

HEDIS® Pregnancy and Well-Women

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CCS – Cervical Cancer Screening*

*Commercial/Medicaid

Female members 24-64 during the measurement time frame (measurement year and two years prior) who had a cervical cancer screening
or

Female members ages 35-64 who had a cervical cancer screening and HPV test (measurement year and four years prior)

Documentation must include one of the following:

- Date and result of cervical cancer screening test
- Date and result of cervical cancer screening test and date of HPV test on the same date of service
- Evidence of hysterectomy with no residual cervix

Common chart deficiencies:

- Lack of documentation related to women's health in PCP charts
- Incomplete documentation related to hysterectomy
- HPVs ordered due to positive Pap tests do not count

FPC – Frequency of Ongoing Prenatal Care*

*Medicaid

Female members who delivered a live birth on or between November 6 of prior year and November 5 of the measurement year and were continuously enrolled 42 days prior to delivery

Documentation must include:

- Date and documentation of all prenatal visits (Most of this information is found on the ACOG sheets)

Common chart deficiencies:

- Must be unduplicated prenatal visits. If there is an office visit and the provider orders a U/S and labs, and they are done on separate days, all three would count only as one date of service. Labs, U/S, and other procedures cannot be counted separate from the visit with the prenatal care provider.

PPC – Prenatal and Postpartum Care

Female members who delivered a live birth between November 6 of prior year and November 5 of the measurement year

Documentation must include:

- Prenatal care: prenatal visit within 42 days of enrollment or during the first trimester (Most of this information is found on the ACOG sheets)
- Postpartum care: postpartum visit within 21-56 days of delivery

Common chart deficiencies:

- Incision check for post-C-section does not constitute a postpartum visit

