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 one of the following:

- Documentation indicating the woman is pregnant or references to the pregnancy; for example:
 - 0 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	CPT® : 99201-99205, 99211-99215, 99241-99245, 99500, 99483
conjunction with a Pregnancy Diagnosis	CPT®II : 0500F, 0501F, 0502F
code)	HCPCS: H1000-H1004, T1015, G0463
Prenatal Bundled Services*	CPT® : 59400, 59425, 59426, 59510, 59610, 59618
	HCPCS: H1005
Pregnancy Diagnosis (for PCP, use these	ICD-10: 009016., 020026., 028036., 040048., 060.0, 071.,
codes and one of the codes above)	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	CPT [®] : 98969-98972, 99421-99423, 99444, 99457
(E-visits or Virtual check-in)	HCPCS: 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).

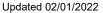
HOW TO IMPROVE HEDIS® SCORES

- 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-preventivemedication

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