HEDIS® Quick Reference for Prenatal and Postpartum Care



Who is eligible?

All women with a delivery between October 8 of the year prior to the measurement year and October 7 of the measurement year. Women with more than one delivery during the interval count twice for this measure. Women with multiple live births during one pregnancy count only once.

Timeliness of prenatal care (TOPC)

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.

CPT codes (new patients)	99201, 99202, 99203, 99204, 99205
CPT codes (established patients)	99211, 99212, 99213, 99214, 99215
HCPCS	T1015
ICD-10 diagnosis codes	Z34* OR O09 to O99†

^{*} codes for supervision of normal pregnancies.

The National Committee for Quality Assurance (NCQA) has lifted restrictions for telephone visits, e-visits, and virtual check-ins for TOPC and PPC. For more information and guidance on telehealth and telephonic visits, please refer to the <u>quick reference guide</u> developed by the Texas Medical Association (TMA).

Postpartum care (PPC)

The percentage of deliveries that had a postpartum visit on or between 7 to 84 days after delivery. (Note: Medicaid coverage will term at 60 days after delivery.)

CPT codes	59430*
CPT-CAT-II codes	0503F
ICD-10 diagnosis codes	Z01.411, Z01.419, Z01.42, Z30.430, Z39.1, Z39.2

^{* 59430} is reimbursable once per pregnancy by Texas Medicaid and must be used for a visit between 7-60 days. Subsequent postpartum visits must be billed using E&M codes.

Visits solely for staple removal do not qualify for use of 59430.

NOTE: Both CPT and appropriate ICD-10 codes must be present for claim to be paid.

COVID-19 alerts and updates are posted on Texas Children's Health Plan Provider Portal. For COVID-19 Utilization Management Procedure and alerts visit thecheckup.org/provider-alerts

[†] codes for supervision of conditions affecting pregnancy.