

2022 MCAS MEASURE: CONTRACEPTIVE CARE POSTPARTUM WOMEN AGES 15-44 (CCP)

Measure Steward: U.S. Office of Population Affairs (OPA)

Gold Coast Health Plan's (GCHP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) scores by providing guidance and resources. This tip sheet will provide the key components to the MCAS measure, "Contraceptive Care – Postpartum Women Ages 15-44 (CCP)."

Measure Description: The percentage of women ages 15 to 44 who had a live birth between January 1, 2021 through October 31, 2021 and were provided:

- ▶ A most effective or moderately effective method of contraception within 3 and 60 days of delivery.
OR
- ▶ A long-acting reversible method of contraception (LARC) within 3 and 60 days of delivery.

Data Collection Method: Administrative¹

CCP Clinical Code Sets

- ▶ For billing, reimbursement, and reporting of services completed, submit claims in a timely manner with the appropriate medical codes for all clinical conditions evaluated and services completed.

Codes used to identify women with a live birth delivery who received contraceptive care:

- ▶ Please click [here](#) for a complete list of codes used to identify most effective contraception (i.e. female sterilization, contraceptive implants, intrauterine devices or systems) or moderately effective contraception (i.e. injectables, oral pills, patch, ring, or diaphragm).
- ▶ Please click [here](#) for a complete list of codes used to identify LARC (i.e. contraceptive implants, intrauterine devices or systems).

Note: Contraceptive surveillance codes (e.g. Z30.41) are included in the first rate for most or moderately effective contraceptive provision because this measure is intended to capture both new and existing contraceptive users. The second rate for LARC provision is designed to capture new LARC insertions, so contraceptive surveillance codes are not included in the second rate.

Exclusionary Criteria:

Women who did not have a live birth delivery (i.e. miscarriage, ectopic, still birth, or pregnancy termination) or who had a live birth delivery within the last two months of the measurement year are excluded from the CCP measure. Click [here](#) for a list of exclusionary codes.

Best Practices:

- ▶ Obstetricians should offer LARC contraception insertion prior to hospital discharge as well as during the postpartum office visit.
- ▶ The American College of Obstetricians and Gynecologists (ACOG) encourages clinics to ask women about pregnancy intendedness and encourages patients to develop a reproductive life plan or a set of personal goals about when to have children.
- ▶ Expand long-acting reversible contraception counseling and access.
- ▶ Educate patients about the different methods of contraception: most effective, moderately effective, and long-acting reversible method.

¹ Measures reported using the *administrative* data collection method report on the entire eligible population and use only administrative data sources (e.g. claims, encounter, lab, immunization registries) to evaluate if services were performed.