



# HCPCS Code S4005 Details

## Code Symbols

: Female

: Not payable by Medicare

## Code Descriptor

Interim labor facility global (labor occurring but not resulting in delivery)

## Fee Schedule

### Medicare Physician Fee Schedules (MPFS)

Sources: 2019 National Physician Fee Schedule Relative Value File, GPCI19, NATIONAL PHYSICIAN FEE SCHEDULE RELATIVE VALUE FILE CALENDAR YEAR 2019, MCR-MUE-PractitionerServices

Publisher: CMS

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Medicare Carrier/Locality: ALASKA\*\* 01-02102

Conversion Factor: 36.0391

**Note:** A value in "Medicare Fees" does not necessarily indicate payment. Scroll down to see Medicare's status on the code for coverage specifics. Medicare has assigned relative value units (RVUs) to codes the agency does not cover to allow payers that follow the resource based relative value system to have an agreed upon valuation rate.

## Code Status I

I = Not valid for Medicare purposes. Medicare uses another code for reporting of, and payment for, these services. (Code NOT subject to a 90 day grace period.)

### Medicare Fees

	National	Adjusted	26	TC	53
Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Non Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

### RVU - Nonfacility

	National	Adjusted	26	TC	53
Work RVU:	0.00	0.00			0.00
PE RVU:	0.00	0.00			0.00
Malpractice RVU:	0.00	0.00			0.00



Total RVU:	0.00	0.00	0.00	0.00	0.00
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RVU - Facility					
	National	Adjusted	26	TC	53
Work RVU:	0.00	0.00			0.00
PE RVU:	0.00	0.00			0.00
Malpractice RVU:	0.00	0.00			0.00
Total RVU:	0.00	0.00	0.00	0.00	0.00

Global & Other Info	
	Global Split
Preoperative %:	0
Intraoperative %:	0
Postoperative %:	0
Total RVU:	0
Global Period (days):	XXX
<b>XXX</b> = The global concept does not apply to the code.	
Radiology Diagnostic Tests :	99
<b>99</b> = Concept does not apply	
PC/TC Indicator :	9
<b>9</b> = Not Applicable--Concept of a professional/technical component does not apply	
Endoscopic Base Code :	None

Modifier Guidelines		
	Modifier	Rules(Click on rules for Details)
MULT PROC	51	Concept does not apply
<b>51</b> = Multiple Procedures: When multiple procedures, other than E/M services, Physical Medicine and Rehabilitation services or provision of supplies (eg, vaccines), are performed at the same session by the same provider, the primary procedure or service may be reported as listed. The additional procedure(s) or service(s) may be identified by appending modifier 51 to the additional procedure or service code(s). Note: This modifier should not be appended to designated "add-on" codes		
<b>9</b> = Concept does not apply		
BILAT SURG	50	Concept does not apply
<b>50</b> = Bilateral Procedure: Unless otherwise identified in the listings, bilateral procedures that are performed at the same operative session, should be identified by adding modifier 50 to the appropriate five digit code.		



<b>9</b> = Concept does not apply		
ASST SURG	80	Concept does not apply
<b>80</b> = Assistant Surgeon: Surgical assistant services may be identified by adding modifier 80 to the usual procedure number(s).		
<b>9</b> = Concept does not apply		
CO-SURG	62	Concept does not apply
<b>62</b> = Two Surgeons: When two surgeons work together as primary surgeons performing distinct part(s) of a procedure, each surgeon should report his/her distinct operative work by adding modifier 62 to the procedure code and any associated add-on code(s) for that procedure as long as both surgeons continue to work together as primary surgeons. Each surgeon should report the co-surgery once using the same procedure code. If additional procedure(s) (including add-on procedure(s) are performed during the same surgical session, separate code(s) may also be reported with modifier 62 added. Note: If a co-surgeon acts as an assistant in the performance of additional procedure(s) during the same surgical session, those services may be reported using separate procedure code(s) with modifier 80 or modifier 82 added, as appropriate.		
<b>9</b> = Concept does not apply		
TEAM SURG	66	Concept does not apply
<b>66</b> = Surgical Team: Under some circumstances, highly complex procedures (requiring the concomitant services of several physicians, often of different specialties, plus other highly skilled, specially trained personnel, various types of complex equipment) are carried out under the "surgical team" concept. Such circumstances may be identified by each participating physician with the addition of modifier 66 to the basic procedure number used for reporting services.		
<b>9</b> = Concept does not apply		
MINIMUM ASST SURG	81	Concept does not apply.
<b>81</b> = Minimum Assistant Surgeon: Minimum surgical assistant services are identified by adding modifier 81 to the usual procedure number.		
<b>9</b> = Concept does not apply.		
ASST SURG (QUALIFIED RESI. NA)	82	Concept does not apply
<b>82</b> = Assistant Surgeon (when qualified resident surgeon not available): The unavailability of a qualified resident surgeon is a prerequisite for use of modifier 82 appended to the usual procedure code number(s)		
<b>9</b> = Concept does not apply.		
PHYSICIAN SUPERVISION	*PS	Concept does not apply.
<b>PS</b> = This field is for use in post payment review.		
<b>9</b> = Concept does not apply		



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## LCD Details

### LCD Details for S4005

The chosen state has no LCD for this code/title. Please search All States to see if another state has an LCD for this code/title.

### Article Details for S4005

The chosen state has no Article for this code/title. Please search All States to see if another state has an Article for this code/title.

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## MEDICARE CCI

0 - Can NOT be billed under any circumstances		
1 - A CCI-associated modifier on the Col. 2 code will override the edit.		
Col B Code	Reason Edit	Modifier Indicator
No data available.		

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## Medicaid CCI Edits Alert

0 - Can NOT be billed under any circumstances		
1 - A CCI-associated modifier on the Col. 2 code will override the edit.		
Col B Code	Reason Edit	Modifier Indicator
No data available.		

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## ICD-10 Crossref

- 044.00 Complete placenta previa NOS or without hemorrhage, unspecified trimester
- 044.01 Complete placenta previa NOS or without hemorrhage, first trimester
- 044.02 Complete placenta previa NOS or without hemorrhage, second trimester
- 044.03 Complete placenta previa NOS or without hemorrhage, third trimester
- 044.10 Complete placenta previa with hemorrhage, unspecified trimester
- 044.11 Complete placenta previa with hemorrhage, first trimester
- 044.12 Complete placenta previa with hemorrhage, second trimester
- 044.13 Complete placenta previa with hemorrhage, third trimester
- 044.20 Partial placenta previa NOS or without hemorrhage, unspecified trimester
- 044.21 Partial placenta previa NOS or without hemorrhage, first trimester
- 044.22 Partial placenta previa NOS or without hemorrhage, second trimester



- O44.23 Partial placenta previa NOS or without hemorrhage, third trimester
- O44.30 Partial placenta previa with hemorrhage, unspecified trimester
- O44.31 Partial placenta previa with hemorrhage, first trimester
- O44.32 Partial placenta previa with hemorrhage, second trimester
- O44.33 Partial placenta previa with hemorrhage, third trimester
- O60.00 Preterm labor without delivery, unspecified trimester
- O60.02 Preterm labor without delivery, second trimester
- O60.03 Preterm labor without delivery, third trimester
- O62.3 Precipitate labor
- O62.8 Other abnormalities of forces of labor
- O62.9 Abnormality of forces of labor, unspecified
- O63.0 Prolonged first stage (of labor)
- O63.1 Prolonged second stage (of labor)
- O63.9 Long labor, unspecified
- O64.1XX0 Obstructed labor due to breech presentation, not applicable or unspecified
- O64.1XX1 Obstructed labor due to breech presentation, fetus 1
- O64.1XX2 Obstructed labor due to breech presentation, fetus 2
- O64.1XX3 Obstructed labor due to breech presentation, fetus 3
- O64.1XX4 Obstructed labor due to breech presentation, fetus 4
- O64.1XX5 Obstructed labor due to breech presentation, fetus 5
- O64.1XX9 Obstructed labor due to breech presentation, other fetus
- O64.2XX0 Obstructed labor due to face presentation, not applicable or unspecified
- O64.2XX1 Obstructed labor due to face presentation, fetus 1
- O64.2XX2 Obstructed labor due to face presentation, fetus 2
- O64.2XX3 Obstructed labor due to face presentation, fetus 3
- O64.2XX4 Obstructed labor due to face presentation, fetus 4
- O64.2XX5 Obstructed labor due to face presentation, fetus 5
- O64.2XX9 Obstructed labor due to face presentation, other fetus
- O64.3XX0 Obstructed labor due to brow presentation, not applicable or unspecified
- O64.3XX1 Obstructed labor due to brow presentation, fetus 1
- O64.3XX2 Obstructed labor due to brow presentation, fetus 2
- O64.3XX3 Obstructed labor due to brow presentation, fetus 3
- O64.3XX4 Obstructed labor due to brow presentation, fetus 4
- O64.3XX5 Obstructed labor due to brow presentation, fetus 5
- O64.3XX9 Obstructed labor due to brow presentation, other fetus
- O64.4XX0 Obstructed labor due to shoulder presentation, not applicable or unspecified
- O64.4XX1 Obstructed labor due to shoulder presentation, fetus 1



- O64.4XX2 Obstructed labor due to shoulder presentation, fetus 2
- O64.4XX3 Obstructed labor due to shoulder presentation, fetus 3
- O64.4XX4 Obstructed labor due to shoulder presentation, fetus 4
- O64.4XX5 Obstructed labor due to shoulder presentation, fetus 5
- O64.4XX9 Obstructed labor due to shoulder presentation, other fetus
- O64.5XX0 Obstructed labor due to compound presentation, not applicable or unspecified
- O64.5XX1 Obstructed labor due to compound presentation, fetus 1
- O64.5XX2 Obstructed labor due to compound presentation, fetus 2
- O64.5XX3 Obstructed labor due to compound presentation, fetus 3
- O64.5XX4 Obstructed labor due to compound presentation, fetus 4
- O64.5XX5 Obstructed labor due to compound presentation, fetus 5
- O64.5XX9 Obstructed labor due to compound presentation, other fetus
- O64.8XX0 Obstructed labor due to other malposition and malpresentation, not applicable or unspecified
- O64.8XX1 Obstructed labor due to other malposition and malpresentation, fetus 1
- O64.8XX2 Obstructed labor due to other malposition and malpresentation, fetus 2
- O64.8XX3 Obstructed labor due to other malposition and malpresentation, fetus 3
- O64.8XX4 Obstructed labor due to other malposition and malpresentation, fetus 4
- O64.8XX5 Obstructed labor due to other malposition and malpresentation, fetus 5
- O64.8XX9 Obstructed labor due to other malposition and malpresentation, other fetus
- O64.9XX0 Obstructed labor due to malposition and malpresentation, unspecified, not applicable or unspecified
- O64.9XX1 Obstructed labor due to malposition and malpresentation, unspecified, fetus 1
- O64.9XX2 Obstructed labor due to malposition and malpresentation, unspecified, fetus 2
- O64.9XX3 Obstructed labor due to malposition and malpresentation, unspecified, fetus 3
- O64.9XX4 Obstructed labor due to malposition and malpresentation, unspecified, fetus 4
- O64.9XX5 Obstructed labor due to malposition and malpresentation, unspecified, fetus 5
- O64.9XX9 Obstructed labor due to malposition and malpresentation, unspecified, other fetus
- O71.1 Rupture of uterus during labor
- O75.2 Pyrexia during labor, not elsewhere classified
- O75.3 Other infection during labor

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**CPT Crossref**

No data available.

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**Modifier Crossref**

KX



Requirements specified in the medical policy have been met

Q5

Service furnished under a reciprocal billing arrangement by a substitute physician; or by a substitute physical therapist furnishing outpatient physical therapy services in a health professional shortage area, a medically underserved area, or a rural area

Q6

Service furnished under a fee-for-time compensation arrangement by a substitute physician; or by a substitute physical therapist furnishing outpatient physical therapy services in a health professional shortage area, a medically underserved area, or a rural area

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## **HCPCS Lay Terms**

This code covers the services a pregnant patient receives when she arrives at a facility in labor. Use this code when the labor does not result in delivery.

### **Clinical Responsibility**

A birthing center, a facility specializing in childbirth, administers services to a patient when she is in labor. Sometimes labor does not result in delivery. Labor is the process of birthing a child, beginning with contractions of the uterine muscles and ending with the delivery of the baby and placenta outside the body of the mother.

### **Terminology**

**Placenta:** A special organ that develops within the womb during pregnancy that facilitates metabolic exchange between the fetus, or developing baby, and the mother.

**Uterus:** A hollow, muscular, pear shaped organ located between the base of the bladder and the rectum; also known as the womb.

### **Tips**

Use S codes to represent drugs, services, and supplies, which do not possess a permanent national code. However, private sector and Medicaid require these codes to implement policies, programs, or claims processing and meet their particular needs. These codes are not payable by Medicare.