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# 2025 Maternity Programs

Provider Presentation

# Maternity Incentive Program Overview

## Objective

Enhance communication with pregnant members through provider interaction to ensure a healthy pregnancy.

## Goal

Identify pregnancies as early as possible, decreasing barriers to prenatal/ postpartum healthcare, and improving maternal and neonatal birth outcomes.

## Member Attribution

Iowa Total Care members.

## Member Attribution

Providers within Iowa Total Care network.

## Performance Incentive

Up to \$150 per member, per pregnancy

- Up to \$100 for NOP Form and \$50 for PPC Coding Incentive

## Payout

Incentives will be paid in combination of quarterly payments and through claims.

# Notification of Pregnancy (NOP)

The NOP form identifies pregnant members and their risk factors as early in pregnancy as possible. Receipt of an NOP form automatically enrolls a pregnant member in the Start Smart for Your Baby® (SSFB) program.

## Need to submit a NOP form? There are 2 ways to complete

- Use the [Provider Portal](http://provider.iowatotalcare.com) (provider.iowatotalcare.com)
  - Under Assessments tab select SSFB WEB ONLY NOP V2 to complete the form
- OR
- Fax the NOP form (located on the [Manuals, Forms and Resources webpage](http://iowatotalcare.com/providers/resources/forms-resources.html)) to 1-833-257-8323. (iowatotalcare.com/providers/resources/forms-resources.html).

## NOP Form

- Submit at the confirmation of pregnancy appointment or first OB.
  - Reporting member's pregnancy within the first 12 weeks of pregnancy meets the HEDIS® measure.
  - HEDIS Measure:
    - **Timeliness of Prenatal Care:** 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 in the organization.

Early identification of pregnant members and their risk factors is the key to better birth outcomes.

Identifying high-risk pregnant members and intervening early can lead to better birth outcomes.

Members who have a completed pregnancy NOP are three times more likely to be compliant with prenatal care.

For additional SSFB program information, visit the [Value-Added Services webpage](http://iowatotalcare.com/members/medicaid/benefits-services/value-adds.html) (iowatotalcare.com/members/medicaid/benefits-services/value-adds.html).

# NOP Form Provider Incentive

- During initial pregnancy visit or at a confirmation of pregnancy appt, with an Iowa Total Care member, complete Iowa Total Care’s NOP form.
- Once the NOP form is completed fully, submit to:
  - Iowa Total Care [Provider Portal](https://provider.iowatotalcare.com). (provider.iowatotalcare.com)
  - Fax: 1-833-257-8323.
- Submitted forms **must** be accurate and complete.
- Iowa Total Care will closely monitor the number of completed NOP forms submitted to calculate payment.
- Incentives will be paid retrospectively on a quarterly basis.
- Once you have reported that your patient is pregnant, contact the Iowa HHS Income Maintenance Customer Service Center at 1-877-347-5678 to report this change for Medicaid.
  - Provide them with the patient’s confirmed due date.

**Notification of Pregnancy Form** \*Required Field

The earliest possible completion of this form allows us to best use our resources and services to help you and your patient achieve a healthy pregnancy outcome. Please submit through the provider portal at [provider.iowatotalcare.com](https://provider.iowatotalcare.com) or complete clearly in black ink and fax to 1-833-257-8323

**Member's Current Contact Information**

Member ID: \_\_\_\_\_ DOB (mm/dd/yyyy): \_\_\_\_\_  
 Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**OB Provider Information**

\*OB Provider Name: \_\_\_\_\_  
 \*OB Provider TIN/ID #: \_\_\_\_\_  
 OB Provider Mailing Address: \_\_\_\_\_  
 OB Provider City: \_\_\_\_\_  
 OB Provider Phone Number: \_\_\_\_\_

**General Information**

Primary Insurance (for member): \_\_\_\_\_  
 \*Due Date (mm/dd/yyyy): \_\_\_\_\_  
 Date of last Pap Smear (if applicable): \_\_\_\_\_  
 Race/Ethnicity (check all that apply):  
 American Indian  
 If other ethnicity: \_\_\_\_\_  
 Preferred Language (if other than English): \_\_\_\_\_  
 Number of Full Term Deliveries: \_\_\_\_\_  
 Number of Miscarriages: \_\_\_\_\_  
 Any social needs? (if yes, please specify): \_\_\_\_\_  
 Enrolled in WIC?  Yes  No  
 Pre-Pregnancy Weight: \_\_\_\_\_  
 Age less than 18?  Yes  No

**\*Are there any known pregnancy complications?**

Current gestational diabetes?  Yes  No Current preeclampsia?  Yes  No Current oligohydramnios?  Yes  No  
 Current twins?  Yes  No Current triplets?  Yes  No Discordant growth?  Yes  No  
 Current fetal growth restriction?  Yes  No Current congenital anomalies?  Yes  No  
 BMI < 20 or poor weight gain during this pregnancy?  Yes  No UTI/Pyeloid Bacteruria this pregnancy?  Yes  No  
 Current severe hyperemesis?  Yes  No  
 Current mental health concerns?  Yes  No

If yes, please specify mental health concerns: \_\_\_\_\_  
 Current STD?  Yes  No If yes, please list STD's: \_\_\_\_\_  
 Current tobacco use?  Yes  No If yes, please specify amount used: \_\_\_\_\_  
 Current alcohol use?  Yes  No If yes, please specify amount used: \_\_\_\_\_  
 Current street drug use?  Yes  No If yes, please specify amount used: \_\_\_\_\_  
 Are there any other significant risk factors?  Yes  No  
 If yes, Please list other risk factors: \_\_\_\_\_

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# NOP Analysis Outcomes

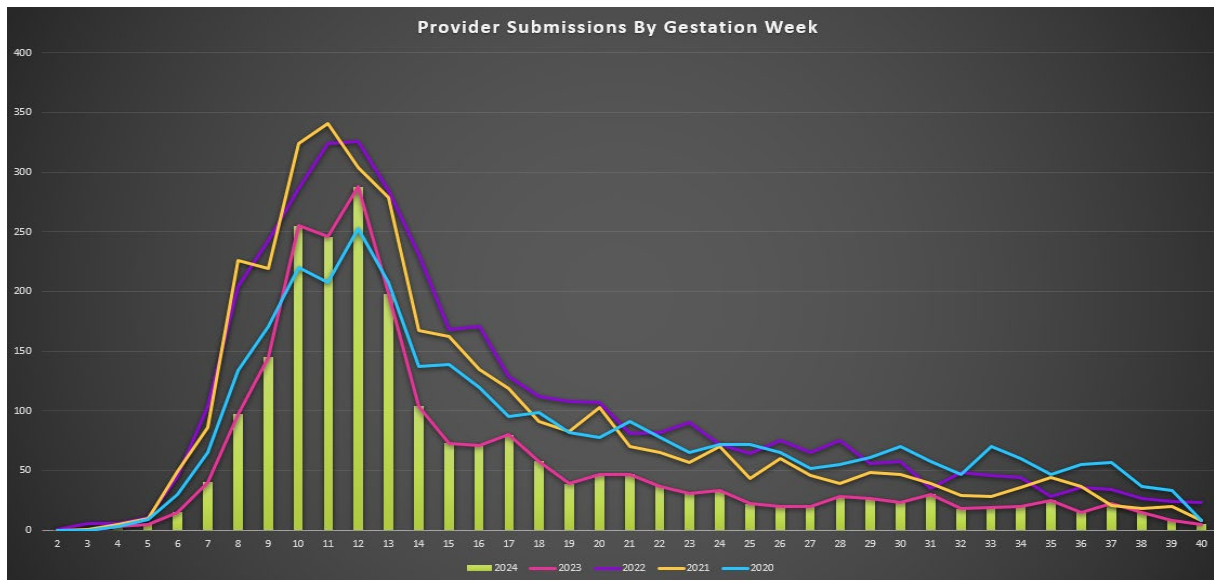
Due to global billing in Iowa for obstetrics (OB) care, Iowa Total Care is not aware that a member may be pregnant, thus missing out on important benefits like care management support for important resources, assistance with transportation, or any other concerns or difficulties an individual may face during pregnancy.

Early submission of a NOP form alerts our SSFB case management team that a member is pregnant.

Iowa Total Care can show statistically that the earlier we are aware a member is pregnant, the larger the impact our SSFB team can have.

When an NOP form is submitted a member has a 4% reduction in neonate rate, and a 3% decrease in neonatal intensive care unit (NICU) admissions.

Provider NOP YR/YR	2019	2020	2021	2022	2023	2024
NOP Submitted in First 12 Weeks	264	1,089	1,548	1,623	1,803	1,078
Total NOP Submitted	841	3,221	3,500	4,119	3,849	12,235
% Submitted in First 12 Weeks	31.39%	33.81%	44.23%	39.40%	46.84%	48.23%



# Provider Pregnancy Coding Incentive

- Iowa Total Care is offering a \$50 provider coding incentive for an initial prenatal visit!
- To receive the incentive, claims must be submitted with the appropriate CPT® Category II (CPT II) code identifying the initial prenatal visit.
- This incentive payment is in addition to your current contract rate.
  - When billing, must **add** the \$50 to your total claim requested amount.
- Incentive payments are made at the time of claims payment.
- This CPT II code can be done on the date of the first prenatal visit, on a lab/ultrasound, or on the same claim as the global maternity billing.
- If a provider submits CPT II code more than once on a member, it will be denied at the claims level because the service is already met. The rest of the claim will still be processed and paid.
  - CPT II code may be used once per member per 6 months.

# CPT II Codes

CPT II Code	CPT II Code Description	Billable E/M Code or Revenue Code
0500F	<p><b>Initial prenatal care visit:</b></p> <ul style="list-style-type: none"> <li>Report at first prenatal encounter with healthcare professional providing obstetrical care.</li> <li>Also report date of visit and, in a separate field, the date of the last menstrual period (LMP).</li> </ul>	<p><b>CPT:</b> 99201–99205, 99211–99215, 99381–99387, 99391–99397, 59425*, 59426*</p> <p>Revenue Code: 0514</p>
0501F	<p><b>Prenatal flow sheet documented in medical record by first prenatal visit:</b></p> <ul style="list-style-type: none"> <li>At minimum, documentation includes: blood pressure, weight, urine protein, uterine size, fetal heart tones, and estimated date of delivery.</li> <li>Also report date of visit and, in a separate field, the date of the LMP.</li> </ul> <p><b>Note:</b> If reporting 0501F (prenatal flow sheet), it is not necessary to report 0500F (initial prenatal care visit).</p>	<p><b>CPT:</b> 99201–99205, 99211–99215, 99381–99387, 99391–99397, 59425*, 59426*</p> <p>Revenue Code: 0514</p>

\* For providers that bill the global OB antepartum package CPT codes 59425 or 59426, CPT Category II codes 0500F or 0501F will be required in addition to the global codes. Providers will only be paid once per member per pregnancy for this CPT II code, within a 6-month period. If Iowa Total Care receives multiple claims with the CPT II code, CPT II code incentive will not be paid on subsequent claims.



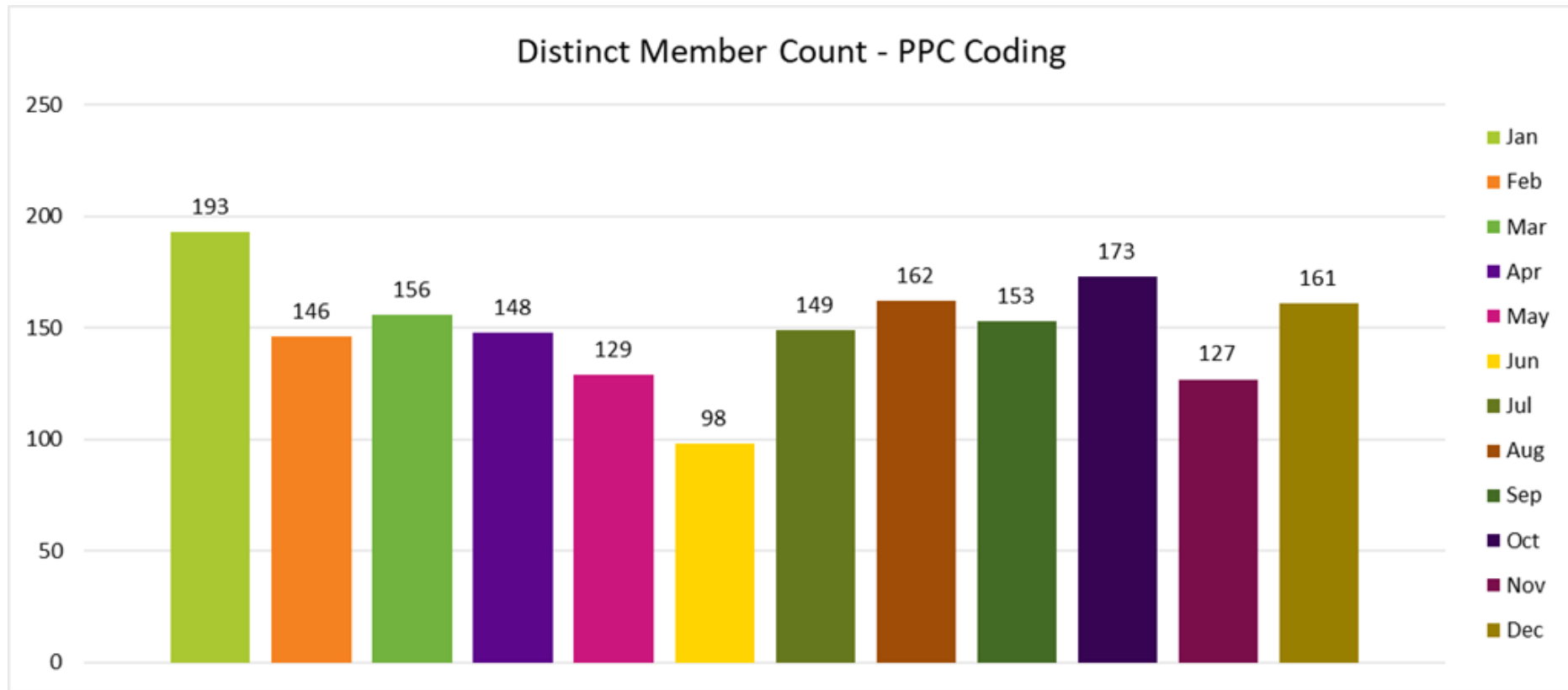
The prenatal care visit must include **one** of the following pieces of documentation indicating the member is pregnant or references to the pregnancy. For example:

- Documentation in a standardized prenatal flow sheet, or
- Documentation of LMP, estimated due date, or gestational age, or
- A positive pregnancy test result, or
- Documentation of gravidity and parity, or
- Documentation of complete obstetrical history, or
- Documentation of prenatal risk assessment and counseling/education

Documentation by a registered nurse alone **does not** meet compliance requirements for HEDIS.

# PPC Coding Analysis Outcome

- ✓ ITC identified 1691 distinct member pregnancies
- ✓ MY24 TOPC: 81.29% of members identified within the PPC Coding Cumulative Report are compliant.

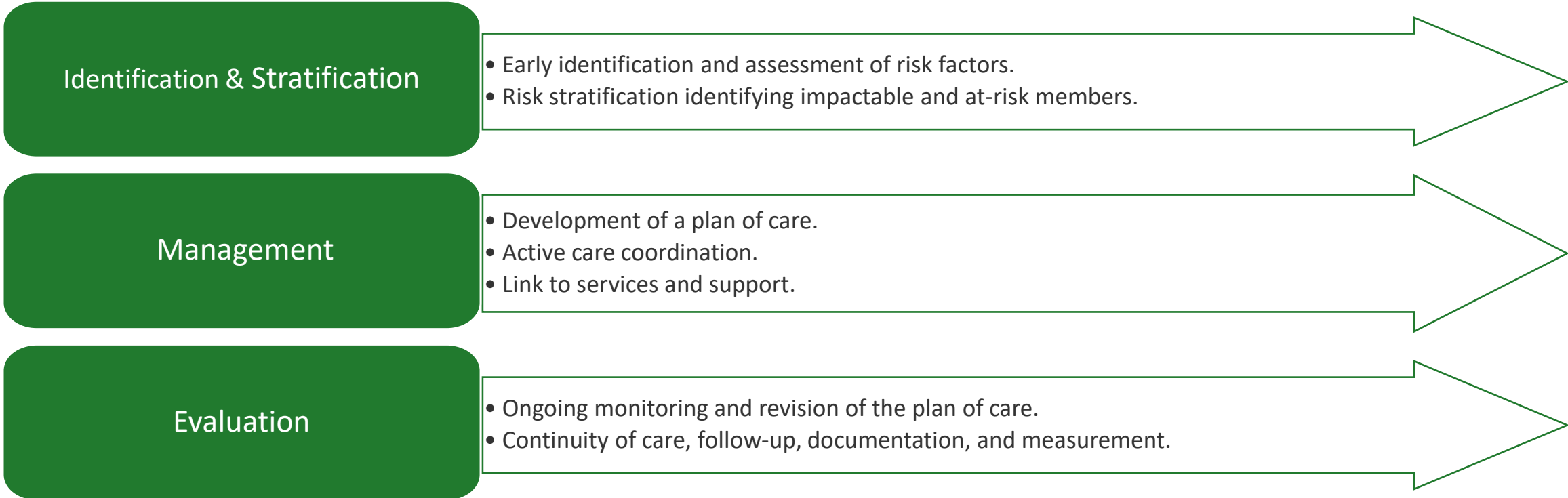




# Start Smart for Your Baby (SSFB)

The SSFB program promotes education and communication between pregnant members and our case managers to ensure healthy pregnancies and healthy babies through their first year of life.

Babies admitted to the NICU are assessed and, if needed, assigned to a care manager who specializes in NICU babies.



# Start Smart for Your Baby Resources

Care manager capabilities / supports / benefits:



Facilitate Transportation



Doula Services through Pilot Program



Blood Pressure Cuff for Qualified Members



Workforce Development Referral



Enrolled in Local WIC Program



Care Management Enrollment



My Health Pays Prenatal and Postpartum



Smoking Cessation Program



“Mom’s Meals” Trials



Breast Pump Benefit



Educate on Postpartum Support

# What Is Our Doula Program?

Our Doula Pilot Program is an Iowa Total Care program **providing birthing people with culturally sensitive doula care**. The program was launched in 2022, and is working to improve maternal health outcomes, especially in pregnant and birthing people of color.

The Doula Pilot Program targets several issues in maternal care, such as:

- Low birth weight outcomes.
- Lack of early and regular prenatal care throughout pregnancy.
- Lack of postpartum visits.

We hope to ease the burden of access to maternal care, address cultural barriers, and improve maternal and infant health outcomes. For the pilot in 2022, any pregnant member living in **Polk, Johnson, or Muscatine counties** is eligible for doula care, regardless of race.

How did we select locations?

- For the first pilot period, Iowa Total Care selected counties in which there was a higher than average low birth weight outcome.
- We also took into consideration whether the identified counties had practicing doulas that could be recruited for the program.

# Doula Program: Impact Summary

For the pilot (2022-2024), any pregnant member living in **Polk, Johnson, or Muscatine counties** was eligible for doula care, regardless of race.

Doula Performance Summary Rollup					
Measure	Members With Doula Care	ITC Mothers (Non-Doula)	Difference	Outreached But Not Enrolled for Doula	Difference
Count of Eligible Members at Delivery	52	21,308		801	
	%	%	%		%
*Prenatal Visit Term 1	87%	73%	13%	77%	10%
*Prenatal Visit Term 2	94%	90%	3.8%	95%	-0.3%
*Low Birthweight Baby (<= 2,500 g)	8%	7%	1%	6%	2%
*Preterm Delivery	10%	11%	-2%	10%	0%
*Level 3 NICU Baby	3.8%	4.4%	-0.6%	6%	-2%
*C-Section	15%	20%	-4%	19%	-4%
*SSFB Care Plan Exists	65%	28%	38%	40%	25%
*Members with Notification of Pregnancy Term 1 Ct	79%	44%	35%	58%	21%
*Members with Notification of Pregnancy Term 2 Ct	100%	69%	31%	89%	11%
**Postpartum Visit With Provider	75%	45%	30%	48%	27%

# What's Next?

Iowa Total Care expanded to phase two for FY 2024/2025.

The expansion includes:

- 90 additional births.
- Expanded to add three more counties:
  - Black Hawk
  - Scott
  - Woodbury
- Recruitment of additional doulas.

## Data through Dec 2024

- 11 members enrolled to receive doula care
- 2 births this year, both were vaginal births and health babies
- 6 upcoming births for 2025 are already enrolled!

<https://www.iowatotalcare.com/members/start-smart-for-your-baby/doula-program.html>

# My Health Pays<sup>®</sup> Rewards

## Healthy activities eligible for rewards include:

- **First Trimester Prenatal Visit**
  - Must complete within first 12 weeks of pregnancy.
    - Reward: \$40.
- **Notification of Pregnancy Form**
  - Must complete within first trimester for \$20 or in the second trimester for \$15.
    - Reward: Up to \$20.
- **Postpartum Doctor Visit**
  - 1–12 weeks after delivery.
    - Reward: \$20.

## How can members use My Health Pays Rewards?

Members can earn rewards at Walmart and Hy-Vee to purchase everyday items\*. My Health Pays rewards can also be used to help members pay for:

- Childcare services.
- Education
- Transportation.
- Telecommunications.
- Rent.
- Utilities.

\*Rewards may not be used to buy alcohol, tobacco, firearms products, lottery tickets, gift cards, or for cash.

For additional healthy activities that are eligible for rewards, visit the [My Health Pays Rewards webpage](https://iowatotalcare.com/members/medicaid/benefits-services/healthy-rewards-program.html) (iowatotalcare.com/members/medicaid/benefits-services/healthy-rewards-program.html).

# Member Resources

## Start Smart for Your Baby

Start Smart for Your Baby is designed to customize the support and care pregnant members need for a healthy pregnancy and baby. Call Iowa Total Care at **1-833-404-1061 (TTY: 711)**.

## Video Appointments

Iowa Total Care has partnered with [Teladoc Health](https://teladochealth.com) (teladochealth.com). Teladoc Health provides 24/7 virtual care for non-emergency issues and services at no added cost to members. Easy to connect to our members by phone or video.

## 24/7 Nurse Advice Line

Staffed with registered nurses. Assistance in English and Spanish is available. If members speak a different language, they can ask for an interpreter. To access the **24/7 Nurse Advice Line**, call Iowa Total Care at **1-833-404-1061 (TTY: 711)**.

## Language Access Services

Access to interpreters over the phone, face-to-face or via video remote interpretation. You can get interpreters for American Sign Language too. Just call Iowa Total Care at **1-833-404-1061 (TTY: 711)** for help.

## IowaTotalCare.FindHelp.com

Online tool that connects people in need to the programs that serve them. Members can search for places that can help with food, housing, transportation, jobs and more! To find resources near them, visit [IowaTotalCare.FindHelp.com](https://IowaTotalCare.FindHelp.com). Then, members will enter their ZIP code to find help near them.

# Provider Resources



Get the tools you need at [iowaTotalCare.com](https://www.iowatotalcare.com). From the 'For Providers' tab on our website, you can access:

- Your clinical quality consultant's contact information.
- Training on programs and gap closure support to fit your practice needs.
- Manuals, forms, and HEDIS tip sheets to assist with caring for your patient.



From the Provider Portal ([Provider.iowaTotalCare.com](https://Provider.iowaTotalCare.com)):

- Click on **Patient** and select member's name to access patient's medical records.
- Click on the **Provider Analytics** link to be directed to your Quality dashboard and P4P Scorecard.
- Click on **Authorization** to create or view status of submitted prior authorizations.
- Click on **Claims** to review status of submitted claims.



Questions or concerns please reach out to your assigned Quality Practice Advisor or call Iowa Total Care Provider Services at **1-833-404-1061 (TTY: 711)**.



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Questions?

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