

Prenatal and Postpartum Care (PPC)

Description of Measure

The percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these members, the measure assesses the following facets of prenatal and postpartum care:¹

- Timeliness of Prenatal Care. Deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment.
- Postpartum Care. Deliveries that had a postpartum visit on or between 7 and 84 days after delivery.

Documentation

I. Prenatal Care

Documentation indicating the woman is pregnant or references to the pregnancy, for example one of the following:

- Documentation in a standardized prenatal flow sheet
- Documentation of LMP, EDD or gestational age
- A positive pregnancy test result
- Documentation of gravidity and parity
- Documentation of complete obstetrical history
- Documentation of prenatal risk assessment and counseling/education

Evidence that a prenatal care procedure was performed, such as (one of the following):

- Screening test in the form of an obstetric panel (must include all the following: hematocrit, differential WBC count, platelet count, hepatitis B surface antigen, rubella antibody, syphilis test, RBC antibody screen, Rh and ABO blood typing)
- TORCH antibody panel alone
- A rubella antibody test/titer with an Rh incompatibility (ABO/Rh) blood typing
- Ultrasound of a pregnant uterus
- Ultrasound and lab results alone aren't considered a visit. They must be linked to an office visit with an appropriate practitioner to meet compliance
- A Pap test alone doesn't count as a prenatal care visit but will count toward postpartum care as a pelvic exam

II. Postpartum Care

Documentation in the medical record must include a note indicating the date when the postpartum visit occurred and one of the following:

- Pelvic exam
- Evaluation of weight, BP, breasts, and abdomen
 - Notation of “breastfeeding” is acceptable for the “evaluation of breasts” component.
- 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 visit
- Perineal or cesarean incision/wound check
- Screening for depression, anxiety, tobacco use, substance use disorder, or preexisting mental health disorders
- Glucose screening for women with gestational diabetes
- 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
 - Attainment of healthy weight

Codes

Prenatal Bundled Services	
CPT/CPT II	59400, 59425, 59426, 59510, 59610, 59618
Stand-Alone Prenatal Visits	
CPT/CPT II	99500, 0500F, 0501F, 0502F
Prenatal Visits	
CPT/CPT II	98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99421, 99422, 99423, 99441, 99442, 99443, 99457, 99458, 99483
Pregnancy Diagnosis	
ICD-10	Z34.90, Encounter for supervision of normal pregnancy, unspecified, unspecified trimester
Postpartum Bundled Services	
CPT/ CPT II	59400, 59425, 59426, 59510, 59610, 59618
Postpartum visits	
CPT/ CPTII	57170, 58300, 59430, 99501, 0503F
ICD-10 Diagnosis	Z01.411, Z01.419, Z01.42, Z30.430, Z39.1, Z39.2

Exclusions

Patients are excluded if they had a non-live birth, in hospice or using hospice service, or members who died.

Resources

- Send reminders to new mothers about the importance of prenatal and postpartum care and help them book an appointment; patients typically follow through on scheduling prenatal and postpartum care when recommended by the provider.
- Partner with obstetricians to ensure the prenatal and postpartum visits are scheduled in a timely manner. Pediatricians and family providers can support the mother by reminding her to schedule a postpartum checkup during the baby's first well child visit.
- AR Home Members* Encourage early and frequent prenatal visits throughout pregnancy and postpartum.
- Two pregnancy programs, Special Delivery and Maven, are available to supplement prenatal visits. Special Delivery is a case management program which provides education and support throughout the pregnancy journey. Enroll with an Arkansas Blue Cross Special Delivery nurse by calling **800-225-1891** ext. **20225**. Maven is a virtual maternity program available through an app. With Maven, members can speak with a care advocate 24/7 or seek support from a doula, lactation consultant, mental health specialist, and more. To sign up for Maven, visit mavenclinic.com/join/AR. Access Blueprint Portal account to learn more and sign up (blueprintportal.com/login).
- AR Home Members* Maternal Life360 HOMEs offer in-home visits during pregnancy for eligible Medicaid and ARHOME members in certain Arkansas counties. This is currently available in Pulaski, Saline, and Faulkner counties through Baptist Health, in Craighead county through St. Bernard's, and Independence county through White River Medical Center. Call **501-500-2184** to learn more.
- AR Home Members* can earn up to \$200 in Blue Wellness Rewards for prenatal visits (\$50 per visit) and \$25 by following up with an Arkansas Blue Cross Special Delivery nurse or through Maven.
- Patients can also earn \$100 for starting contraception within 90 days of delivery. Patients can enroll in Blue Wellness Rewards through the their Blueprint Portal account.

Resources

- I. National Committee for Quality Assurance, HEDIS® Measurement Year 2025 Volume 2 Technical Specifications for Health Plans



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