

HEDIS[®] Tips: Timeliness of Prenatal Care (PPC)

MEASURE DESCRIPTION

The percentage of live birth deliveries that received a prenatal care visit with an OB/GYN or other prenatal care practitioner, or PCP* in the first trimester, on or before the enrollment start date or within 42 days of enrollment.

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

- Documentation indicating the woman is pregnant or references to the pregnancy; for example:
 - Documentation in a standardized prenatal flow sheet, **or** documentation of LMP, EDD or gestational age, 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 of 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.

*For PCP visits a diagnosis of pregnancy must be present along with any of the above.

CODES INCLUDED IN THE CURRENT HEDIS[®] MEASURE

Description	Code
Prenatal Visits (for compliance, use in conjunction with a Pregnancy Diagnosis code)	CPT[®] : 99201-99205, 99211-99215, 99241-99245, 99500, 99483 CPT[®]II : 0500F, 0501F, 0502F HCP[®]CS : H1000-H1004, T1015, G0463
Prenatal Bundled Services*	CPT[®] : 59400, 59425, 59426, 59510, 59610, 59618 HCP[®]CS : H1005
Pregnancy Diagnosis (for PCP, use these codes and one of the codes above)	ICD-10 : O09.-O16., O20.-O26., O28.-O36., O40.-O48., O60.0, O71., O88., O91., O92., O98., O99., O9A., Z03.7, Z34, Z36
Telephone Visits	CPT[®] : 98966-98968, 99441-99443
Telehealth Modifier	95, GT with POS : 02
Online Assessments (E-visits or Virtual check-in)	CPT[®] : 98969-98972, 99421-99423, 99444, 99457 HCP[®]CS : G0071, G2010, G2012, G2061-G2063

*Please 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; **claim form must include Date of Service (DOS)**.

HOW TO IMPROVE HEDIS[®] SCORES

- Schedule prenatal care visits starting in the first trimester or within 42 days of enrollment.
- A **telephone, telehealth, e-visit or virtual check-in** appointment with a pregnancy-related diagnosis code during the first trimester or within 42 days of enrollment 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.
- 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.

"The USPSTF recommends that all women who are planning or capable of pregnancy take a daily supplement containing 0.4 to 0.8 mg (400 to 800 µg) of folic acid."

Reference: Folic acid for the prevention of neural tube defects: Preventive medication. Recommendation: Folic Acid for the Prevention of Neural Tube Defects: Preventive Medication | United States Preventive Services Taskforce. (2017, January 10). Retrieved from <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/folic-acid-for-the-prevention-of-neural-tube-defects-preventive-medication>

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