

# Prenatal and Postnatal Care

## STRATEGIC MEASURE PROFILE

### Why This Measure Matters

Healthy pregnancies are supported when comprehensive prenatal care begins early and continues through pregnancy, delivery, and the postpartum period. First-trimester prenatal care helps identify risks, connect patients with needed services, and improve maternal and infant outcomes. Patients who receive no prenatal care are nearly three times as likely to have a low-birthweight infant.

Patients who are uninsured or lack a regular source of care before pregnancy are more likely to enter prenatal care after the first trimester. Rural communities may also face transportation, workforce, and specialty-access barriers. Tobacco and alcohol use around pregnancy are more prevalent in rural Northern California than in other areas of the state, and depression affects an estimated 14–23% of pregnant patients and up to 25% of postpartum patients.

Improving timely prenatal and postpartum care strengthens continuity, supports early risk identification, and creates opportunities to address behavioral health, substance use, nutrition, family planning, and social needs.

### Measure Alignment

| MEASUREMENT SYSTEMS                   | CLINICAL PORTFOLIO | ALIGNMENT LEVEL |
|---------------------------------------|--------------------|-----------------|
| ✓ HEDIS    ✓ QIP<br>✓ UDS      ✓ PHMI | Maternal Health    | HIGH            |

Prenatal and Postnatal Care aligns maternal health priorities across multiple measurement systems. Coordinated improvement can support timely entry into care, continuity through the postpartum period, managed care performance, and broader maternal and infant health goals.

### Understanding the Improvement Strategy

| HEDIS & QIP                                                                                                                                                                                                                                                           | UDS                                                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| POPULATION HEALTH PERSPECTIVE                                                                                                                                                                                                                                         | CARE DELIVERY PERSPECTIVE                                                                                                                                                                                                                                                               |
| <b>Key question: Which pregnant or postpartum patients need timely outreach, enrollment support, or follow-up?</b>                                                                                                                                                    | <b>Key question: Are reliable workflows connecting patients to early prenatal care and a completed postpartum visit?</b>                                                                                                                                                                |
| <b>COMMON STRATEGIES</b> <ul style="list-style-type: none"> <li>• Pregnancy and postpartum registries</li> <li>• Early outreach and appointment reminders</li> <li>• Insurance and benefit enrollment support</li> <li>• Maternal health program referrals</li> </ul> | <b>COMMON STRATEGIES</b> <ul style="list-style-type: none"> <li>• Pregnancy testing and rapid scheduling</li> <li>• Screen for tobacco, alcohol, drugs, and depression</li> <li>• Schedule postpartum care before discharge</li> <li>• Coordinate maternal and infant visits</li> </ul> |

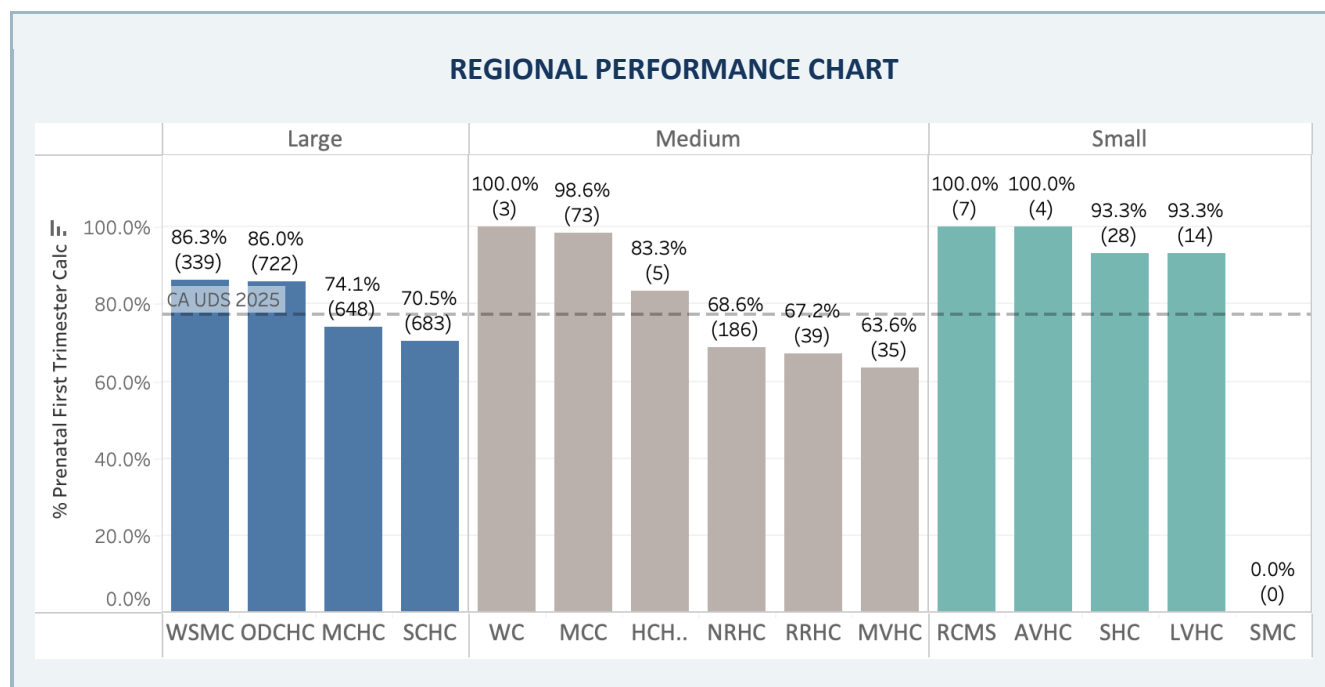
**Strategic takeaway:** Strong performance requires early identification, proactive outreach, rapid access to prenatal care, and reliable continuity through the postpartum period.

## Rural Northern California Performance

### Regional Insights

- Health centers often see pregnant patients as new patients, and some do not seek care until after the first trimester.
- Patients receiving primary maternity care from a midwife or another practitioner may use the health center for screenings or services not available through that provider.
- Many rural health centers serve relatively few prenatal patients; even one late entry can meaningfully affect reported performance.

### 2025 REGIONAL PERFORMANCE



### Performance Reflection

- How does our performance compare with regional peers?
- How quickly can a newly identified pregnant patient obtain a first prenatal appointment?
- Are referrals, outside prenatal care, and postpartum visits documented reliably?
- Should Prenatal and Postnatal Care be considered an enterprise quality improvement priority?

### Quality Measure Definition (UDS)

Percentage of prenatal care patients who entered treatment during their first trimester.

### National and State Quality Benchmarks

| BENCHMARK                    | REFERENCE VALUE / INTERPRETATION                                                                                               |
|------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| QIP partial-points threshold | 75th percentile nationally for Medicaid health plans, as reported by NCQA HEDIS in the year prior to the QIP measurement year. |
| California and U.S. UDS      | CA UDS 2025: 77.2%      US UDS 2025: 73.4%                                                                                     |

*Use this profile to connect measure alignment, regional performance, and improvement strategy during annual quality planning.*