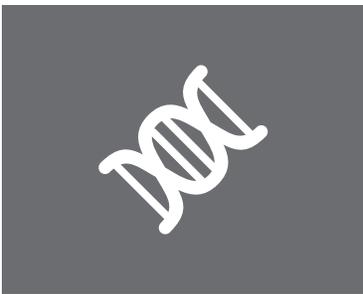
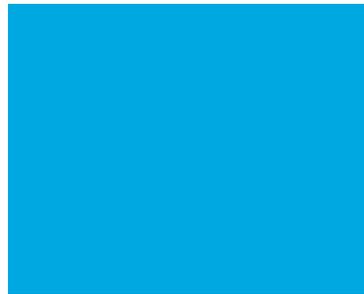




# Women's Preventive Services Initiative (WPSI) 2021 Coding Guide

## Screening for Gestational Diabetes Mellitus



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**Clinical Recommendations:** The Women's Preventive Services Initiative recommends screening pregnant women for gestational diabetes mellitus after 24 weeks of gestation (preferably between 24 and 28 weeks of gestation) in order to prevent adverse birth outcomes. Screening with a 50-g oral glucose challenge test (followed by a 3-hour 100-g oral glucose tolerance test if results on the initial oral glucose challenge test are abnormal) is preferred because of its high sensitivity and specificity.

The Women's Preventive Services Initiative suggests that women with risk factors for diabetes mellitus be screened for preexisting diabetes before 24 weeks of gestation—ideally at the first prenatal visit, based on current clinical best practices.

**Implementation Considerations:** The Women's Preventive Services Initiative recommends screening pregnant women for gestational diabetes mellitus after 24 weeks of gestation to prevent adverse birth outcomes. Risk factors for diabetes mellitus that may help identify women for early screening include, but are not limited to, those identified by the Institutes of Medicine (now National Academies of Science, Engineering, and Medicine). The optimal test for screening prior to 24 weeks of gestation is not known. However, acceptable modalities may include a 50-g oral glucose challenge test, a 2-hour 75-g oral glucose tolerance test, a hemoglobin A<sub>1c</sub> test, a random plasma glucose test, or a fasting plasma glucose test. If early screening is normal, screening with a 50-g oral glucose challenge test should be conducted at 24 to 28 weeks of gestation as described above.

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#### PROCEDURE CODES

The following CPT codes are used for GDM screening:

- |              |   |
|--------------|---|
| <b>82947</b> | Glucose; quantitative, blood (except reagent strip)<br>This test is often called a fasting blood sugar (FBS).               |
| <b>82951</b> | Glucose; tolerance test (GTT), three specimens (includes glucose)   |
| <b>82952</b> | Glucose; tolerance test, each additional beyond three specimens (List separately in addition to code for primary procedure) |
| <b>82962</b> | Glucose; blood by glucose monitoring device(s) cleared by the FDA specifically for home use                                 |

Glucose monitoring devices may also be used in physician offices or in clinics.

- |              |   |
|--------------|---|
| <b>83037</b> | Hemoglobin; glycosylated (A <sub>1c</sub> ) by device cleared by FDA for home use |
|--------------|---|

This code (**83037**) may be billed when provided at the physician's office and not for use to report a test result when obtained in a patient's home by the patient or family members.

## RECOMMENDATION CODING

In 2018, a new Category III code **0488T** was added to CPT to report services provided for diabetes mellitus prevention.

New CPT code **0488T, Preventive behavior change, online/electronic structured intensive program for prevention of diabetes using a standardized diabetes prevention program curriculum, provided to an individual, per 30 days**, was developed in addition to already existing Diabetes Prevention Program (DPP) Code **0403T, Preventive behavior change, intensive program of prevention of diabetes using a standardized diabetes prevention program curriculum, provided to individuals in a group setting, minimum 60 minutes, per day**.

The CPT Assistant (August 2018) lists the following eligibility requirements for referral to a Centers for Disease Control and Prevention (CDC)-recognized lifestyle change program:

- ✔ Be at least 18 years old, **AND**
- ✔ Be overweight (body mass index  $\geq 25$  kg/m<sup>2</sup>;  $\geq 23$  kg/m<sup>2</sup>, if Asian American), **AND**
- ✔ Have no previous diagnosis of type 1 or type 2 diabetes mellitus, **AND**
- ✔ Have a blood-test result in the prediabetes range within the past year:
  - Hemoglobin A<sub>1c</sub>: 5.7%–6.4%, or
  - Fasting plasma glucose: 100–125 mg/dL, or
  - Two-hour plasma glucose (after a 75-gm glucose load): 140–199 mg/dL, or
  - Be previously diagnosed with gestational diabetes

After training, the enrolled patient receives educational lessons each week through online or electronic technology based on a standardized curriculum for education on lifestyle change in combination with lifestyle health coaching.

## DIAGNOSIS CODES

Per ICD-10-CM, “Screening is the testing for disease or disease precursors in seemingly well individuals so that early detection and treatment can be provided for those who test positive for the disease.” If the reason for the visit is the screening exam, then a screening code may be a first listed code. If the screening is done during an office visit, then a screening code may be reported as an additional code.

<b>Z13.1</b>	Encounter for screening for diabetes mellitus
<b>Z36.89</b>	Encounter for other specified antenatal screening

For diagnosed gestational diabetes mellitus, codes from subcategory **O24.4, Gestational diabetes mellitus**, should be assigned. No other code from category **O24, Diabetes mellitus in pregnancy, childbirth, and the puerperium**, should be used with a code from **O24**.