

# HEDIS® Tip Sheet

## Prenatal and Postpartum Care (PPC)

Point32Health's HEDIS Tip Sheets outline key features of specific HEDIS measures. These best practices and tips can optimize HEDIS scores and identify opportunities to improve patient care.



The PPC measure assesses the following:

- **Timeliness of Prenatal Care:** the percentage of deliveries that received a prenatal visit in the first trimester on or before the enrollment date, or within 42 days of enrollment in the health plan.
- **Postpartum Care:** the percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery.



We are seeking documentation on **routine outpatient prenatal and postpartum care**.

The delivery admission and/or inpatient hospitalizations do **not** count toward the PPC measure.

### Provider Best Practices and Measure Tips

- **Schedule** the patient's first prenatal visit as soon as the patient believes they are pregnant.
- **Remind** patients of the dates and times of their follow-up appointments.
- **Counsel** patients during pregnancy about the importance of follow-up care after delivery.
- Prior to delivery, **develop** a postpartum plan that identifies the practitioners who will care for the patient and infant.
- **Ensure** that practice workflow includes scheduling of postpartum appointments before patients discharge from the hospital.
- For patients who miss appointments, **offer** telephone or telehealth visits.

### Required Documentation

#### Timeliness of Prenatal Care

**Prenatal care visit to an OB/GYN or 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 indicating the date of the prenatal care visit and **one** of the following:

- Documentation indicating the member is pregnant or references to the pregnancy, for example: Standardized prenatal flow sheet; LMP, EDD or gestational age; a positive pregnancy test result; gravidity and parity; complete obstetrical history; or prenatal risk assessment and counseling/education

## HEDIS® Tip Sheet Prenatal and Postpartum Care (cont.)

- 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 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

### Postpartum Care

#### Postpartum visit to an OB/GYN or other prenatal practitioner, or PCP on or between 7 and 84 days after delivery

Do **not** include postpartum care that was provided in an acute inpatient setting.

**Documentation** in the medical record must include a note indicating the date of the postpartum visit along with **one** of the following:

- Pelvic exam and/or pap test
- Evaluation of weight, BP, breasts, and abdomen
- Notation of postpartum care, including, but not limited to:
  - Notation of "postpartum care," "PP care," "PP check," "6-week check"
  - A preprinted "Postpartum Care" form in which information was documented during the visit
- Perineal or cesarean incision/wound check
- Screening for depression, anxiety, tobacco use, substance use disorder, or pre-existing mental health disorder
- Glucose screening for members with gestational diabetes
- Documentation of any of the following: infant care or breastfeeding; resumption of intercourse, birth spacing or family planning; sleep/fatigue; resumption of physical activity; attainment of healthy weight

### Additional Resources

Visit [The American College of Obstetricians and Gynecologists website](https://www.acog.org) for additional practice guidelines and information, along with educational materials for patients and families.



### Did you know?

- The risk of **low birthweight** is reduced among mothers who initiate prenatal care during the first three months of pregnancy.
- While most patients begin receiving prenatal care in the **first trimester**, rates among certain racial and teenage subpopulations are lower.
- Regular prenatal care checkups **minimize risks** for both mother and baby by allowing healthcare providers to monitor, identify, and address potential issues such as gestational diabetes, preeclampsia, and birth defects.
- Prenatal and postnatal care appointments provide the **opportunity to share experiences and concerns**, allowing for early identification and management of mental health issues like postpartum depression.

