

# HEDIS® News You Can Use

Aetna Better Health® of West Virginia

December 2021



## Let's Improve Prenatal and Postpartum Care Together!

### Prenatal and Postpartum Care (PPC) Prenatal

#### **i** Measure Requirements:

The percentage of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year.

**Prenatal** - The percentage of deliveries that received a prenatal care visit (with an OB/GYN or PCP) in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization.

#### **Documentation must include the visit date and evidence of one of the following:**

- Documentation indicating pregnancy, such as:
  - Documentation in a standardized prenatal flow sheet, documentation of LMP, EDD or gestational age, a positive pregnancy test result, documentation of gravidity and parity, or documentation of prenatal risk assessment and counseling/education
- A basic physical obstetrical examination that includes:
  - Auscultation for fetal heart tone, pelvic exam with obstetric observations, or measurement of fundus height (a standardized prenatal flow sheet may be used)
- Prenatal Care Procedure, such as:
  - obstetric panel, TORCH antibody panel alone, rubella antibody test/titer with an Rh incompatibility (ABO/Rh) blood typing, or ultrasound/echography

#### **Prenatal Immunization Status (PRS)**

- The percentage of deliveries in the Measurement Period in which women had received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations.

### Prenatal and Postpartum Care (PPC) Postpartum

#### **i** Measure Requirements:

**Postpartum** - postpartum visit on or **between 7 & 84 days** after delivery (OB/GYN or PCP)

#### **Documentation must indicate visit date and evidence of one of the following:**

- Pelvic exam, *or*
- Examination of breasts (or notation of breastfeeding), abdomen, weight and BP, *or*
- Notation of postpartum care, including “postpartum care”, “PP care”, “PP check”, “6-week check”, or a preprinted “Postpartum Care” form in which information was documented during the visit, *or*
- Perineal or cesarean incision/wound check, *or*
- Screening for depression, anxiety, tobacco use, substance use disorder, or preexisting mental health disorders, *or*
- Glucose screening for women with gestational diabetes, *or*
- Documentation of any of the following topics:
  - Infant care or breastfeeding, resumption of intercourse, birth spacing or family planning, sleep/fatigue, resumption of physical activity, or attainment of healthy weight



## Coding Information:

**PPC:** Providers will need to bill the delivery code and the postpartum visit code separately to be reimbursed. Use code 59430 to indicate that a postpartum visit occurred.

Refer to the Provider Toolkit for additional coding information.

<https://www.aetnabetterhealth.com/westvirginia/providers/hedis/hedis-toolkit>

**PRS:** For a list of codes, please email us at ABHWVHEDIS@aetna.com.



## Incentive Programs

### Member Incentives Program:

#### Pregnant members (Prenatal Care)

Pack-N-Play: 6 or more prenatal visits.

#### Pregnant members (Postpartum Care)

\$50 Gift Card-: Postpartum visit completed 7-84 days after delivery.

### Provider Incentive Program:

All providers—Encourage postpartum visit on or between 7 & 84 days after delivery For each claim we receive, billed under code 59430, you will receive **\$75**.

Be sure to call our office at 888-348-2922 for more details and the most up-to-date information.



## Common Reasons for Gaps in Care:

- Difficulties arranging childcare to attend appointment
- Members may perceive that a postpartum appointment is not necessary if they feel fine
- No-show appointments requiring rescheduling resulting in late or missed opportunities for a postpartum appointment
- Potential substance use issues impacting member motivation/ability to schedule and attend a postpartum appointment
- Potentially behavioral health and/or substance use appointments taking priority for the member during the postpartum period
- Members' lack of understanding the importance of prenatal immunizations or fear regarding receiving vaccinations while pregnant



## Great Resources

<https://www.acog.org/-/media/project/acog/acogorg/files/pdfs/reports/strategies-for-integrating-immunizations.pdf>

<https://www.acog.org/news/news-releases/2018/04/acog-redesigns-postpartum-care>

<https://www.acog.org/>



## Here for you!

**Thank you for the care you provide to our members!**

For questions or for more information, please contact **Sherry Griffith** at

**ABHWVHEDIS@aetna.com.**



## Best Practices

- Remember telephone visits, e-visits or virtual check-ins can now count for compliance.
- Consider a practice workflow that includes scheduling member postpartum appointments before discharge from the hospital.
- Consider reminder phone calls prior to postpartum visit date.
- Educate members throughout pregnancy and prior to delivery regarding the importance of a postpartum visit, and assess understanding.
- Educate members regarding the importance of influenza and Tdap immunizations during pregnancy.
- Refer to and use the ACOG sheets to help ensure PPC measure compliance.
- Participate in Aetna Better Health of West Virginia provider postpartum incentive program.
- Encourage members to participate in Aetna Better Health of West Virginia prenatal and postpartum member incentive programs.