CareSource | NETWORK Notification

Notice Date: November 25, 2026
To: Georgia Medicaid Providers
From: CareSource
Subject: FAQ: Maternity Billing Changes 2026-2027
Effective Date: January 1, 2027

Summary

American Medical Association (AMA) changes effective January 1, 2027 will unbundle OB global billing. Refer to the official *2027 Current Procedural Terminology (CPT) Manual—Maternity Care Services* for complete coding and billing requirements.

Unbundling OB Codes – Quick Answers	
PROVIDER QUESTION	**BILLING GUIDANCE**
What happens to current global maternity codes?	Effective January 1, 2027, traditional global maternity codes will be deleted. Report maternity care by phase: antepartum care, labor management, delivery care and postpartum care.
How will antepartum visits be billed in 2027?	Report each encounter using the appropriate E/M code for the location and service provided. Select the E/M level using standard time or medical decision-making rules.
Pregnancy diagnosed late in 2026 What should be billed?	Pregnancy confirmation during a problem-oriented or preventive visit is **not** part of antepartum care. Report the appropriate E/M service code: 99202–99205; 99211–99215; 99242–99245; 99281–99285; 99384–99386; or 99394–99396. For the second or third office visit, use the appropriate E/M code. Use 59425 for 4–6 antepartum visits or 59426 for 7 or more visits. For telehealth, use codes 98000–98016.
For pregnancies beginning in the ***last 10 weeks of 2026*** with an EDD in 2027, should we capture the EDD and include modifier TH, or how should care be billed?	**2026 antepartum care:** Capture the EDD to identify pregnancies. For 2026 antepartum care use: • 1–3 visits: Individual E/M codes; use TH modifier to identify maternity-related visits. • 4–6 visits: CPT 59425 • 7+ visits: CPT 59426
Twin A is delivered 12/31/2026 and Twin B on 1/1/2027.	**Twin A—12/31/2026:** Apply 2026 guidelines. Global bundles remain active through 12/31/2026; bill the appropriate delivery code. **Twin B—1/1/2027:** Apply 2027 guidelines. Report 59431 for normal vaginal delivery or 59432 for VBAC. Report labor

	management codes in the 59080–59083 range, or the new 2027 initial/subsequent labor codes, on the dates services occurred. If performed, separately bill qualifying third- or fourth-degree laceration repairs using 59433 or 59434.
Is postpartum care included in the delivery code?	Routine postpartum care provided on the same calendar date as delivery is included in the delivery service. Postpartum care provided on later dates may be reported separately using the appropriate inpatient, discharge, outpatient, telehealth or home E/M code.
How should services be reported when more than one clinician or practice provides maternity care?	Each clinician or practice should report the phase and services personally provided, following CPT guidelines and the health plan's billing requirements.

Resources:
AMA Coding Primer: CPT 2027 Maternity Care Services

GA-MED-P-6369188 DCH Approved: 11/25/2026