

2023 HEDIS Measure Tips



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

Prenatal Care (PPC)

A component of Prenatal and Postpartum Care

Access/Availability of Care HEDIS® Measure*

Measure description

The percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment.

Note: A Pap test does **not** count for the prenatal care visit.

Measure population (denominator)

Deliveries of live births on or between October 8 of the year prior to October 7 of the measurement year.

Measure compliance (numerator)

A prenatal care visit to an OB-GYN or other prenatal/primary care practitioner. (Do not count visits that occur on date of delivery).

Note: Virtual care visits meet criteria with acceptable coding (audio and/or video, e-visits, virtual check-ins).

Documentation in the medical record **must** include a note indicating the date when the prenatal care visit occurred **and** evidence of at least one of the following with an appropriate practitioner:

Criteria	Description
Diagnosis of pregnancy	Standardized prenatal flow sheet, LMP, EDD or gestational age, positive pregnancy test result, gravidity and parity, complete OB history, OR prenatal risk assessment and counseling/education.
OB exam	With documentation of FHT, pelvic exam with OB observations, OR measurement of fundus height.
Prenatal care procedure	OB panel (must include all of 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, rubella antibody test/titer with Rh incompatibility, OR ultrasound of a pregnant uterus.

Did you know?

- Appropriate perinatal services and education are crucial components of a healthy birth.
- More than 3 out of 4 patients receive prenatal care in the 1st trimester, however, rates are lower for certain racial and teenage subpopulations.
- Prenatal care is most effective in reducing the chance of low birthweight.

This measure applies to commercial members only.

continued

Exclusions

- Non-live births
- Received hospice services anytime during the measurement year
- Deceased during the measurement year

Helpful HEDIS hints

- **Schedule** the patient's first prenatal visit as soon as the patient believes they are pregnant.
- **Remind** patients of the date and time of their follow-up appointment.
- **Counsel** patients during their pregnancy about the importance of follow-up care after delivery. Prior to delivery, a postpartum care plan should be developed, identifying the practitioners who will care for the patient and infant.

Tips for coding

- Visits with a primary care practitioner must include a diagnosis of pregnancy.
 - The following are examples of ICD 10 codes, but are not all-inclusive: Z34.00, Z36, O09.00, O20.0
- Visits with a practitioner can be with or without a telehealth modifier (see Virtual Care Summary).
- HEDIS® data has shown that practitioners with the highest scores for postpartum care report individual component codes for antepartum, delivery and postpartum visits. Documentation and coding recommendations outlined below:

Antepartum Care: if more than four visits are billed by the same practitioner/group, report the CPT® code that best describes the services and the number of visits: 59425 or 59426. Report date of first prenatal visit in both fields and total number of visits in required field.

– **Note:** Do not enter date ranges.

Reporting claims information other than as noted may result in errors and/or delays in processing claims.

Maternity and Delivery Services section in the claims section of the provider manual provides billing information regarding antepartum care services and claim examples.

Maternity services	CPT® codes	CPT® II codes	HCPCS
Standalone prenatal visits	99500	0500F, 0501F, 0502F	H1000, H1001, H1002, H1003, H1004
Prenatal visits*	99201-99205, 99211-99215, 99241-99245, 99483		G0463, T1015

*Must be billed **with** a pregnancy-related diagnosis code.

Resources

1. National Institutes of Health (NIH). Eunice Kennedy Shriver National Institute of Child Health and Human Development. 2017. "What is prenatal care & why is it important?" [nichd.nih.gov/health/topics/pregnancy/conditioninfo/Pages/prenatal-care.aspx](https://www.nichd.nih.gov/health/topics/pregnancy/conditioninfo/Pages/prenatal-care.aspx)
2. Centers for Disease Control and Prevention (CDC). 2018. "Timing and Adequacy of Prenatal Care in the United States, 2016." [cdc.gov/nchs/data/nvsr/nvsr67/nvsr67_03.pdf](https://www.cdc.gov/nchs/data/nvsr/nvsr67/nvsr67_03.pdf)

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