# IT-8.19: Post-Partum Follow-Up and Care Coordination

| **Measure Title** | **IT-8.19 Post-Partum Follow-Up and Care Coordination** |
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| **Description** | Percentage of patients, regardless of age, who gave birth during a 12-month period who were seen for post-partum care within 8 weeks of giving birth who received a:   * Breast feeding evaluation and education, * Post-partum depression screening, * Post-partum glucose screening for gestational diabetes patients, and * Family and contraceptive planning. |
| **NQF Number** | Not applicable |
| **Measure Steward** | American Congress of Obstetricians and Gynecologists / National Committee for Quality Assurance / Physician Consortium for Performance Improvement |
| **Link to measure citation** | <http://www.ama-assn.org/resources/doc/pcpi/maternity-care-measures.pdf> |
| **Measure type** | Stand-alone (SA) |
| **Performance and Achievement Type** | Pay for Performance (P4P) – Improvement Over Self (IOS)   |  |  |  | | --- | --- | --- | |  | DY4 | DY5 | | Achievement Level Calculation | Baseline + 5% \*(performance gap)  =  Baseline + 5% \*(100% – Baseline rate) | Baseline + 10% \*(performance gap)  =  Baseline + 10% \*(100% – Baseline rate) | |
| **DSRIP-specific modifications to Measure Steward’s specification** | None |
| **Denominator Description** | All patients, regardless of age, who gave birth during a 12-month period seen for post-partum care visit before or at 8 weeks of giving birth. |
| **Denominator Inclusions** | The Measure Steward does not identify specific denominator inclusions beyond what is described in the denominator description. |
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| **Denominator Size** | Providers must report a minimum of 30 cases per measure during a 12-month measurement period (15 cases for a 6-month measurement period)   * For a measurement period (either 6 or 12 months) where the denominator size is less than or equal to 75, providers must report on all cases. No sampling is allowed. * For a measurement period (either 6 or 12 months) where the denominator size is less than or equal to 380 but greater than 75, providers must report on all cases (preferred, particularly for providers using an electronic health record) or a random sample of not less than 76 cases. * For a measurement period (either 6 or 12-months) where the denominator size is greater than 380, providers must report on all cases (preferred, particularly for providers using an electronic health record) or a random sample of cases that is not less than 20% of all cases; however, providers may cap the total sample size at 300 cases. |
| **Numerator Description** | Patients receiving the following at a post-partum visit:   * Breast feeding evaluation and education, including patient-reported breast feeding * Post-partum depression screening * Post-partum glucose screening for gestational diabetes patients * Family and contraceptive planning |
| **Numerator Inclusions** | Breast Feeding Evaluation and Education: Patients who were evaluated for breast feeding before or at 8 weeks post-partum.  Post-Partum Depression Screening: Patients who were screened for post-partum depression before or at 8 weeks post-partum. Questions may be asked either directly by a health care provider or in the form of self-completed paper- or computer administered questionnaires and results should be documented in the medical record. Depression screening may include a self-reported validated depression screening tool (eg, PHQ-2, Beck Depression Inventory, Beck Depression Inventory for Primary Care, Edinburgh Postnatal Depression Scale (EPDS) )  Post-Partum Glucose Screening for Gestational Diabetes: Patients who were diagnosed with gestational diabetes during pregnancy who were screened with a glucose screen before or at 8 weeks post-partum.  Family and Contraceptive Planning: Patients who were provided family and contraceptive planning and education (including contraception, if necessary) before or at 8 weeks post-partum.  \*\* To satisfactorily meet the numerator – ALL components must be performed. |
| **Numerator Exclusions** | The Measure Steward does not identify specific numerator exclusions beyond what is described in the numerator description. |
| **Setting** | Ambulatory |
| **Data Source** | Electronic health record (EHR) data |
| **Allowable Denominator Sub-sets** | All denominator subsets are permissible for this outcome |