

MEDICAID PROVIDER BULLETIN

New pregnancy notification process using the Availity Portal Benefit Look-Up Tool

Anthem Blue Cross and Blue Shield Medicaid (Anthem) offers pregnant women several services and benefits through the New Baby, New LifeSM program. Anthem provides education, support, resources and incentives to members throughout the prenatal and postpartum period. Our goal is to ensure all pregnant members are identified early in their pregnancies so that they can take full advantage of these services.

We are working with Availity, the vendor supporting the Benefit Look-Up Tool you may currently use in your OB office, to get information about newly identified pregnant women. This new process, including the *HEDIS[®] Maternity Attestation* form, helps connect members to additional benefits as soon as possible using a few simple steps.

How it works

When an Anthem member of childbearing age visits the OB office, the office associate is prompted to ask the question “Is the member pregnant?” during the eligibility and benefits inquiry process. If the response is *yes*, the system asks about the due date, and a *HEDIS Maternity Attestation* form is generated for the OB office to complete. On this electronic form, providers are asked to provide other relevant information including the date of the first prenatal care visit, delivery date and postpartum visit date.

This new, user-friendly workflow generates timely information that aids members, providers and Anthem in improving birth outcomes with early intervention.

We are working hard to support providers throughout Kentucky in receiving necessary training for this new workflow. If you have specific questions regarding the new Availity maternity attestation process, please feel free to reach out to Provider Services at **1-855-661-2028**.

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).



<https://medproviders.anthem.com/ky>

Provider FAQ — Availity Portal Pregnancy Notification and HEDIS Maternity Attestation

1. What is the purpose of this new process?
<p>As you know, Anthem Blue Cross and Blue Shield Medicaid (Anthem) offers pregnant women several services and benefits through the New Baby, New LifeSM program. Our goal is to ensure all pregnant women are identified early in their pregnancy so they can take full advantage of the education, support, resources and incentives Anthem provides throughout the prenatal and postpartum period.</p> <p>This new, user-friendly workflow generates timely information that aids members, providers and Anthem in improving birth outcomes with early intervention.</p>
2. When will the new pregnancy-related questions display?
<p>The office will choose one of four maternity service types: maternity, obstetrical, gynecological and/or obstetrical/gynecological. When an OB/GYN office conducts an eligibility and benefits inquiry for an Anthem member 15 to 44 years of age in the Availity Portal, the system displays pregnancy-related questions. If the office confirms the patient is pregnant, a <i>HEDIS[®] Maternity Attestation</i> form is generated. If the patient is not pregnant, the desired eligibility and benefits information displays, and no further action is required.</p>
3. How does Anthem use the information provided on the <i>HEDIS Maternity Attestation</i> form?
<p>The <i>HEDIS Maternity Attestation</i> form helps Anthem identify pregnant women so that maternity programs can be offered to them. As part of the process, all identified pregnant women receive an OB high-risk screening as well as appropriate prenatal, postpartum and well-child health education. Therefore, it is important that you enter pregnancy data correctly into the Availity Portal.</p>
4. What information is required on the maternity screening in the Availity Portal?
<p>Only the following questions are required: “Is the patient pregnant?” and “What is the estimated due date?” If the estimated due date is not yet known, it can be skipped; however, it will appear the next time a provider uses the eligibility and benefits lookup. The <i>HEDIS Maternity Attestation</i> form is optional but highly desired for completion as it helps Anthem better coordinate pregnancy support for members. For example, if Anthem sees a member has not yet had important prenatal and postpartum visits, we can help the member schedule these visits. It also notifies Anthem if a pregnancy has ended prematurely so that Anthem can turn off pregnancy health education messaging.</p>
5. How should the office reply when a patient presents as a transfer from another OB provider?
<p>You should answer the pertinent pregnancy questions and complete the <i>HEDIS Maternity Attestation</i> form as usual. Even though the first prenatal visit question typically relates to prenatal care in the first trimester or within 42 days of plan enrollment, you can simply enter the date you first provided prenatal care for the patient.</p>

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6. If a patient transfers out of our practice during her prenatal course, how should the office complete the <i>HEDIS Maternity Attestation</i> form?
It is OK to leave the <i>HEDIS Attestation for Maternity</i> in a pending status as it provides Anthem with pertinent prenatal care information up to the point the patient transfers out of the practice. The form remains in place until it is automatically retired 19 months later.
7. If we have confirmed the patient is pregnant but suffers an early miscarriage or chooses to terminate their pregnancy, how should the office communicate this important information?
In this situation, you should select the option on the <i>HEDIS Maternity Attestation</i> form that states “this pregnancy ended or the baby delivered prior to 20 weeks.” This action allows the office to close out and submit the <i>HEDIS Maternity Attestation</i> form for this pregnancy. This will also notify Anthem that any previously initiated maternity programs should be stopped.
8. Do I have to answer all the questions on the <i>HEDIS Maternity Attestation</i> form all at once?
No, the workflow is designed so you may enter and save information as it becomes available during the pregnancy. After entering the delivery and postpartum visit dates, you are given the option to complete and submit the attestation. Until then, you may save the information you enter and continue with other tasks.
9. Is there an easy way for me to obtain a list of all patients for whom I need to enter prenatal or postpartum visit dates?
<p>You will receive two notifications to complete the <i>HEDIS Maternity Attestation</i> form.</p> <ul style="list-style-type: none">• In order to prompt you to complete the form and enter the first prenatal visit date, the first notification is posted at the time the form is created.• In order to alert you to schedule the postpartum visit (if not already done) and to enter the postpartum visit date, the second notification is posted 14 days prior to the estimated due date. <p>You may access the work queue at any time by going to Payer Spaces. Next, select the payer title from the list. Then, select HEDIS Attestation for Maternity.</p>
10. How can I get additional help, support or training?
<ul style="list-style-type: none">• Availity offers integrated help and on-demand training demonstrations (select Help or Find Help and search using the keyword maternity).• You can launch a training demo from associated help topics as well as the <i>HEDIS Maternity</i> work queue.• If you have technical difficulties related to the <i>HEDIS Maternity Attestation</i> workflow, contact Availity at 1-800-282-4548.• If you have specific member concerns, please contact Provider Services at 1-855-661-2028.