

## HEDIS® Tip Sheet

# Prenatal and Postpartum Care (PPC) Timeliness of Prenatal Care

## Measure Description

The percentage of deliveries of live births on or between October 8<sup>th</sup> of the year prior to the measurement year and October 7<sup>th</sup> of the measurement year that received a prenatal care visit in the first trimester, on or before the enrollment start date *or* within 42 days of enrollment in the health plan, with an OB/GYN, other prenatal care practitioner or PCP. For visits to a PCP, a diagnosis of pregnancy must be present.

Documentation in the medical record must include a note with the date when the prenatal care visit occurred and evidence of one of the following:

- Documentation indicating the member is pregnant or references to the pregnancy, for example:
  - Documentation in a standardized prenatal flow sheet, *or* documentation of LMP, EDD or gestational age *or* positive pregnancy test result, *or* documentation of gravidity and parity, *or* documentation of complete obstetrical history, *or* documentation of prenatal risk assessment and counseling/education.
- A basic physical obstetrical examination that includes auscultation for fetal heart tone, *or* pelvic exam with obstetric observations, *or* measurement of fundus height (a standardized prenatal flow sheet may be used).
- Evidence that a prenatal care procedure was performed, such as:
  - Screening test in the form of an obstetric panel (must include all the following: hematocrit, differential WBC count, platelet count, hepatitis B surface antigen, rubella antibody, syphilis test, RBC antibody screen, Rh and ABO blood typing), *or* TORCH antibody panel alone, *or* rubella antibody test/titer with an Rh incompatibility (ABO/Rh) blood typing, *or* ultrasound of a pregnant uterus.

**Product Lines:** Commercial, Medicaid, Exchange

**Event Diagnosis:** Delivered a live birth on or between October 8<sup>th</sup> of the year prior to the measurement year (MY) to October 7<sup>th</sup> of the measurement year.

2024			2025									
Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct
MY 2025 Event Diagnosis Period (Oct 8, 2024 – Oct 7, 2025)												

2024												2025											
Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct		
MY 2025 Prenatal Care Visit Timeframe (Jan 8, 2024 – Oct 6, 2025)																							

## Codes Included in the Current HEDIS® Measure

Description	Code
Prenatal Visits (For compliance, use in conjunction with a Pregnancy Diagnosis code)	<b>CPT:</b> 98966-98968, 98970-98972, 98980, 98981, 99202-99205, 99211-99215, 99242-99245, 99421-99423, 99441-99443, 99457, 99458, 99483 <b>HCPCS:</b> G0071, G0463, G2010, G2012, G2250-G2252, T1015
Stand Alone Prenatal Visit	<b>CPT:</b> 99500 <b>CPT II:</b> 0500F, 0501F, 0502F <b>HCPCS:</b> H1000-H1004 Note: Do <b>not</b> include codes with a CPG CAT II Modifier (1P-3P, 8P)

Prenatal Bundled Services	<b>CPT:</b> 59400, 59425, 59426, 59510, 59610, 59618 <b>HCPCS:</b> H1005 Note: Because bundled service codes are used on the date of delivery, these codes may be used only if the claim form indicates when prenatal care was initiated; <b><u>claim form must include prenatal visit Date of Service (DOS).</u></b>
Pregnancy Diagnosis (for PCP, use these codes and one of the codes above)	<b>ICD-10:</b> O09.00-O16.09, O20.0-O26.93, O28.0-O36.93X9, O40.1XX0-O48.1, O60.00-O60.03, O71.00-O71.9, O88.011-O88.819, O91.011-O92.79, O98.011-O99.891, O9A.111-O9A.519, Z03.71-Z03.75, Z03.79, Z32.01, Z34.00-Z34.93, Z36.0-Z36.9

## Ways Providers can Improve HEDIS® Performance

- Schedule pre-natal care visits starting in the first trimester or within 42 days of enrollment with the health plan.
- A **telehealth** appointment with a pregnancy-related diagnosis code during the first trimester or within 42 days of enrollment with the health plan meets compliance for this measure.
- Ask front office staff to prioritize new pregnant patients and ensure prompt appointments for any patient calling for a pregnancy visit to make sure the appointment is in the first trimester or within 42 days of enrollment with the health plan.
- Have a direct referral process to OB/GYN in place.
- Complete and submit Molina's pregnancy notification as soon as a pregnancy diagnosis is confirmed.
- Refer Molina patients to our Pregnancy program.

## Ways Health Plans can Improve HEDIS® Performance

- Support members to schedule prenatal care visits starting in the first trimester or within 42 days of enrollment with the health plan.
- Utilize maternity telehealth provider to ensure timely prenatal visits.
- Provide culturally and linguistically appropriate education to members on the importance of prenatal and postpartum care for them and their baby.
- Offer member incentive for attending prenatal visits.
- Consider value added benefits for members to incentivize gap closure such as groceries, diapers, or car seats.
- Audit, identify, and educate providers who are not conducting timely prenatal visits.
- Identify potential barriers to receiving care when pregnancy is confirmed. Discuss with members ways barriers can be overcome.
- Utilize data available for early pregnancy identification.
- Follow members closely who have or had a substance abuse or mental health diagnosis and initiate appropriate referrals. Refer to high-risk pregnancy team.

## Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.

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