changes

Dear Provider:

Beginning with dates of service on or after January 1, 2027, Anthem Blue Cross and Blue Shield and our subsidiary company, HMO Colorado, Inc. (Anthem), will update the Maternity Services reimbursement policy.

Effective January 1, 2027, the American Medical Association (AMA) is restructuring CPT® coding for maternity care services, replacing the existing global maternity care coding structure with a more granular approach for reporting antepartum care, labor management, delivery, and postpartum care.

However, the Centers for Medicare & Medicaid Services (CMS) is considering adopting new HCPCS G-codes that would preserve the existing global maternity care coding structure. This notice explains how Anthem plans to update its Maternity Services — Professional reimbursement policy depending on whether CMS adopts the proposed G-codes.

If CMS adopts the proposed G-codes
If CMS adopts these codes, our existing Maternity Services — Professional reimbursement policy currently posted on Anthem's website will be updated to include the new CMS G-codes. We will notify providers of any resulting updates to our reimbursement policy.

If CMS does not adopt the proposed G-codes
If CMS does not adopt the proposed G-codes, the Maternity Services — Professional reimbursement policy incorporating the new AMA CPT code guidance will take effect on January 1, 2027, as outlined below.

Anthem Blue Cross and Blue Shield is the trade name of Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. Independent licensees of the Blue Cross Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.
CO-BCBS-CM-021747-26-GRP5913 | September 2026

Beginning with dates of service on or after January 1, 2027, Anthem will update its Maternity Services — Professional reimbursement policy to incorporate new guidance from the AMA maternity coding structure as follows:

- Maternity services will no longer be reported using the existing global maternity care codes. Instead, services must be reported separately based on the specific maternity care provided, such as antepartum, delivery, or postpartum care.
- Antepartum and postpartum visits must be reported per visit using the appropriate evaluation and management code. Modifier TH will be required when applicable.
- Reimbursement frequency limits will apply to routine pregnancies. These reimbursement limits do not restrict clinically appropriate maternity care. As described in the reimbursement policy, the antepartum limit does not apply to services associated with a documented high-risk pregnancy or active pregnancy-related complication, and the postpartum limit does not apply to services associated with a pregnancy-related or postpartum complication.
- Services that are part of the same maternity visit, or that represent duplicative work performed on the same date of service, may not be separately reimbursable.

This policy change impacts care provider billing requirements. It does not impact member care or services. Participating care providers are prohibited from balance billing members based on this policy change.

For more information, view this policy online. Visit **anthem.com** and select **For Providers**. On the next screen, select **Colorado**. Under the *Resources* heading, select **Policies, Guidelines and Manuals**. Next, under the *Reimbursement Policies* heading, select **Access policies**.

Sincerely,

Erica Kloehn
Regional Vice President, Provider Solutions
Anthem Blue Cross and Blue Shield