

August 30, 2013

«First_Name» «Last_Name», «Title»
«Address_1»
«Address_2»
«City», «State» «Zip»

Re: HEDIS® Prenatal and Postpartum Care (PPC) and Frequency of Ongoing Prenatal Care (FPC)

Dear «First_Name» «Last_Name», «Title»:

The purpose of this letter is to ensure that you are aware of the quality assurance standards of Jai Medical Systems Managed Care Organization, Inc. as they relate to HEDIS® (Healthcare Effectiveness Data and Information Set). Our hope is that this information will be helpful in assisting you to meet our quality assurance standards.

The **Prenatal and Postpartum Care** measure evaluates the percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. Two important factors that will be measured are as follows:

- Timeliness of Prenatal Care (defined as percentage of women who received a prenatal care visit in the first trimester *or* within 42 days of enrollment with Jai Medical Systems).
- Postpartum Care (defined as the percentage of women who received a postpartum visit on or between 21 and 56 days after delivery).

*For women with a gap in enrollment during pregnancy, the last enrollment start date during the pregnancy that is closest to the delivery date will be used.

For your information, below is the listing of Jai Medical Systems Managed Care Organization, Inc.'s requirements for prenatal care:

- A physical exam should be performed and coded with one of the following CPT codes: 99201 – 99205 or 99211 – 99215, as appropriate.
- A lab test, such as an obstetric panel or a rubella antibody test/titer with ABO/Rh blood typing should be performed (*please also request the initial RPR test*).
- Documentation of LMP or EDD and obstetrical history must be recorded in the medical record.
- Documentation of counseling and education must be recorded in the medical record.
- A diagnosis of pregnancy, using one of the following V codes: V22, V23, or V28, as appropriate, must be recorded and submitted.

- A referral to OB case management must be made. Please call 410-433-5600 to speak with Glenda at ext.6, or Meghan at ext. 2.

Postpartum Care

To ensure that we fully comply with this measure, please make sure that your patients return for a postpartum care visit between **21 days and 56 days after their delivery**. Please code postpartum visits with one of the following V codes: V24.1, V24.2, or V25.1, as appropriate.

Standard postpartum care visits are to include at least one of the following noted in the patient's medical record:

- A pelvic exam,
- An evaluation of weight, breasts, abdomen, and blood pressure, and
- A notation of postpartum care.

As soon as it has been confirmed that the member is pregnant, please send the results to the OB physician. While the member is in your office please assist them in scheduling an OB appointment. In the event that the member is considering terminating the pregnancy, please contact Case Management as soon as possible.

For every medical visit, for the duration of the pregnancy, please include the LMP (or EDD) and document the diagnosis of pregnancy. Please remember to ensure that the results of all examinations and lab tests are placed in the patient's chart, including the pregnancy test. In addition, please use the appropriate codes for diagnosing, examining, and treating pregnant patients when submitting claims.

Please be aware that we are offering an exciting incentive program called the Moms VIP program to help encourage women to comply with their prenatal and postpartum visits. This program includes incentives for patients who are compliant with care plans – especially for those who receive their appropriate prenatal care and a postpartum visit 3 to 8 weeks after delivery. If your patient is not aware of this program, please contact one of our OB case managers, at (410) 433-5600 and they will further explain the Moms VIP program to your patient.

As you already know, it is important to always code as completely and accurately as possible. It will make a positive difference in our HEDIS[®] scores if you code all diagnoses used in your decision.

Attached you will find a criteria receipt. After reviewing the standards for this measure, please sign and fax this receipt to Stephanie Scharpf at (410) 433-4615.

We believe that the information provided will help you understand how HEDIS[®] will be used to interpret the quality of care provided to our members. Please remember that this information has been adapted from HEDIS[®] guidelines and should not be substituted for your sound medical judgment. Thank you for your continued efforts to ensure that our members receive the highest

quality of care possible. Please feel free to contact us at (410) 433-2200 if you have any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "Frances Bird".

Frances Bird, M.D.
Director, Quality Assurance

Sincerely,

A handwritten signature in black ink, appearing to read "Stephanie Scharpf".

Stephanie Scharpf
Director, Regulatory Compliance and
Administration