PERINATAL QUARTERLY NEWSLETTER November 2022 - Fall Edition

MEDICAL DIRECTOR HIGHLIGHT



Hello Perinatal Caregivers,

As autumn rolls in the days become shorter and cooler, cold, flu and other virus season is around the corner. Avoiding infections and limiting spread of infections during and after in pregnancy has benefit for both the pregnant mom and the baby. The vaccines recommended in pregnancy include Influenza (once per Flu season per pregnancy), TDaP (once per pregnancy), and COVID19 (initial series + boosters).

All of these infections can cause respiratory illness in a pregnant patient. And each of these infections can have unique risk for the pregnant patient and the pregnancy. Even after a delivery, each of these infection in the infant's mom raise the risk for the infant to have a serious illness during in early infancy. Many parents who are young and healthy do not always see the benefits of vaccines to protect themselves. However, when the need for vaccines is placed in the context of preventing illness in their baby, many parents and caregivers will more readily accept vaccine recommendations. Primary care providers and prenatal providers and care teams have a unique trusting relationships with their patients to provide fact based explanations that can compel pregnant patients and caregivers to vaccinate to protect themselves as well as their babies.

Pregnant women are at high risk of serious complications of influenza (flu) infection. These risks include intensive care unit admission, preterm delivery, and maternal death. In addition, pregnant patients with flu-like illness should be treated with antiviral medications, regardless of vaccination status. Newborns and infant cannot be vaccinated until they are 6 months old. Vaccination of mom and family members provides a significant layer of protection for the newborns.

Pertussis or whooping cough is prevented for adults with the TDaP vaccine. Whooping cough does not necessarily put a pregnant patient or pregnancy at risk of complication. Infants who are exposed to pertussis have high risk for serious illness and complications. Newborns cannot be vaccinated for pertussis. Pregnant moms can

decrease the risk of infection for their babies by getting vaccinated in pregnancy, even if they have completed a series and booster before pregnancy. A vaccine in pregnancy passes the immune response to the baby during pregnancy. Moms who were not vaccinated in pregnancy can also prevent passing pertussis to their infant when vaccinated after pregnancy. Vaccines play in improving the rates of infections and limiting complications.

Currently, both American College of Obstetrician and Gynecologists, recommend that pregnant women ARE vaccinated and boosted to prevent COVID during the pregnancy and post-partum period. Pregnant patients who are not vaccinated for COVID have higher rates of complicated illness with COVID-19 infection as well as higher rates of significant pregnancy complications. Current information has not shown risk for negative side effects or reactions specific for pregnant patients who are vaccinated.

Pregnancy is an excellent time to engage individuals in caring for themselves and taking steps to improve their health. Vaccination is great step forward in self-care as well as parenting. Please consider some of the above talking points when educating your pregnant patients about pregnancy related vaccination.

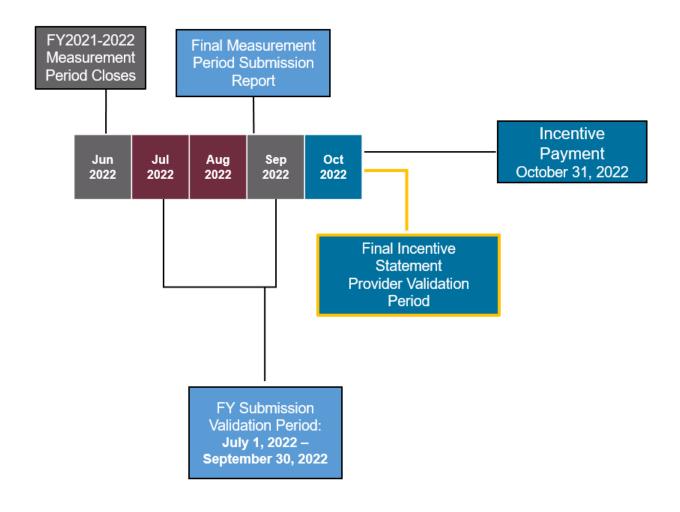
Warmly,

Colleen Townsend, MD Southeast Regional Medical Director, MD

IMPORTANT ANNOUNCEMENTS

2021-2022 Perinatal QIP Incentive Payments

Thank you for your continued engagement in the Perinatal Quality Improvement Program (PQIP). Preliminary year-end reports were distributed at the end of September. Providers were given one week to review the reports prior to the processing of final incentive payments for Measurement Year 2021-2022. If you have any questions or concerns please reach out to us at PerinatalQIP@partnershiphp.org.



2022-2023 Perinatal QIP - Summary of Measures

Below are the FY2022-23 Perinatal QIP Summary of Measures. To view the 2022-23 detailed specifications and download the new prenatal submission template, please visit the PQIP webpage.

Measure	Incentive Amount Per Submission	Documentation Source
GATEWAY: Electronic Clinical	N/A	Electronic Clinical Data
Data System (ECDS) NEW!!		System (ECDS) data
		exchange with provider
		electronic health records
Prenatal Immunization Status	\$37.50	PHC claims system (must
(Timely TDaP- vaccine and		be provided and billed)
Influenza vaccine)	\$12.50	

Timely Prenatal Care (< 14 weeks gestation)	\$75.00	Participating providers submit an attestation form indicating services provided at reported visit.
Timely Postpartum Care (2 visits: one visit < 21 days after delivery and one visit between 22 and 84 days after delivery)	\$25 (1 st visit) \$50 (2 nd visit)	PHC claims system (must be provided and billed)

Beacon Health Options for Maternal Mental Health

Partnership HealthPlan of California (PHC) partners with Beacon Health Options to offer support to pregnant women through referrals to mental health providers. For more details on Beacon's Maternal Mental Health benefit, please click here.

GROWING TOGETHER PROGRAM - AUTOMATIC REFERRALS

The Growing Together Program (GTP) focuses on educating women on Perinatal Mood Disorder (PMD), the importance of postpartum and well-child care, immunizations for both mom and baby, and assistance in getting new babies enrolled in health insurance. The Population Health Department (PHM) Healthy Living Coaches will make scheduled calls to women enrolled in GTP and help connect them to services and resources as needed.

PHM would like to partner with our providers to refer women who are pregnant into the GTP. Women who enroll in GTP will be offered a \$25 gift card for receiving early prenatal care (prior to the 14th week of pregnancy), and a \$25 gift card for attending at least one of two postpartum visits (prior to 84 days postpartum). All women who participate in our program will receive a packet of educational materials that focus on:

- Prenatal Immunizations
- Postpartum Care
- Perinatal Mood Disorder (PMD)
- Well-Baby Visits
- Well-Baby Immunizations Diseases Prevented
- Family Planning
- Medi-Cal Enrollment Information Form for the Baby



If after speaking to a member about the GTP and the member would not like to be referred to a GTP Care Coordinator, the provider is encouraged to send a SECURE email to: PopHealthOutreach@partnershiphp.org to notify PHC that the member has requested to opt-out of the GTP. Emails should include the PHC member, CIN number, first and last name, and date of birth.

Perinatal QIP Webpage: Helpful Links

Visit the Perinatal QIP webpage to access helpful links related to this program:

- ❖ Perinatal QIP Overview:
 - 2022-23 Perinatal QIP Measure Specifications
 - Prenatal Timely Visit Submission Template
- Webinars
 - Perinatal QIP ECDS Webinar
 - 2022-23 Kick-Off Webinar
- Past Quarterly Newsletters

Resources: Quality Measure Highlights

YOUR PERINATAL QIP TEAM

Amy McCune, QIP Manager Staci Vercellotti, Program Manager Jessica Delaney, Program Manager

Our team wishes to thank you for your ongoing engagement in the Perinatal QIP. You have and continue to play a vital role in providing quality care to our members - we truly appreciate all you do. Please contact us at PerinatalQIP@Partnershiphp.org with any questions or feedback regarding the Perinatal QIP.