

CAP PERFORMANCE MEASURES

Guidance Document

1. CAP PERFORMANCE MEASURES:

In order to support goals associated with increasing access to contraception, including Long Acting Contraceptive Methods (LARCs), health care providers must collect, report, monitor and review a set of data and information describing current practice and improvements in practice associated with changes made to health care delivery systems and processes.

The CAP project has five key performance measures, outlined in Table 1: Pregnancy Intentions Identification, Provision of Contraceptive Counseling, Contraceptive Coverage, LARC Coverage, and Same Day LARC Insertion. These measures are intended to support health care providers in examining the rate at which contraceptive methods are provided to their female clients ages 15-44. This will help health center teams to understand the impact their improvement work has on increasing access to contraception, including LARCs, in their health center.

Important clarifications:

1. Eligible clients include women ages 15-44 years who are not pregnant during the reporting period who made a clinic visit during the period. ICD-10 codes for identifying ineligible women start on page 5 of this document.
2. For each unduplicated client, count only the most current visit within each reporting period.
3. Data for performance measures 1-5 should be stratified by the following age at last visit categories: **15-17**, **18-29**, and **30-44**.
4. When segmenting data by age, use the age the patient was at their last visit during the reporting period. Do not include individuals whose birthday take place during a reporting period in two age categories.
5. All data can be pulled from fields within the EMR, billing and/or pharmacy databases.

Table 1: Performance Measures

Measure	Definition	Numerator/Denominator
1. Pregnancy Intentions Identification	# and % of UNDUPLICATED female clients ages 15-44 asked if they want to become pregnant or have a baby in the next year.	Numerator: # UNDUPLICATED female clients ages 15-44 years asked about their pregnancy intentions, or whether they want to become pregnant or have a baby in the next year. Denominator: # of UNDUPLICATED female clients ages 15-44 not currently pregnant.
2. Provision of Contraceptive Counseling	# and % of UNDUPLICATED female clients ages 15-44 provided with contraceptive counseling	Numerator: # UNDUPLICATED female clients ages 15-44 years who are provided contraceptive counseling. Denominator: # of UNDUPLICATED female clients ages 15-44 not currently pregnant.
3. Contraceptive¹ Coverage	a. # and % of UNDUPLICATED female clients ages 15-44 years using contraceptive method at beginning of visit ²	Numerator: # UNDUPLICATED female clients ages 15-44 years using contraceptive method at the <u>beginning</u> of visit. Denominator: # of UNDUPLICATED female clients ages 15-44 not currently pregnant.
	b. # and % of UNDUPLICATED female clients ages 15-44 years using contraceptive method at end of visit ³	Numerator: # UNDUPLICATED female clients ages 15-44 years using contraceptive method at the <u>end</u> of visit. Denominator: # of UNDUPLICATED female clients ages 15-44 not currently pregnant.
4. LARC Coverage	a. # and % of unduplicated female clients ages 15-44 years using a LARC method (IUD or implant) at beginning of visit ²	Numerator: # UNDUPLICATED female clients ages 15-44 years using LARC method (IUD or implant) at the <u>beginning</u> of visit. Denominator: # of UNDUPLICATED female clients ages 15-44 not currently pregnant.
	b. # and % of unduplicated female clients ages 15-44 years using a LARC method (IUD or implant) at end of visit ³	Numerator: # UNDUPLICATED female clients ages 15-44 years using LARC method (IUD or implant) at the <u>end</u> of visit. Denominator: # of UNDUPLICATED female clients ages 15-44 not currently pregnant.
5. Same Day LARC Insertion	# and % of unduplicated female clients ages 15-44 years who had LARC device provided the same day as selected	Numerator: # of UNDUPLICATED female clients ages 15-44 who had a LARC device (IUD or implant) inserted on the SAME DAY as the method was selected by the client. Denominator: # of UNDUPLICATED female clients ages 15-44 not currently pregnant.

¹ Contraceptive Method includes hormonal IUD, non-hormonal IUD, hormonal implant, hormonal shot, hormonal ring, hormonal patch & oral contraceptive

² Contraceptive Use at beginning of visit is defined as patient reporting contraceptive use at the beginning of the visit

³ Contraceptive Use at end of visit is defined as patient leaving with a method provided/inserted, with a prescription for a method, or continuing with current method

2. STRATIFICATION

Data for performance measures 1-5 should be stratified by the following age at last visit categories:

- 15-17
- 18-29
- 30-44

3. GUIDANCE ON HOW TO EXTRACT AND REPORT ON THE PROVISION OF HORMONAL CONTRACEPTION AND IUDS

Data for performance measures 3 and 4 will need to be obtained from your health centers databases. Depending on how your systems work, the data may come from your billing data, electronic medical record and/or pharmacy data. Below is more guidance to help you think though how to extract data necessary to report on these measures.

Considerations for pulling data on provision of hormonal contraception and IUDs:

We realize that you are the expert at knowing both how data is collected in your health center and how to extract that data. However, in our experience, for some health systems extracting such data can be a challenging task. We therefore suggest that before you begin pulling the data, that a data analyst speak with staff who are intimately acquainted with how contraceptive services are documented. This would likely include discussions with clinical staff and billing staff, and maybe the practice manager.

Some of the questions that could be asked during such a conversation could include:

- 1) What are the standard codes used when initiating the following contraceptive services?:
 - ✓ Oral contraceptives (pill)
 - ✓ Hormonal patch
 - ✓ Hormonal ring
 - ✓ Hormonal shot (Depo-Provera)
 - ✓ IUDs (ParaGard, Mirena, and/or Skyla)
 - ✓ Hormonal Implant (Nexplanon)



- 2) What are the standard codes used when providing on-going monitoring of (e.g. string check, refills, side effect management, routine depo-Provera shot) for the following forms of contraceptives?:
 - ✓ Oral contraceptives (pill)
 - ✓ Hormonal patch
 - ✓ Hormonal ring
 - ✓ Hormonal shot (Depo-Provera)
 - ✓ IUDs (ParaGard, Mirena, and/or Skyla)
 - ✓ Hormonal Implant (Nexplanon)

- 3) Do the coding practices related to the provision of such services differ by provider? If so, how?

Once have had a conversation such as described above, you may want to pull some data and see if it reflects how the practice setting staff believe they are providing contraceptive services.

Tables 2 – 4 have billing codes that may assist you in pulling the performance data. These are billing codes for the provision and monitoring of hormonal contraception and IUDs (and include both diagnosis and supply codes).

Table 2: HCPCS-Level II Supply Codes for Hormonal Contraception and IUDs

ICD-10 Code	ICD-10 Description
J1050	Medroxyprogesterone acetate, 1 mg (Depo-Provera) (report 150 units)
J7296	Levonorgestrel-releasing IUD, (Kyleena), 19.5 mg
J7297	Levonorgestrel-releasing IUD (Liletta), 52 mg
J7298	Levonorgestrel-releasing IUD (Mirena), 52 mg
J7300	Intrauterine copper contraceptive (ParaGard IUD)
J7301	Levonorgestrel-releasing IUD (Skyla) 13.5mg
J7303	Hormone containing vaginal ring, each (NuvaRing)
J7304	Hormone containing patch, each (Evra-Ortho patch or Xulane patch), per 1 unit/patch)
J7307	Etonogestrel implant system, including implant and supplies (Nexplanon)
S4993	Oral Contraceptives

Table 3: Diagnosis/Encounter Codes for Hormonal Contraceptive Management

ICD-10 Code	ICD-10 Description
Z30.011	Encounter for initial subscription for contraceptive pills
Z30.013	Encounter for initial subscription for injectable contraceptive (Depo Provera)
Z30.015	Encounter for initial subscription for vaginal ring
Z30.016	Encounter for initial subscription for hormone patch
Z30.017	Encounter for initial prescription of implant (Nexplanon)
Z30.46	Encounter for checking, removal or reinsertion of implant (Nexplanon)
Z30.014	Encounter for initial prescription of IUD (Note: not the insertion)
Z30.430	Encounter for insertion of IUD
Z30.433	Encounter for removal and reinsertion of IUD
Z30.019*	Encounter for initial prescription of contraceptives, unspecified
Z30.9*	Encounter for contraceptive management, unspecified
Z30.09*	Encounter for other general counseling and advice on contraception (i.e. General family planning advice before a LARC insertion)

Table 4: Diagnosis/Encounter Codes for Surveillance of Previously Prescribed Contraceptive Methods

ICD-10 Code	ICD-10 Description
Z30.40*	Encounter for surveillance of contraceptives, unspecified
Z30.41	Encounter for surveillance of contraceptive pills
Z30.42	Encounter for surveillance of injectable contraception (Depo-Provera)
Z30.44	Encounter for surveillance of vaginal ring
Z30.45	Encounter for surveillance of hormone patch
Z30.431	Encounter for routine checking of IUD
Z30.46	Encounter for routine checking, removal or reinsertion of implant (Nexplanon)

Note: Codes with an asterisk() are unspecified and cannot be used to track management of a specific type of contraceptive and should not be commonly used. Code the most specific codes available for each method.*

Table 5: Diagnosis/Encounter Codes for Removal of Previously Inserted IUDs or Contraceptive Implant (without reinsertion).

NOTE: these codes are not needed when pulling performance measure data on contraceptive provision and on-going contraceptive surveillance/management.

ICD-10 Code	ICD-10 Description
Z30.432	Encounter for removal of IUD
Z30.46	Encounter for checking, removal or reinsertion of implant (Nexplanon)

CODES FOR EXCLUSION CRITERIA

NOTE: Tables 6 and 7 below list diagnosis codes typically used to document pregnancy or preconception care (other codes not included here may apply). Depending on your contraception-related performance measure, you may wish to exclude reporting on clients who are pregnant or seeking pregnancy.

Table 6: Diagnosis Codes that Indicate Pregnancy:

ICD-10 Code	ICD-10 Description
(Note: - indicates additional 5 th digit required to specify trimester)	
Z34.0-	Encounter for supervision of normal first pregnancy (Note: 5 th digit required to specify trimester)
Z34.8-	Encounter for supervision of other normal pregnancy (Note: 5 th digit required to specify trimester)
Z34.9-	Encounter for supervision of normal pregnancy, unspecified (Note: 5 th digit required to specify trimester)
Z33.1	Pregnant state, incidental
Codes for the Supervision of High Risk Pregnancy*	
(Note: - indicates additional 5 th or 6 th digit required to specify trimester)	
O09.0-	Supervision of pregnancy with history of infertility...
O09.1-	Supervision of pregnancy with history of ectopic pregnancy ...
O09.A-	Supervision of pregnancy with history of molar pregnancy ...
O09.29-	Supervision of pregnancy with other poor reproductive or obstetric history...
O09.3-	Supervision of pregnancy with insufficient antenatal care...
O09.4-	Supervision of pregnancy with grand multiparity...
O09.7-	Supervision of high risk pregnancy due to social problems...
O09.9-	-Supervision of high risk pregnancy, unspecified, ...
<i>*Note: O09- codes require an additional code from category Z3A, Weeks of gestation, to identify the specific week of the pregnancy, if known.</i>	

Table 7: Diagnosis Codes that Document Preconception Related Care

ICD-10 Code	ICD-10 Description
Z31.61	Procreative counseling and advice using natural family planning
Z31.62	Encounter for fertility preservation counseling
Z31.69	Encounter for other general counseling and advice on procreation
Z31.83	Encounter for assisted reproductive fertility procedure cycle
Z31.84	Encounter for fertility preservation procedure
Z31.89	Encounter for other procreative management
Z31.9	Encounter for procreative management, unspecified