

# Report of Pregnancy Form (ROP)

A timely electronic ROP ensures that pregnant individuals are eligible for Medicaid services as early as possible, through the pregnancy and immediate post-partum period



## Provider Benefits and purpose of submitting an electronic ROP:

- A payment may be made for one report of a pregnancy that is diagnosed in conjunction with an E&M service not associated with a normal obstetrics/gynecology visit. It may be submitted on either form ODM 10257, "Report of Pregnancy (ROP)" (07/2021), or its web-based equivalent. *This payment is separate from the payment for the E&M service (or the encounter or visit of which the E&M service is part).*
- Serves as pregnancy notification to managed care plans and initiation of timely health care and connection to added resources, like care management, WIC, and Evidenced-Based Home Visiting.
- Maintains a pregnant woman's Medicaid eligibility without disruption in coverage that in turn, provides payment to providers in a timely manner.



## Payment for Completing the ROP:

After completing the ROP, submit a claim based on the guidelines below:

Code + modifier	Description	Fee Schedule Amount*
HCCPS <b>T1023</b>	ROP electronic submission	\$30

*Reference: Medicaid rule 5160-21-04 (Pregnancy Related Services); 5160-1-60 Appendix DD fee schedule, effective 7/1/2021*

## Submitting the ROP



### Submitting the ROP using NurtureOhio is Easy!

1. Open the NurtureOhio website to access the ROP: <http://www.nurtureohio.com>
2. Users must be registered in the Medicaid Information Technology System (MITS). For username or password issues: <http://www.ohmits.com/>
3. Difficulties with NurtureOhio, email: [Progesterone\\_PIP@medicaid.ohio.gov](mailto:Progesterone_PIP@medicaid.ohio.gov)



## Questions? Contact of the Managed Care Plans

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<b>Timicia Swallen</b> 1-866-246-4356 Ext. 24532 <a href="mailto:TSwallen@Centene.com">TSwallen@Centene.com</a>	<b>Diana Holtrup</b> 937.224.3300 <a href="mailto:Diana.Holtrup@CareSource.com">Diana.Holtrup@CareSource.com</a>	<b>Shelby Burch</b> 1-614-516-4402 <a href="mailto:Shelby.Burch@MolinaHealthcare.com">Shelby.Burch@MolinaHealthcare.com</a>
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