

Prenatal and Postpartum Care (NQF 1517)

Planned Parenthood of Southern New England (PPSNE) would like to thank the Quality Committee for the opportunity to comment on the merits of including the measure Prenatal and Postpartum Care (NCF 1517) in the core measure set.

PPSNE provides primary and preventive care, including essential reproductive health services, every year to over 70,000 men and women in our state at seventeen health centers statewide. Most of our patients are of childbearing age (18 – 39), and nearly 80% of our patients are below the 138% Federal Poverty Level. To better serve our patients, PPSNE actively tracks a variety of demographic trends and quality measures that relate to the services we provide and how they impact the health of the population we serve.

The measures we track already strongly align with the quality measures set forth by the Quality Council. For example, PPSNE routinely provides Body Mass Index (BMI) assessments, tobacco use and cessation screening, alcohol screenings, depression screenings, and thousands of cervical cancer, Chlamydia, and breast cancer screenings annually. We support these and other preventive and population health quality measures set forth by the Quality Council.

Maintaining health during and after pregnancy is an important way for women to prevent complications that can adversely affect their health and the health of their baby. Early prenatal care is essential to helping a woman monitor her pregnancy and control existing conditions like high blood pressure and diabetes. Healthy diet education, counseling, vitamin supplements, identification of maternal risk factors, and health promotion must occur in early pregnancy to have an optimal effect on the mother's and baby's health. Postpartum care assesses a woman's physical and mental well-being after delivery and provides breast-feeding support, nutrition counseling for mother and baby, and family planning guidance.

The merits of this measure as part of an ACO shared savings program model include:

- Cost savings realized through prenatal care given early and continually in the course of pregnancy to deter high risk pregnancies that result in very preterm, preterm, very low, and low birth weight babies.
 - These birth outcomes adversely affect women of color the most, with non-Hispanic Blacks experiencing highest rates of very preterm and preterm, and very low and low birth rate babies, followed by Hispanic women.
- Postpartum care detects health problems of the mother and/or baby at an early stage, encourages breastfeeding, and provides families with support for a good start. Postpartum care such as educational visits to a pediatrician is essential to improving maternal-infant parenting skills.
- Family planning guidance contributes to the health of both mother and baby by providing time for appropriate development. A woman's ability to use contraceptives and determine whether and when to have another child also enhances her education and employment chances. In turn,

this improves her income, family stability, mental health and happiness, and the well-being of her other children.

PPSNE appreciates consideration of this important measure to the Core Set of quality metrics. Including this measure will ensure the health and well-being of mother and child. It will also help to avoid complications associated with preterm and low birth weight babies, some of which may be lifelong developmental and physical disabilities requiring long term support services.