



Amerigroup
RealSolutions
in healthcare

OB/GYN Encounter Form

Mail to:
Claims Department
Amerigroup
P.O. Box 61010
Virginia Beach, VA 23466-1010

Member Information		Provider Information		
Last Name:		Provider Name:		
First Name:		Phone #:	Provider ID #:	
Member ID #:		Date of Birth:	Fax #:	Date of Visit:
Address:				

Level of Care: Please circle at least one CPT (Procedure) Code.

Preventive/Physical			Office Visit		Counseling	
Age	New Patient	Established Patient	New Patient	Established Patient	Code	Length of Time
12-17	99384	99394	99201	99211	99401	15 minutes
18-39	99385	99395	99202	99212	99402	30 minutes
40-64	99386	99396	99203	99213	99403	45 minutes
65+	99387	99397	99204	99214	99404	60 minutes
			99205	99215		

Diagnosis Codes: Please indicate primary, secondary, and tertiary codes (1, 2, 3).

***If elements of wellness care were performed, please mark a wellness code as a secondary diagnosis.**

Well Care/Preventive ICD-9 Codes	___ V67.9 Follow-up Exam, Unspec	___ 645.03 Prolonged, Antepartum
___ V70.0 Routine Physical (12+)	Contraception	___ 651.03 Twins, Antepartum
___ V70.3 General Medical Exam	___ V25.01 Rx Oral Contraceptive	Menstruation
___ V70.5 Health Exam	___ V25.02 Initiation, Other Contrcp Method	___ 636.8 Abnrml Bldg Genital Tract
___ V70.6 Health Exam in pop survey	___ V25.09 Mgmt, Contrcp, Other	___ 626.0 Amenorrhea
___ V70.8 Other specified gen med exam	___ V25.40 Surveillance, Unspecified	___ 625.3 Dysmenorrhea
___ V70.9 Gnrl Medical Exam, unspec	___ V25.41 Surveillance, Oral Cntrcp	___ 626.4 Irregular Menstrual Cycle
Counseling ICD-9 Codes	___ V25.49 Surveillance, Other Method	___ 627.2 Menopause/Clmctrc sts
___ V65.3 Dietary Counseling	Cancer Screening	___ 626.6 Metrorrhagia
___ V65.41 Exercise	___ 233.1 CA in Situ, Cx	___ 627.1 Postmenopausal Bldg
___ V65.42 Substance Use/Abuse	___ 622.1 Dysplas Cx (Uteri)	___ 626.2 XS/Frequent Menstruation
___ V65.43 Injury Prevention	___ 218.9 Leiomyo Uter, Unspec	GYN
___ V65.44 HIV Counseling	___ 184.8 Malign Genital Neoplasm	___ 789.00 Abdominal Pain
___ V65.45 STD Counseling	___ 180.9 Malign Neoplasm Cx	___ 112.9 Candidiasis, Unspec
___ VTOB Tobacco	Pregnancy Postpartum	___ 112.1 Candidiasis, Vulva/Vagina
Other Preventive ICD-9 Codes	___ 637.91 Ab. Legal, Incomplete	___ 616.0 Cervicitis/Endocervicitis
___ V76.2 Routine Pap Smear	___ 635.92 Ab. Legal Induced, Complete	___ 595.0 Cytitis, Acute
___ V22.2 Pregnant State, Incidental	___ 634.91 Ab. Spon, Incomplete	___ 628.9 Infertility, Female

___ V22.1 Pregnancy, Supervision Other Norm	___ 634.92 Ab.Spon, Complete	___ 616.9 Inflam dx of cx/vag/vulva
___ V23.7 Supervision, Hi Risk, Insuff Prenatal	___ 640.03 Ab. Threatened, Anteptrtm	___ 623.5 Leukorrhea
___ V28.8 Screening, Antenatal, Other spec.	___ 669.71 C-sect w/o mention of indic	___ 623.8 Noninflam dx of Vagina
___ V23.89 Supervision, Other High Risk	___ 650 Delivery, Normal	___ 620.2 Ovarian Cyst
___ V23.9 Supervision, Unspec High Risk	___ 633.9 Ectopic, Unspec	___ 614.9 PID
___ V27.0 Mother with single liveborn	___ 655.83 Fetal Abnormalities	___ 618.8 Uterine Prolapse
___ V61.5 Multiparity	___ 656.3 Fetal Distress	___ 599.0 UTI
___ V24.1 Postpartum Care and Exam Lactat Mthr	___ 656.53 Fetal Growth, Poor	___ 618.0 Vaginal Prolapse
___ V24.2 Postpartum, Routine	___ 656.63 Fetal Growth, Excess	___ 054.11 Vulvovag, Herp
___ V67.0 Follow-up Exam After Surgery	___ 644.13 False Labor	___ 131.01 Vulvolag, Trich
___ V58.49 After Care for Surgery	___ 653.53 Fetal Growth, Unusually Large	___ Other
___ V72.4 Test, Pregnancy Unconfirmed	___ 648.8 Gestational Diabetes	___ Other
___ V61.7 Unwanted Pregnancy, Other	___ 659.63 Pregnancy > 35 years of age	___ Other
___ Other	___ Other	___ Other

Laboratory Tests/Screening – For Data Collection Purposes

___ 83036 HbA1c	___ 84520 BUN	___ 82951 GTT	___ 87110 Chlamydia (culture)
___ 83655 Blood Lead	___ 80061 Lipid Panel	___ 86901 Rh	___ 87590 GC (direct probe)
___ 88141 Pap Smear	___ 84439 Free T4	___ 86762 Rubella Titer	___ 87340 HepB surface antgn
___ 85025 CBC With Diff	___ 87086 Urine Culture	___ 82106 Alpha-Fetoprotein	___ 87528 Herpes simplex (dir)
___ 86900 Blood Typing	___ 81000 Urinalysis	___ 83661 Fetal Lung Mat (L/S)	___ 87207 Herpes (smear)
___ 86580 Mantoux Test (TB)	___ 84550 Uric Acid	___ 86592 VDRL	___ 82043 Microalbumin Quantity

Print Physician Name

Physician Signature and Date of Signature