

HEDIS Provider Guide: Timeliness of Prenatal Care (PPC-Timeliness)

Measure Description

Prenatal care visit in the first trimester or within 42 days of enrollment, where the practitioner type is an OB/GYN or other prenatal care practitioner or primary care physician (PCP).

Documentation

The medical record must include a note with the date that the prenatal visit occurred, and one of the following:

- Basic physical obstetrical exam including auscultation for fetal heart tone, pelvic exam with obstetric observations, *or* measurement of fundus height (a standardized prenatal flow sheet may be used), or
- Last menstrual period (LMP), estimated due date (EDD), gestational age, or
- A positive pregnancy test result, or
- Documentation of gravidity and parity, or
- A completed obstetric history *or* a prenatal risk assessment and counseling/education, or
- Evidence that a prenatal procedure was performed: 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 test/titer with an Rh incompatibility (ABO/Rh) blood typing, syphilis test, RBC antibody screen, TORCH antibody panel, or ultrasound of the pregnant uterus.

Using Correct Billing Codes

Global billing or bundled codes do not provide specific date information to count towards this measure.

Codes to Identify Prenatal Services

Description	Codes
Pregnancy Diagnosis (must use one of these diagnosis codes and one of the codes below)	ICD-10: O09-O16, O20-O26, O28-O36, O40-O48, O60.0, O71, O88, O91, O92, O98, O99, O9A, Z03.7, Z32.01, Z34, Z36
Prenatal Care Visits	CPT: 99201-99205, 99211-99215, 99241-99245, 99483 HCPCS: G0463, T1015
Stand Alone Prenatal Visits	CPT: 99500 HCPCS: H1000-H1004 CPT II: 0500F, 0501F, 0502F
Online Assessment, (E-visits, Virtual-Check-ins)	CPT: 98969-98972, 99421-99423, 99444, 99457, 99458 HCPCS: G0071, G2010, G2012, G2061-G2063, G2250-G2252
Telephone Visits	CPT: 98966-98968, 99441-99443

How to Improve HEDIS® Scores

- Schedule prenatal care visits starting in the first trimester or within 42 days of enrollment.
- Ask front office staff to prioritize new pregnant patients and ensure prompt appointments. Ensure appointment availability for patients who think they may be pregnant.
- Use a pregnancy-related diagnosis code for all prenatal visits.
- Have a direct referral process to OB/GYN practitioners in place. Assist members in scheduling their prenatal care visit with the OB/GYN. PCP offices should document the OB/GYN practitioner's name and the date of the first prenatal visit in the patient's chart.
- Screen pregnant members for clinical depression. Schedule the patient for follow-up within 30 days if depression screening is positive.