

## POLICY AND PROCEDURE

<b>DEPARTMENT:</b> <del>Medical Management</del> <u>Population Health and Clinical Operations</u>	<b>DOCUMENT NAME:</b> Notification of Pregnancy (NOP) Policy
<b>PAGE:</b> 1 of 7	<b>REPLACES DOCUMENT:</b> SSFB.02
<b>APPROVED DATE:</b> 1/06/14	<b>RETIRED:</b>
<b>EFFECTIVE DATE:</b> 2/1/15; <u>01/23</u>	<b>REVIEWED/REVISED:</b> 11/14, 09/16, 7/17, 5/18, 7/18, 6/19, 4/20, <u>10/22</u>
<b>PRODUCT TYPE:</b> Medicaid	<b>REFERENCE NUMBER:</b> LA.SSFB.02

### SCOPE:

~~Centene Medical Management Department, Louisiana Healthcare Connections (LHCC) Medical Management Department.~~ Population Health and Clinical Operations Department

### PURPOSE:

To provide detailed steps how the Plan identifies pregnant enrollees for subsequent risk stratification and appropriate intervention. Providers, health plan, and specialty company departments are expected to assist with obtaining Notification of Pregnancy (NOP) assessment information.

The NOP process identifies pregnant enrollees and their risk factors as early in pregnancy as possible to establish a relationship between the enrollee, provider, and health plan staff. Receipt of an NOP assessment automatically enrolls a pregnant enrollee in the Start Smart for Your Baby® program, a sub program within Geaux Baby and Me. The NOP contains the enrollee's current contact information, provider information, estimated due date, and obstetric history. Based on this information and claims history, a risk score is assigned that determines the course of action taken regarding the enrollee's pregnancy.

### POLICY:

Notifications of pregnancy can be collected by phone, fax, mail, or web and are stored in our clinical documentation system (TruCare). NOP assessment completion in TruCare triggers the pregnancy mailing sent to the enrollee, enrolls the enrollee into the Start Smart for Your Baby® program, creates a proprietary risk score, collects enrollee's due date, and is a prerequisite for receiving related rewards (if applicable based on health plan and state approval).

The MicroStrategy 412 Currently Pregnant NOP report contains all currently pregnant enrollees with an NOP and is refreshed daily. The report contains enrollees' pregnancy risk factors identified from the NOP in addition to claims information regarding numerous risk factors such as asthma, diabetes, and hypertension. The report is available in MicroStrategy and the Plan's folder. The report provides information for further assessment and appropriate intervention for higher risk enrollees requiring medical, behavioral, or care coordination assistance. ~~To identify pregnant enrollees members for subsequent risk stratification and appropriate intervention.~~

~~One of the essential components of the Start Smart for Your Baby® program is the NOP process, which identifies pregnant enrollees members and their risk factors as early in~~

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~~pregnancy as possible in order to establish a relationship between the enroleemember, provider, and health plan staff.~~

### **POLICY:**

Providers must notify ~~LHCC the Plan~~ of all known pregnancies. Notification should be made as early in the pregnancy as possible, or as soon as the provider is aware of the ~~enrolleesmemberenrollees'~~s pregnancy. Providers may notify ~~LHCC the Plan~~ of a pregnancy via fax, mail, telephone, the LHCC website, or the provider web portal. A standard provider 'Notification of Pregnancy' (NOP) form has been developed to coordinate ease of notification, as well as aid in early and consistent risk stratification and appropriate intervention. Incentives will be given to providers who submit the "Notification of Pregnancy" (NOP) form.

~~The Plan~~~~LHCC~~ is responsible for attempting to obtain NOP screening information from ~~the enrolleesmemberenrollees~~. A standard ~~enrollee~~~~member~~ NOP form is available online and is included in the new ~~enrollee~~~~member~~ packets.

~~LHCC staff~~~~The Plan~~ will also contact ~~memberenrollees~~ on the "413-NoNOP" report to verify the ~~enrollee~~~~memberenrollee~~ is pregnant and obtain an NOP. ~~Once an NOP has been completed, a risk score will be generated to determine enrollees needs. First priority on this report is to outreach to enrolleesmembers identified as having a prior preterm delivery and are potential injectable progesterone candidates.~~

~~LHCC~~~~The Plan~~ will utilize the monthly report from Maximus, "LDH High Risk Pregnancy Report", for additional outreach to pregnant ~~enrolleesmemberenrollees~~. This report will potentially identify injectable progesterone candidates and/or ~~high-risk~~~~high-risk~~ pregnant ~~enrollees~~~~members~~.

~~Enrollees~~~~Members~~ are encouraged to use the ~~Enrollee~~ ~~Member~~-web portal to submit NOP information electronically. ~~Enrollees~~~~Members~~ are given incentives for submitting NOP prior to delivery.

~~LHCC's~~~~The Plan's~~ Behavioral Health Disease Management (BHDM) or Behavioral Health Care Management (BHCM) programs also identify pregnant ~~enrollees~~ ~~members~~ during their interactions with the ~~enrollees~~~~member~~.

NOP assessment completion in TruCare® triggers the Start Smart Pregnancy mailing to be mailed to the ~~enrollee~~~~member~~.

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The daily “Currently Pregnant NOP Adjusted Risk Score” report contains all currently pregnant enrollees. ~~Member~~Enrollees with an NOP and pregnancy risk factors identified from the NOP form in addition to claims information regarding numerous risk factors such as asthma, diabetes and hypertension. The report is available in MicroStrategy for the LHCC’s OB Care Management/Care Coordination team/designee to retrieve for further assessment and appropriate intervention for high and medium risk ~~member~~enrollees as well as Care Coordination and/or Substance Abuse factors requiring Care Coordination outreach. LHCC also performs further assessment on ~~low-risk~~low-risk ~~member~~enrollees with additional risk factors such as alcohol, substance abuse, tobacco use, hospitalizations during this pregnancy, etc.

### PROCEDURE:

As soon as a participating provider or LHCC staff identifies the enrollee ~~member~~-as pregnant, a Notification of Pregnancy (NOP) assessment should be completed.

#### 1. Provider:

1. The provider NOP form is available on the provider section of the LHCC website for printing or electronic submission and on the provider web portal for electronic submission.
  - a) Provider must include assessment of alcohol, tobacco, and substance use section of NOP ~~(RFP 6.11.3)~~
2. Provider offices may also request copies of the NOP form to be mailed to office by contacting the Plan’s LHCC-Provider Relations Representative. Forms should be faxed as noted on the form.
3. If the provider office prefers to call in the pregnancy notification, the call should be transferred to the ~~LHCC OB Care Management~~Maternal Child Health Team~~department~~ designee for intake of the applicable information.

#### B.2. LHCC~~The Plan:~~

1. ~~If LHCC~~The Plan obtains information that a ~~enrollee~~~~member~~enrollee is pregnant from the provider, they may opt to enter the screening information directly into the SSFB Provider NOP assessment in TruCare®.
2. ~~If LHCC~~The Plan obtains information that a ~~enrollee~~~~member~~enrollee is pregnant from the ~~enrollee~~~~member~~enrollee, the screening information will be entered directly into the SSFB ~~Enrollee~~~~Member~~Member OB Screen V2 assessment or the SSFB OB Care Management assessment in TruCare®.

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- a) SSFB OB CM Assessment must be completed by a clinician.
- b) LHCC must complete the alcohol, tobacco, and substance use section of the SSFB OB Screen V2 assessment.

3. If the notification of pregnancy is received from the ~~member~~enrollee, a SSFB ~~Enrollee~~Member OB Screen V2 must be filled out with a check in the box for "Is enrollee~~Member~~ eligible for member ~~enrollee~~ ~~member~~ NOP incentive". This will generate the mailing to the ~~enrollee~~member~~enrollee~~.
- 3.
4. When NOP information is received, every ~~enrollee~~member~~enrollee~~ with an adjusted risk score of "high" should have a PH CM or Care Coordination Case with the Start Smart Pregnancy Case ~~Type opened~~Type opened until it is determined if the ~~enrollee~~member~~enrollee~~ will be in Care Coordination or Care Management.t.

### 3. Prioritization of Pregnant Enrollees

- a) Once the Notification of Pregnancy (NOP) assessment has been secured, a numeric risk score is assigned to each response and the total score is used to categorize the enrollee as high (35+), medium (15-34), or low risk (<15).
- b) The majority of the OB care management cases will be generated from the MicroStrategy 412 Currently Pregnant NOP report which includes the names and risk information for all enrollees with NOP information and refreshes on a daily basis.
- c) The following TruCare assessments count as an NOP and will generate a risk score or an adjusted risk score if one is already on file: SSFB Member OB Screen V2, SSFB Member OB Screen V2\_VENDOR, SSFB OB Case Management, SSFB OB Case Management\_VENDOR, SSFB Provider NOP, SSFB WEB ONLY Member NOP, SSFB WEB ONLY Provider NOP, and SSFB WEB ONLY Provider NOP\_MO. Other sources of OB care management referrals (ER/IP visits; enrollee, provider or other staff referral) are managed through the TruCare Referral process and addressed on a case-by-case basis.
- d) Health plan staff will review the 412 Currently Pregnant NOP report daily to prioritize outreach for engagement in care management and the 413 Currently Pregnant No NOP report daily to prioritize outreach to elicit an NOP. Based on responses to the NOP and claims data, prioritize outreach based on the following criteria:

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- a. Enrollees who are designated as high risk on the MicroStrategy 412 Currently Pregnant NOP report or have been referred for other reasons will require further information to be obtained by an OB Care Manager. Outreach within 7 calendar days of high-risk designation for high risk enrollees less than 34 weeks gestation.
- b. Outreach to medium risk enrollees occurs within 14 calendar days once all high-risk enrollees are addressed.
- c. Low risk enrollees are outreached as needed, but still receive all mailed materials through the SSFB program

#### 4. Documentation of Phone Outreach Attempts

- a) When making outreach to obtain NOP screening information from the 412 NOP Report, the "SSFB OB CM Outreach v2," note must be completed in TruCare to document outreach for receipt of or to obtain an NOP.
- b) When making outreach to obtain NOP screening information from the 413 No-NOP Report, the "SSFB NOP Outreach," note must be completed in TruCare to document outreach for receipt of or to obtain an NOP
- c) The note reason should be "Obtain NOP."
- d) If phone outreach is successful, the MCH team will then complete "SSFB Member OB Screen V2" or "SSFB OB Case Management" assessment.
  - a. The "SSFB Member OB Screen V2" can be completed by a licensed or non-licensed staff enrollee.
  - b. The "SSFB OB Case Management" assessment should be completed by a licensed care manager and should be used for enrollment into care management.
- e) If phone outreach is unsuccessful for the 412 NOP Outreach, the MCH team will then complete the "SSFB OB CM Outreach v2" with the appropriate call outcome and complete additional enrollee or provider outreach as appropriate to obtain member information.
- f) If phone outreach is unsuccessful for the 413 No-NOP Outreach, the MCH team will then complete the "SSFB NOP Outreach" with the appropriate call outcome and complete additional enrollee or provider outreach as appropriate to obtain the NOP

#### REFERENCES

SSFB-.01 Maternal Child Health Program Description.01 Start Smart for Your Baby Notification of Pregnancy (NOP) Policy



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### DEFINITIONS:

Notification of Pregnancy (NOP)

REVISION LOG:	DATE
LA Procurement 2015 Policy Update	11/2014
Replace “The Plan” with “LHCC,” and “Case” with “Care”	11/2015
Revised “every <del>member</del> enrollee” to “every <del>member</del> enrollee with an adjusted risk score of high”	09/2016
Replaced “Preterm Birth High Risk Pregnancy Registry Summary” with “LDH High Risk Pregnancy Report”	09/2016
Changed NurseWise, Cenpatico, and Nurtur with “Involve PeopleCare (EPC)” Changed “Alere” with “Optum”	7/2017
Changed “Chronic Care Management Program (CCMP)” to “BHDM or BHCM”	05/2018
Replaced “Start Smart Pregnancy One Contact” with “PH CM or Care Coordination Start Smart Pregnancy”	05/2018
Removed “CC, CCM or CM Pending status”	05/2018
Changed “ <del>Member</del> Enrollee Connections” to “Community Health Service Representative” Removed retired attachments: <u>NOP_Work_Process_CC.MRU.12.06_042413.doc</u> Removed Reference to retired Policy: MRU 12.06 NOP Work Process	07/2018
No Revisions	6/2019
No Revisions	4/2020
<u>Changed “member” to “enrollee”. Removed titles in approval section. Changed Department to PHCO. Removed RFP reference. Added additional verbiage for Corporate SSFB.01.01 policy regarding documentation requirements.</u>	<u>10/2022</u>

## POLICY AND PROCEDURE APPROVAL

The electronic approval retained in RSA Archer, Centene’s P&P management software, is considered equivalent to a physical signature.

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~~Sr. VP, Population Health—Electronic Signature on File~~

~~Chief Medical Officer—Electronic Signature on File~~