

HEDIS® News You Can Use

Aetna Better Health® of West Virginia

May 2024



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.

Timeliness of Prenatal Care- 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-E)

- 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.html>

PRS-E: 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:

\$75: Postpartum visit on or between 7 & 84 days after delivery. Claim must be billed with a valid CPT code by provider/group.

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 **Alana Hoover** 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.