Preconception and Interconception Care Measurement Strategy

Learning Network Overall Aim:

By July 2017, we will improve life course care for women related to pre and interconception care. Our goals are to:

1. Improve the postpartum visit rate 10% or more relative to the State baseline;
2. Improve adolescent well visit rate 10% or more relative to the State baseline;
3. Improve birth intention and client choice of contraceptive methods including most and moderately effective contraception;
4. Improve birth spacing and reduce the proportion of live births that were conceived within 1-5 months; 6-11 months; 12-17 months from the previous live birth* by 10% or more relative to State baseline and ultimately <18;
5. Reduce racial/ethnic disparities in the above goals relative to non-Hispanic Whites by 10% or more relative to the State baseline.

Learning network members are encouraged to choose between 5-7 measures based on the focus of the strategies and changes chosen to focus on within each state. The measures chosen should be a combination of both outcome and process measures.

State Outcome Measures	Pilot Site Outcome Measures	Pilot Site Process Measures	Proposed Innovation Measures for Innovation Subgroup
• Number women using moderately effective and most effective contraception* • Number women using most effective, reversible contraception* • Postpartum care visits • Removal of most effective reversible contraception* • Birth spacing	• Adolescent well visit • Moderately or most effective methods of contraceptive • Most effective, reversible methods of contraception • Postpartum Care Visit • Birth Spacing	• Woman well visit bundle content • One Key Question: Every woman, every visit • Number women with intended pregnancies	• State Postpartum care visits • Postpartum Visits 0-90 Days • Referral, and or follow up from screening findings • Interconception care risk screenings at well child visits: providing evidence based maternal risk assessments and interventions at well child visits to improve future birth outcomes – specifically maternal depression screening, use of MVI with folate, tobacco use, and family planning to increase birth spacing and pregnancy intention • # of women of reproductive age with documented reproductive life plan. • % PPV for uncomplicated births 2 to 4 weeks • % hyptertensive mothers with BP check 3 to 7 days of birth • % women with c-section with incision check at 2 weeks • % postpartum content delivered in an inter-conception visit • % mother/baby dyad visits at 4 weeks • % adolescents with well visit per month

** These measures are currently under development. They are provided here to advise general parameters around how the project will define various components within that measure (e.g. data sources and collection practices).*

Task List

Monthly Tasks for teams to complete for Learning Network (Preconception and Interconception Care) for each Quarter (Q1 = Jan-Mar, Q2 = Apr-Jun, Q3 = Jul-Sep, Q4 = Oct-Dec).

If you have any questions, please contact us at coiin@nichq.org.

Recommended Submission Date	*Tasks To Complete: State Team*		*Tasks to Complete: Pilot Sites*

20th day of Month 1 (Jan/Apr/Jul/Oct):
• *Monthly Data*
• *Team Assessment for Each Learning Network*
	Submit numerators and denominators for the 6 CoIIN-Wide Measures for any **previously unreported periods** into the site
	Note: *The 6 CoIIN-Wide Measures for the* ***previous quarter*** *will be open at this point. Submit data when available for CoIIN-Wide measures, recognizing states may have lags (anticipating 6 weeks for birth certificate data and up to 3 months for mortality data). <u>These data only need to be entered ONCE each quarter per state team.</u>*
	
	Submit the five monthly State Outcome measures for either **reporting month** into the site
	
	Submit completed PDSA worksheet for **reporting month(s)** to the Collaboratory using the following file naming and folder/ category instructions:
	• File Name: State_Month_PDSA
	• Name on the Collaboratory should include:
	  ○ State, Learning Network, PDSA Cycle and Date Submitted
	  ○ e.g., Alaska Pre & Interconception Care PDSA Cycle (09/28/15)
	• Under folder, check off "PDSA Cycles"
	• Under category, check off "Pre & Interconception Care" and "worksheets"
	
	Complete Team Assessment section **reporting month** into the site
	• Changes by Driver
	• Learnings
	• Barriers
	• Team Assessment Score
			Note: Not all states will have pilot sites, or have pilot sites identified by this reporting period. This applies to all teams for all reporting periods.
			
			Submit numerators and denominators for the Pilot Site Outcome AND Pilot Site Process measures for **reporting month** for chosen measures from those listed in the site
			
			Submit completed PDSA worksheet for **reporting month(s)** to the Collaboratory using the following file naming and folder/ category instructions:
			• File Name: State_Month_PDSA
			• Name on the Collaboratory should include:
			  ○ State, Learning Network, PDSA Cycle and Date Submitted
			  ○ e.g., Alaska Pre & Interconception Care PDSA Cycle (09/28/15)
			• Under folder, check off "PDSA Cycles"
			• Under category, check off "Pre & Interconception Care" and "worksheets"
			
			Complete Team Assessment section **reporting month** into the site
			• Changes by Driver
			• Learnings
			• Barriers
			• Team Assessment Score

20th day of Month 2 (Feb/May/Aug/Nov):
 	
• *Monthly Data*
• *Team Assessment for Each Learning Network*
• *Vital Statistics for **Previous Quarter** from Birth File*
	Submit numerators and denominators for the 6 CoIIN-Wide Measures for the **previous quarter** into the site
	***Note:** Submit data when available for CoIIN-Wide measures, recognizing states may have lags (anticipating 6 weeks for birth certificate data and up to 3 months for mortality data. <u>These data only need to be entered ONCE each quarter per state team.</u>*
	
	Submit the five monthly State Outcome measures for either **reporting month** into the site
	
	Submit completed PDSA worksheet for **reporting month(s)** to the Collaboratory using the following file naming and folder/ category instructions:
	• File Name: State_Month_PDSA
	• Name on the Collaboratory should include:
	  ○ State, Learning Network, PDSA Cycle and Date Submitted
	  ○ e.g., Alaska Pre & Interconception Care PDSA Cycle (09/28/15)
	• Under folder, check off "PDSA Cycles"
	• Under category, check off "Pre & Interconception Care" and "worksheets"
	
	Complete Team Assessment section **reporting month** into the site
	• Changes by Driver
	• Learnings
	• Barriers
	Team Assessment Score
			Submit numerators and denominators for the Pilot Site Outcome AND Pilot Site Process measures for **reporting month** for chosen measures from those listed in the site
			
			Submit completed PDSA worksheet for **reporting month(s)** to the Collaboratory using the following file naming and folder/ category instructions:
			• File Name: State_Month_PDSA
			• Name on the Collaboratory should include:
			  ○ State, Learning Network, PDSA Cycle and Date Submitted
			  ○ e.g., Alaska Pre & Interconception Care PDSA Cycle (09/28/15)
			• Under folder, check off "PDSA Cycles"
			• Under category, check off "Pre & Interconception Care" and "worksheets"
			
			Complete Team Assessment section **reporting month** into the site
			• Changes by Driver
			• Learnings
			• Barriers
			• Team Assessment Score

20th day of Month 3 (Mar/Jun/Sep/Dec):
 	
• *Monthly Data*
• *Team Assessment for Each Learning Network*
• *Vital Statistics for **Previous Quarter** from Death File*
	Submit numerators and denominators for the 6 CoIIN-Wide Measures for the **previous quarter** into the site
	***Note:** Submit data when available for CoIIN-Wide measures, recognizing states may have lags (anticipating 6 weeks for birth certificate data and up to 3 months for mortality data. <u>These data only need to be entered ONCE each quarter per state team.</u>*
	
	Submit the five monthly State Outcome measures for either **reporting month** into the site
	
	Submit completed PDSA worksheet for **reporting month(s)** to the Collaboratory using the following file naming and folder/ category instructions:
	• File Name: State_Month_PDSA
			Submit numerators and denominators for the Pilot Site Outcome AND Pilot Site Process measures for **reporting month** for chosen measures from those listed in the site
			
			Submit completed PDSA worksheet for **reporting month(s)** to the Collaboratory using the following file naming and folder/ category instructions:
			• File Name: State_Month_PDSA
			• Name on the Collaboratory should include:
			  ○ State, Learning Network, PDSA Cycle and Date Submitted
			  ○ e.g., Alaska Pre & Interconception Care PDSA Cycle (09/28/15)
			• Under folder, check off "PDSA Cycles"

	• Name on the Collaboratory should include:
	  ○ State, Learning Network, PDSA Cycle and Date Submitted
	  ○ e.g., Alaska Pre & Interconception Care PDSA Cycle (09/28/15)
	• Under folder, check off "PDSA Cycles"
	• Under category, check off "Pre & Interconception Care" and "worksheets"
	
	Complete Team Assessment section **reporting month** into the site
	• Changes by Driver
	• Learnings
	• Barriers
	Team Assessment Score
			• Under category, check off "Pre & Interconception Care" and "worksheets"
			
			Complete Team Assessment section **reporting month** into the site
			• Changes by Driver
			• Learnings
			• Barriers
			• Team Assessment Score

Measure Detail: Preconception and Interconception Care

Outcome Measures for States

Measure	Numerator	Denominator	Data Collection	Notes	Reporting Frequency
PI-SO1: Moderately or most effective methods of contraceptive[1]	Number of claims for moderate or most effective contraception for women aged 15-44 in the measurement month	Number of women aged 15-44 enrolled in Medicaid in the measurement month	Report all data Use Medicaid Claims Data or Medicaid pharmacy claims data	Claims may be inflated by more that one prescription for birth control in a year for an enrollee woman The measurement month is defined as the month of the claim. When you enter the first data in the site, please state the period of the lag. The assumption is the lag period remains the same throughout the project. Refer to contraceptive methods table1 and table 2 below for Medicaid codes	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-SO2: Most effective, reversible methods of contraception[1]	Number of claims for women aged 15-44 for the most effective, reversible contraception, including LARC in the measurement month	Number of women aged 15-44 enrolled in Medicaid in the measurement month	Report all data Use Medicaid Claims Data or Medicaid pharmacy claims	The claims may be inflated by more that one prescription for birth control in a year for an enrollee woman The measurement month is defined as the month of the claim. When you enter the first data in the site, please state the period of the lag. The assumption is the lag period remains the same throughout the project. Refer to contraceptive methods table1 and table 2 below for Medicaid codes	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-SO3: Removal of most effective reversible contraception[1]	Number of claims for removal of long acting, reversible contraception including LARC in the measurement month	Number of women aged 15-44 enrolled in Medicaid in the measurement month	Report all data Use Medicaid Claims Data or Medicaid pharmacy claims	The measurement month is defined as the month of the claim. When you enter the first data in the site, please state the period of the lag. The assumption is the lag period remains the same throughout the project. Refer to contraceptive methods table1 and table 2 below for Medicaid codes	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month

PI-SO4: Postpartum Care Visit[1]	Women who had a Medicaid financed birth who received a postpartum visit (postpartum visit on or between 21 and 56 days after delivery)	Women who had a Medicaid financed birth in the previous 57 days	Medicaid billing data from Medicaid Management Information Systems (MMIS)	The measurement month is defined as the month of the claim. When you enter the first data in the site, please state the period of the lag. The assumption is the lag period remains the same throughout the project.	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-SO5(a,b,c): Birth Spacing with short inter-pregnancy intervals of <6, <12, <18 months	Number of births with short inter-pregnancy intervals of 1-5 months; 6-11 months; 12-17 months	Number of women with a second or higher order birth	Report all Birth Certificates State Vital Statistics		Quarterly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month

Outcome Measures for Pilot Sites

Name	Numerator	Denominator	Data Collection	Notes	Reporting Frequency
PI-PO1: Adolescent well visit	Young women 12-21 years of age in the sample who had at least one comprehensive well-care visit with a PCP including OB/GYN during measurement year	Young women 12-21 years of age sampled in the measurement month	Audit 20 charts of young women 12-21 each month, look back over the year for an AWVisit	Please ensure that multiple claims do not correspond with a single individual	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-PO2: Percentage: Moderately or most effective	Number of women 15-44 with a well visit and/or postpartum visit who get most or moderate	All women 15-44 with a well visit and/or	Report all or audit 20 charts per month of well women/postpartum	Exclusions: those who already use most or moderate contraception	Monthly Baseline data starting Jan 1 2015

[1] These measures are currently under development. They are provided here to advise general parameters around how the project will define various components within that measure (e.g. data sources and collection practices).

methods of contraceptive	effective contraception in the measurement month	postpartum visit in the measurement month	visits. If Title X clinic use claims data if available	Please ensure that multiple claims do not correspond with a single individual Refer to contraceptive methods table1 and table 2 below for Medicaid codes	Recommended submission date for 20th day of each month
PI-PO3: Percentage: Most effective, reversible methods of contraception	Number of claims for women aged 15-44 who adopt the most effective, reversible contraception, including LARC, in the measurement month	Number of women aged 15-44 with a well woman visit or postpartum visit in the measurement month	Report all or audit 20 charts per month of well women/postpartum visits. If Title X clinic use claims data if available	Exclusions: women already using most or moderately effective contraception Please ensure that multiple claims do not correspond with a single individual Refer to contraceptive methods table1 and table 2 below for Medicaid codes	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-PO5: Postpartum Care Visit	Women who had a Medicaid financed birth who received a postpartum visit (postpartum visit on or between 21 and 56 days after delivery)	Women who had a Medicaid financed birth in the previous 57 days	Audit 20 charts or 100% if less than 20 births. Look back 2 months or 60 days for women who had a birth to verify PPV between 21-56 days	Please ensure that multiple claims do not correspond with a single individual	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-PO6: Birth Spacing	Number of births with short inter-pregnancy intervals within 1-5 months; 6-11 months; 12-17 months	Number of women with a second or higher order birth	Audit 20 charts of subsequent birth mothers for birth spacing		Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month

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Process Measure for Pilot Sites

Name	Numerator	Denominator	Data Collection	Reporting Frequency
PI-PP1: Woman Well Visit Content Bundle	Number of bundle component opportunities offered woman at the well woman visit. For example, each woman should receive each of these four components: 1. Safety guidance 2. Screening for chronic conditions and next steps 3. Healthy life style choice advice 4. Life course planning and contraception Calculate the numerator by multiplying the number of well woman visits x the number of components the woman received. Ideally, 20 visits x 4 components per visit = a numerator of 80	Number of bundle component opportunities multiplied times number of well woman visits in the month. Calculate the denominator this way: 20 well visits x 4 bundle components that should be included in each well visit = a denominator of 80	Each month audit 20 charts per month (or 100% of visits if less than 20 in the month) for documentation of bundle opportunities	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-PP2: One key question: every woman, every visit	Number of visits among women in child bearing years who have a clinic visit (for any reason) who are asked, "Would you like to become pregnant in the next year?"	Number of visits among women in child bearing years	Ask every woman in child bearing years at every visit, "Would you like to become pregnant in the next year?" Respond with appropriate guidance.	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month
PI-PP3: Intended pregnancy	Number of women seen for first prenatal visit who say, yes to the question, "Is this pregnancy intended or planned?"	Number of women seen for first prenatal visit	Ask at the first prenatal visit	Monthly Baseline data starting Jan 1 2015 Recommended submission date for 20th day of each month

Table 1. Codes used to identify use of most or moderately effective contraceptive methods[2]

Description	ICD-9	CPT	HCPCS	NDC codes
Female Sterilization	V25.2, Sterilization V26.51, Tubal ligation status 66.2, Procedure code bilateral endoscopic or occlusion of fallopian tubes	58600, Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral 58605, Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization (separate procedure) 58615, Occlusion of fallopian tube(s) by device (eg, band, clip, Falope ring) vaginal or suprapubic approach 58611, Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra- abdominal surgery (not a separate procedure) (List separately in addition to code for primary procedure) 58670, Laparoscopy, surgical; with fulguration of oviducts (with or without transection) 58671, Laparoscopy, surgical; with occlusion of oviducts by device (eg, band, clip, or Falope ring) 58565, Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants 58340, Catheterization and introduction of saline or contrast material for saline infusion sonohysterography (SIS) or HSG 74740, HSG, radiologic supervision and interpretation	A4264, Permanent implantable contraceptive intratubal occlusion device and delivery system	

[2] Tables taken from draft Medicaid Measure (Developmental) Use of Contraceptive Methods by Women Ages 15-20 years http://www.medicaid.gov/medicaid-chip-program-information/by-topics/quality-of-care/downloads/mih-contraceptive-use-15-to-20.pdf and 21-44 years http://www.medicaid.gov/medicaid-chip-program-information/by-topics/quality-of-care/downloads/mih-contraceptive-use-21-to-44.pdf

Intrauterine device (IUD/IUS)	*V25.1,* Encounter for insertion or removal of intrauterine contraceptive device V25.11, Encounter for insertion of intrauterine contraceptive device V25.13, Encounter for removal and reinsertion of intrauterine contraceptive device V25.42, Surveillance of contraceptive method, intrauterine device V45.51, Presence of intrauterine contraceptive device 996.32, Mechanical complication due to intrauterine contraceptive device 69.7, Insertion of intrauterine contraceptive device	58300, Insertion of IUD	J7300, Intrauterine copper contraceptive J7301 - Levonorgestrel-releasing intrauterine contraceptive system, 13.5 mg J7302, Levonorgestrel-releasing intrauterine contraceptive system, 52 mg S4989, Contraceptive intrauterine device (e.g. progestacertiud), including implants and supplies Q0090 - Levonorgestrel-releasing intrauterine contraceptive system, (skyla), 13.5 mg S4981, Insertion of levonorgestrel- releasing intrauterine system	50419042101, 50419042201, 5128520401
Hormonal implant	V25.5, Encounter for insertion of implantable subdermal contraceptive, V25.43, Surveillance of implantable subdermal contraceptive. V45.52, Presence of subdermal contraceptive implant 996.30, Mechanical complication of unspecified genitourinary device, implant, and graft	11981 Insertion, non- biodegradable drug delivery implant, Implanon or Nexplanon 11983, Removal with reinsertion, non-biodegradable drug delivery implant, Implanon or Nexplanon	J7306, Levonorgestrel (contraceptive) implant system, including implants and supplies J7307,Etonogestrel [contraceptive] implant system, including implant and supplies	*00052027201*
Injectable (1-month/ 3-month)			J1050, Injection, medroxyprogesterone acetate	54569370100, 54569490400, 54569552700, 54569561600, 54569621900, 54868361300, 54868410000, 54868410001, 54868525700, 55045350501, 59762453701, 59762453702, 59762453801, 59762453802, 59762453809

Oral contraceptive	V25.01, Counseling and prescription of oral contraceptives V25.41, Surveillance of contraceptive pill		S4993, Contraceptive pills for birth control	00008111720, 00008111730, 00008251402, 00008253505, 00008253601, 00008253605, 00052026106, 00052028306, 00062125100, 00062125115, 00062125120, 00062133220, 00062141116, 00062141123, 00062171400, 00062171415, 00062176100, 00062176115, 00062178100, 00062178115, 00062179600, 00062179615, 00062190120, 00062190320, 000190700, 00062190715, 00062191000, 00062191015, 00247052028, 00247069028, 00247069128, 00247069228, 00247139828, 00247151328, 00247151628, 00247151728, 00247176404, 00247176421, 00247176521, 00247198621, 00247198628, 00247200828, 00247201004, 00247201008, 00247201028, 00247201228, 00247201328, 00247214728, 00247216928, 00247217028, 00247223028, 00247223528, 00247226028, 00247226828, 00378655053, 00378727253, 00378729253, 00430042014, 00430048214, 00430053014, 00430053550, 00430057014, 00430057045, 00430058014, 00430058045, 00430058114, 00430058514, 00430058545, 00555034458, 00555071558, 00555900867, 00555900942, 00555901058, 00555901258, 00555901467, 00555901658, 00555901858, 00555902058, 00555902542, 00555902557, 00555902658, 00555902742, 00555902757, 00555902858, 00555903270, 00555903458, 00555904358, 00555904558, 00555904758, 00555904958, 00555905058, 00555905158, 00555905167, 00555906458, 00555906467, 00555906558, 00555906658, 00555906667, 00555912366, 00555913167, 00555913179, 00603359017, 00603359049, 00603752117, 00603752149, 00603752517, 00603752549, 00603754017, 00603754049, 00603760615, 00603760648, 00603760715, 00603760748, 00603760817, 00603760917, 00603762517, 00603762549, 00603763417, 00603763449, 00603764017, 00603764217, 00603766317, 00603766517, 23490765301, 23490767001, 23490769901, 24090080184, 24090096184, 35356001468, 35356001568, 35356002168, 35356025528, 35356037028, 43386062030, 45802084054, 50419040201, 50419040203, 50419040303, 50419040503, 50419040701, 50419040703, 50419041112, 50419041128, 50419043306, 50419043312, 50452025115, 50458017115, 50458017615, 50458017815, 50458019115, 50458019411, 50458019416, 50458019615, 50458019715, 50458025115, 51285005866, 51285007997, 51285008070, 51285008198, 51285008297, 51285008370, 51285008498, 51285008787, 51285009158, 51285009287, 51285011458, 51285043165, 51285054628, 51285076993, 51285094288, 51285094388, 52544014331, 52544017572, 52544020431, 52544021028, 52544021928,

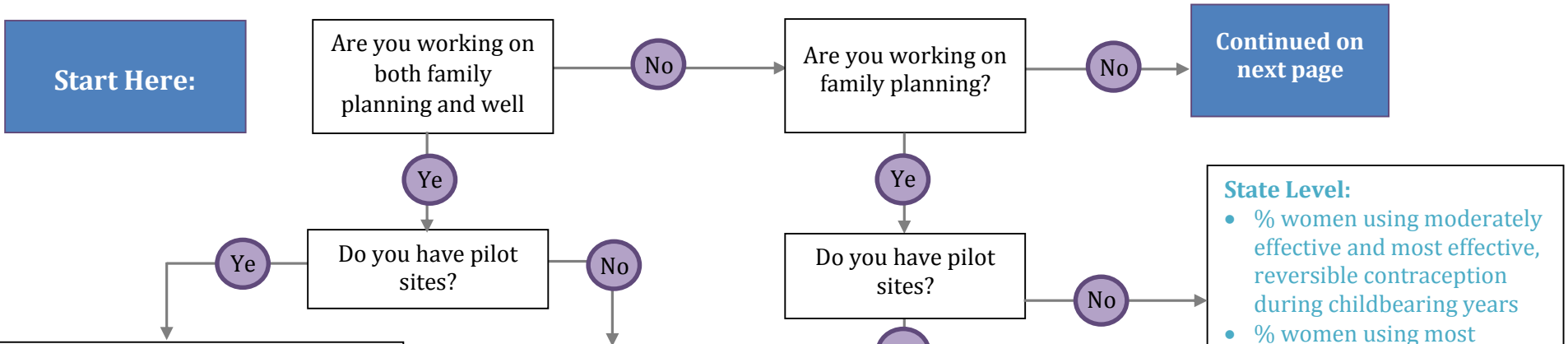
				52544022829, 52544023528, 52544023531, 52544024531, 52544024728, 52544024828, 52544025428, 52544025928, 52544025988, 52544026528, 52544026531, 52544026829, 52544026884, 52544027428, 52544027431, 52544027536, 52544027928, 52544028754, 52544029128, 52544029231, 52544029241, 52544029528, 52544038328, 52544038428, 52544047536, 52544055028, 52544055228, 52544055428, 52544062928, 52544063028, 52544063128, 52544084728, 52544084828, 52544089228, 52544093628, 52544094028, 52544094928, 52544095021, 52544095121, 52544095328, 52544095428, 52544095931, 52544096691, 52544096728, 52544098131, 52544098231, 52959045002, 54569067900, 54569068500, 54569068501, 54569068900, 54569068901, 54569143900, 54569384400, 54569422200, 54569422201, 54569426900, 54569427301, 54569481700, 54569487800, 54569487801, 54569489000, 54569498400, 54569499700, 54569499800, 54569516100, 54569534300, 54569534900, 54569549300, 54569549302, 54569579600, 54569579700, 54569579800, 54569581600, 54569582600, 54569603200, 54569612800, 54569614400, 54569614500, 54569627200, 54569628000, 54569628100, 54868042800, 54868044300, 54868050200, 54868050700, 54868050801, 54868050901, 54868051600, 54868151200, 54868156400, 54868231600, 54868260600, 54868270100, 54868377200, 54868386300, 54868394800, 54868409300, 54868423900, 54868436900, 54868453800, 54868459000, 54868460700, 54868473000, 54868473100, 54868474200, 54868474500, 54868475400, 54868477600, 54868481400, 54868482800, 54868485100, 54868486000, 54868491100, 54868502800, 54868528600, 54868532600, 54868535600, 54868582600, 54868582800, 54868594200, 55045283902, 55045348506, 55045349701, 55045349801, 55045378106, 55045378206, 55045378302, 55289024708, 55289088704, 55887005228, 55887028628, 58016474701, 58016482701, 66993061128, 66993061528, 68180084313, 68180084413, 68180084613, 68180084813, 68180085413, 68180087611, 68180087613, 68180089713, 68180089813, 68180090213, 68462030329, 68462030529, 68462030929, 68462031629, 68462031829, 68462038829, 68462039429, 68462055629, 68462056529
Patch			J7304, Contraceptive supply, hormone containing patch, each	00062192001 Ortho Evra 00062192015 Ortho Evra 00062192024 Ortho Evra 50458019201 Ortho Evra 50458019215 Ortho Evra

				54569541300 Ortho Evra 54868467000 Ortho Evra
Vaginal ring			J7303, Contraceptive supply, hormone containing vaginal ring, each	00052027301 NuvaRing 00052027303 NuvaRing 54569586500 NuvaRing 54868483201 NuvaRing 55887075401 NuvaRing
Diaphragm		57170, Diaphragm or cervical cap fitting with instructions	A4266, Diaphragm for contraceptive use	00027013160, 00027013180, 00062330100, 00062330200, 00062330300, 00062330400, 00062330500, 00062330600, 00062330700, 00062330800, 00062330900, 00062331000, 00062331100, 00062331200, 00062331300, 00062334100, 00062334200, 00062334300, 00062334400, 00062334500, 00062334600, 00062334700, 00062334800, 00062334900, 00062335000, 00062335100, 00062335200, 00062338100, 00062338200, 00062338300, 00062338400, 00062338500, 00062338600, 00062338700, 00062338800, 00062338900, 00062364103, 00062364300, 00234005100, 00234013100, 00234013150, 00234013155, 00234013160, 00234013165, 00234013170, 00234013175, 00234013180, 00234013185, 00234013190, 00234013195, 00234013600, 00234013660, 00234013665, 00234013670, 00234013675, 00234013680, 00234013685, 00234013690, 00234013695, 00396401065, 00396401070, 00396401075, 00396401080

Table 2. Codes used to identify removal/discontinued use of LARC

Description	ICD-9	CPT
Discontinue Intrauterine device (IUD)	V25.12, Encounter for removal of intrauterine contraceptive device 97.71, Removal of intrauterine device	58301, Encounter for removal of intrauterine contraceptive device
Discontinue Implant		11976, Removal, non-biodegradable drug delivery implant, Norplant 11982, Removal, non-biodegradable drug delivery implant, Implanon or Nexplanon

Preconception & Interconception Care Measurement Flowchart



State Level Measures:
(recommended data entry by state data lead)

- % women using moderately effective and most effective, reversible contraception during childbearing years
- % women using most effective, reversible contraception during childbearing years
- Birth spacing - less than 18 months apart (3 categories)
- Postpartum visits
- Removal of most effective reversible contraception

Pilot Site Measures: (recommended data entry by pilot data lead(s))

- Same as above at pilot level
- Well woman bundle
- One Key Question: Every woman, every visit
- Number women with intended pregnancies

State Level Measures:

- % women using moderately effective and most effective, reversible contraception during childbearing years
- % women using most effective, reversible contraception during childbearing years
- Birth spacing - less than 18 months apart (3 categories)
- Postpartum visits
- Removal of most effective reversible contraception

State Level Measures:
(recommended data entry by state data lead)

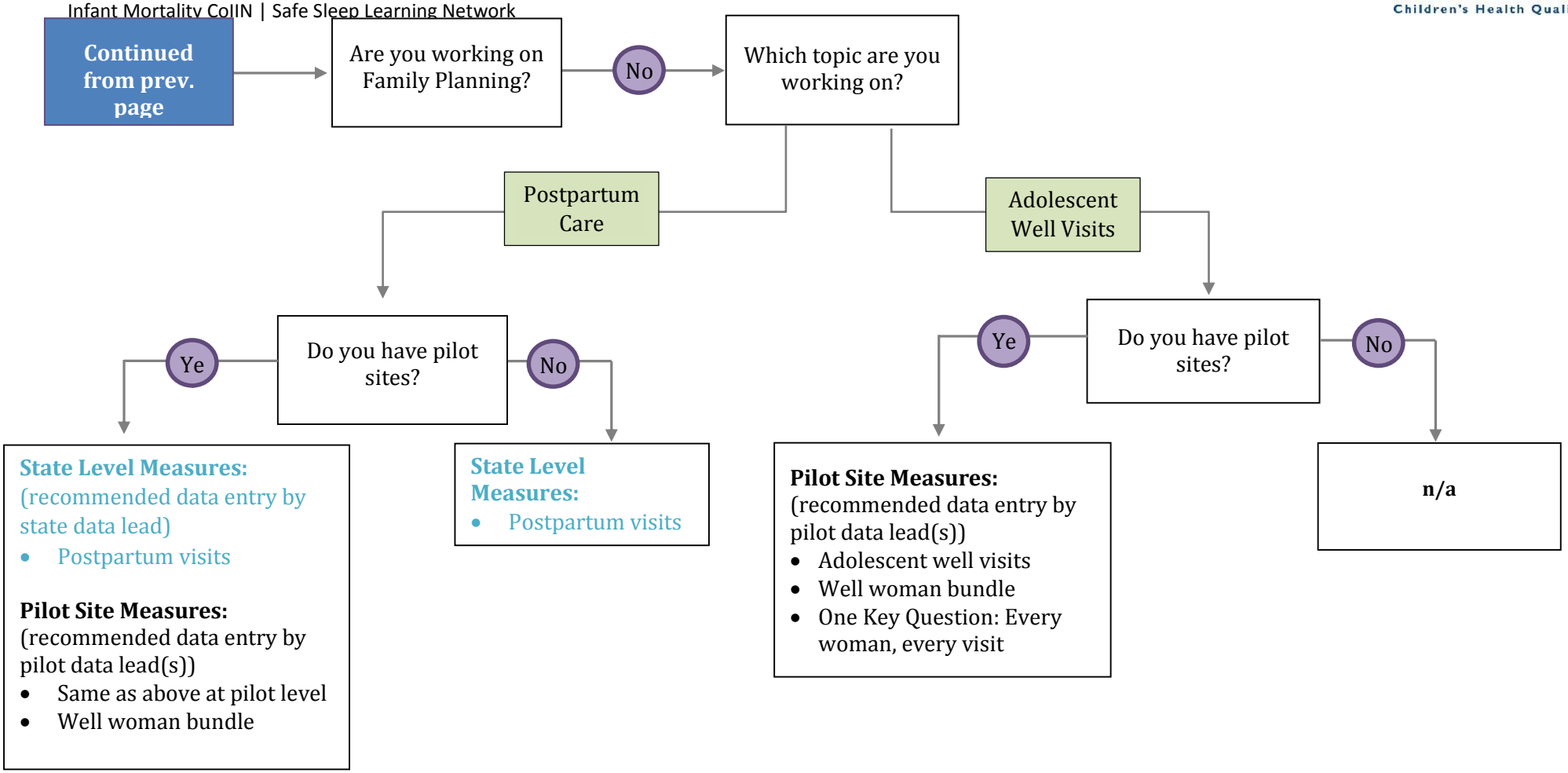
- % women using moderately effective and most effective, reversible contraception during childbearing years
- % women using most effective, reversible contraception during childbearing years
- Birth spacing - less than 18 months apart (3 categories)

Pilot Site Measures:
(recommended data entry by pilot data lead(s))

- Same as above at pilot level
- Number women with intended pregnancies

State Level:

- % women using moderately effective and most effective, reversible contraception during childbearing years
- % women using most effective, reversible contraception during childbearing years
- Birth spacing - less than 18 months apart (3 categories)
- Removal of most effective reversible contraception
-



Innovation Measures: There will be an opportunity for teams to work together to develop a set of "innovation" measures that focus on unique and exciting work that arises during the CoIIN. Some possible innovation measures might focus on topic areas such as: P*ostpartum Visits 0-90 Days; Percentage of visits for women in childbearing years with content that includes birth intentionality, birth spacing, most effective contraception; Percentage adolescent well visits with content that includes topics such as birth planning, immunizations, behavioral health and substance use; Screenings, referral and follow-up for depression, violence in the home, and substance abuse.*

Contraceptive Measure SAS Coding

SAS coding has been developed by the Center for Medical Services for 3 and 60 postpartum Contraception Measures, as well as MIH Contraception measure. These codes can be found on the CoLab:

3 day Postpartum Contraception Measure SAS coding:
http://imcoiin.community.nichq.org/resource/3-day-postpartum-contraception-measure-sas-code

60 day postpartum Contraception Measure SAS coding:
http://imcoiin.community.nichq.org/resource/60-day-postpartum-contraception-measure-sas-code

MIH Contraception measure SAS coding:
http://imcoiin.community.nichq.org/resource/mih-contraception-use-measure-sas-code

NOTE: These SAS codes were developed by Brittni Frederiksen and Loretta Gaven. These SAS codes have limits for time period post-delivery that may or may not be applicable to teams depending on their strategy. General contraceptive measure detail can be found here: https://www.medicaid.gov/medicaid-chip-program-information/by-topics/quality-of-care/downloads/ffy-2015-contraceptive-use-measure.pdf

If you have questions, please email coiin@nichq.org.

Interpregnancy Interval SAS Coding

NOTE: explanation for restriction around intervals of less than one month can be found in the following article (http://www.ncbi.nlm.nih.gov/pubmed/25062997) and CDC report (http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_03.pdf)

```
PROC FORMAT;
VALUE IPI_CAT
        1='<6 MOS'
        2='6-11 MOS'
        3='12-17 MOS'
        4='18+ MOS';
RUN;

/*****  State file code - exact days *****/
/*****  Modified code from Lina Nerlander      *****/
data lina.nat0708rt2;
set lina.nat0708rt2;
```

```
IF restatus NE 4 AND 2<=LBO_REC<=8 AND DPLURAL=1; * restrict to resident, second or higher order, singleton live births;

DOB=MDY (birmon, birday,biryr);

format DOB MMDDYY8.;

*creating date for last live birth;

if llbyr ne 9999 and llbyr ne 8888 and llbmon ne 99 and llbmon ne 88 then do;

llbday=15; * impute day to the middle;

DLLB=MDY (llbmon,llbday,llbyr);

format DLLB MMDDYY8.;

end;

*creating date for last other pregnancy outcome;

if lopyr ne 9999 and lopyr ne 8888 and lopmon ne 99 and lopmon ne 88 then do;

lopday=15; * impute day to the middle;

DLOP=MDY (lopmon,lopday,lopyr);

format DLOP MMDDYY8.;

end;

*delete observations where last pregnancy did not end in live birth (multiple pregnancy intervals between live births);

if DLLB ne . and DLOP ne . and DLOP>DLLOB then delete;

*converting gestational age to days;

if clingest ne 99 then do;

clingestdays = clingest*7;

end;

*Creating new variable 'date of conception' within plausible range of gestational age;

if clingest ge 20 and clingest le 42 then do;

DOC = DOB - clingestdays;

end;
```

```
*Creating 'interpregnancy interval' in days and months;

IPIDAYS = DOC-DLLB;

IPI_MOS=IPIDAYS/30.42; *1 month = 30.42 days (365/12);


*create categorical variable that sets implausible values (negative or <1 month) to missing;

if ipi_mos<1 then ipi_cat=.;

else if ipi<6 then ipi_cat=1;

else if ipi<12 then ipi_cat=2;

else if ipi<18 then ipi_cat=3;

else ipi_cat=4;


run;
```

Preconception and Interconception Care Birth Team Assessment Monthly Progress Report

TA-PCICC-1a: Change Tested and Notes

Change and Notes	Status of Test of Change	Primary Driver
	Choose an item.	Choose an item.

TA-PCICC-1b: Change Tested and Notes

Change and Notes	Status of Test of Change	Primary Driver
	Choose an item.	Choose an item.

TA-PCICC-1c: Change Tested and Notes

Change and Notes	Status of Test of Change	Primary Driver
	Choose an item.	Choose an item.

TA-PCICC-2: What are you learning?

TA-PCICC-3: What barriers are surfacing as you do this work?

TA-PCICC-4: Team Assessment Score*

Team Assessment Score	Choose an item.

***Score**	**Description**
1.0 Forming team	Team has been formed; target population identified; aim determined and baseline measurement begun
1.5 Planning for the project has begun	Team is meeting, discussion is occurring. Plans for the project have been made
2.0 Activity, but no changes	Team actively engaged in development, research, discussion but no changes have been tested

2.5 Changes tested, but no improvement	Components of the model being tested but no improvement in measures. Data on key measures are reported
3.0 Modest improvement	Initial test cycles have been completed and implementation begun for several components. Evidence of moderate improvement in process measures
3.5 Improvement	Some improvement in outcome measures, process measures continuing to improve, PDSA test cycles on all components of the Change Package, changes implemented for many components of the Change Package
4.0 Significant improvement	Most components of the Change Package are implemented for the population of focus. Evidence of sustained improvement in outcome measures, halfway toward accomplishing all of the goals. Plans for spread the improvement are in place.
4.5 Sustainable improvement	Sustained improvement in most outcomes measures, 75% of goals achieved, spread to a larger population has begun
5.0 Outstanding sustainable results	All components of the Change Package implemented, all goals of the aim have been accomplished, outcome measures at national benchmark levels, and spread to another facility is underway

The accompanying information, materials, and recommendations are the result of the collaborative efforts of a number of organizations and individuals on this project and do not necessarily reflect the views of any national partner.

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