MEASURE CCP: CONTRACEPTIVE CARE – POSTPARTUM WOMEN AGES 15–44

U.S. Office of Population Affairs

A. DESCRIPTION

Among women ages 15 through 44 who had a live birth, the percentage that:

- 1. Were provided most effective or moderately effective FDA-approved methods of contraception within 3 and 60 days of delivery.
- 2. Were provided a long-acting reversible method of contraception (LARC) within 3 and 60 days of delivery.

The first rate is an intermediate outcome measure, and it is desirable to have a high percentage of women who are provided the most effective or moderately effective contraceptive methods. The second rate is an access measure, and the focus is on making sure that women have access to LARC methods.

These rates are reported at two points in time: contraceptive use within 3 days of delivery is used to monitor the provision of contraception in the immediate postpartum period, while contraceptive use within 60 days of delivery is used to monitor the provision of contraception throughout the postpartum period. (A 60-day period is used because the American Congress of Obstetricians and Gynecologists [ACOG] recommends a postpartum visit at 6 weeks, and two additional weeks are allowed for women whose postpartum care visit is delayed.)

Data Collection Method: Administrative

Guidance for Reporting:

The Contraceptive Care – Postpartum Women measure applies to women ages 15-44. The measure is stratified into two age groups: (1) 15–20 and (2) 21–44 for 3 days and 60 days postpartum. In total, four rates will be reported:

- Ages 15-20: Most or moderately effective contraception 3 days
- Ages 15-20: Most or moderately effective contraception 60 days
- Ages 15-20: LARC 3 days
- Ages 15-20: LARC 60 days
- Ages 21-44: Most or moderately effective contraception 3 days
- Ages 21-44: Most or moderately effective contraception 60 days
- Ages 21-44: LARC 3 days
- Ages 21-44: LARC 60 days
- The measurement year is calendar year 2016. There is no lookback period for this measure.
- For more information on interpreting performance results on this measure, see Section E, "Additional Notes."

The following coding systems are used in this measure: CPT, HCPCS, ICD-10, and NDC. Refer to the Acknowledgments section at the beginning of the manual for copyright information.

B. DEFINITIONS

Provision of a most effective method of contraception	Provision of female sterilization, contraceptive implants, or intrauterine devices or systems (IUD/IUS).
Provision of a moderately effective method of contraception	Provision of injectables, oral pills, patch, ring, or diaphragm.
Provision of a long-acting reversible method of contraception (LARC)	Provision of contraceptive implants, intrauterine devices or systems (IUD/IUS).
Measurement year	Calendar year 2016.

C. ELIGIBLE POPULATION

Age	Women ages 15 through 44 years as of December 31 of the measurement year who had a live birth.
Continuous enrollment	Within the measurement year, women enrolled from the date of delivery to 60 days postpartum.
Allowable gap	No allowable gap during the continuous enrollment period.
Anchor date	Date of delivery.
Benefit	Medical or Family Planning Only Services.
Event/diagnosis	Provision of contraception.

D. ADMINISTRATIVE SPECIFICATION

Denominator

The eligible population includes women ages 15 through 44 years who had a live birth in the measurement year.

Women will be excluded from the denominator if they did not have an opportunity to receive contraception in the postpartum period (defined as within 60 days of delivery). Follow the steps below to identify the eligible population:

Step 1

Identify live births and deliveries by using codes in Table CCP-A.¹

Step 2

Exclude deliveries that did not end in a live birth (i.e., miscarriage, ectopic, stillbirth, or pregnancy termination) by using the codes in Table CCP-B.

Step 3

¹ Some women may have more than one delivery in the measurement year; the measure is designed to identify unique live births (defined as those that occur <u>></u>180 days apart) rather than women who had a live birth.

Exclude deliveries that occurred during the last 2 months of the measurement year. These deliveries should be excluded from the denominator because there may not have been an opportunity to provide the woman with contraception during the postpartum period. ACOG recommends having a postpartum visit by 6 weeks.

Table CCP-A. Codes to Identify a Live Birth or Delivery

ICD-10-PCS Procedure Codes

10D00Z0, 10D00Z1, 10D00Z2, 10D07Z3, 10D07Z4, 10D07Z5, 10D07Z6, 10D07Z7, 10D07Z8, 10E0XZZ

CPT

59400, 59409, 59410, 59510, 59514, 59515, 59610, 59612, 59614, 59618, 59620, 59622

Table CCP-B. Codes Indicating a Known Miscarriage, Ectopic Pregnancy, Stillbirth, or Induced Abortion

ICD-10-CM Diagnosis Codes

O00-O08, O36.4x, Z33.2, Z37.1, Z37.4, Z37.7

CPT

59812, 59820, 59821, 59830, 59120, 59121, 59130, 59135, 59136, 59140, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857

Numerator for Rate 1

The eligible population that was provided a most or moderately effective method of contraception.

Step 4

Define the numerator by identifying women who were provided a most (sterilization, IUD, implant) or moderately (injection, oral pills, patch, ring, or diaphragm) effective method of contraception in the measurement year. To do this, use the codes in Table CCP-C.

Step 5

Adjust for LARC removals and re-insertions. The LARC methods can be removed at the woman's request so adjustments must be made to reflect this. Use the codes in Table CCP-D to identify women who had their IUD or implant removed at any point during the measurement year. Check to see if they had an IUD or implant inserted or reinserted on the same or a subsequent date using the codes in Table CCP-E. If there is no code indicating reinsertion, use the codes in Table CCP-C minus the Intrauterine Device (IUD/IUS) and Hormonal Implant codes to determine whether a woman was provided another most or moderately effective method in the 30 days prior to the removal (since a woman may receive a prescription for another method prior to the removal). Additionally, use all the codes in Table CCP-C to look for a subsequent most or moderately effective method in the period after the LARC removal until the end of the measurement year. If there is no code for reinsertion or provision of another most or moderately effective method, consider them as a non-user.

Step 6

Determine the date that the contraceptive method was provided to identify: (a) women that received contraception in the immediate postpartum period of 3 days after delivery; and (b) women that were provided contraception within 60 days of delivery. The second category will also include women who were provided contraception in the first 3 days postpartum.

Numerator for Rate 2

The eligible population that were provided a LARC method.

Step 4

Define the numerator by identifying women who were provided a LARC in the measurement year. To do this, use the codes in Table CCP-E.

Step 5

Adjust for LARC removals and re-insertions. The LARC methods can be removed at the woman's request so adjustments must be made to reflect this. Use the codes in Table CCP-D to identify women who had their IUD or implant removed at any point during the measurement year. Check to see if they had an IUD or implant inserted or reinserted on the same or a subsequent date through the end of the measurement year using Table CCP-D. If there is no code for reinsertion or provision of another most or moderately effective method, consider them as a non-user of LARC.

Step 6

Determine the date that the LARC method was provided to identify: (a) women that were provided LARC in the immediate postpartum period of 3 days after delivery; and (b) women that were provided LARC within 60 days of delivery. The second category will also include women who were provided LARC in the first 3 days postpartum.

Table CCP-C. Codes Used to Identify Provision of Most or Moderately Effective Contraceptive Methods

Description	Codes
Female	ICD-10-CM Diagnosis Codes
Sterilization	0U574ZZ, Destruction of Bilateral Fallopian Tubes, Percutaneous Endoscopic Approach
	0U578ZZ, Destruction of Bilateral Fallopian Tubes, Via Natural or Artificial Opening Endoscopic
	0UL74CZ, Occlusion of Bilateral Fallopian Tubes with Extraluminal Device, Percutaneous Endoscopic Approach
	0UL74DZ, Occlusion of Bilateral Fallopian Tubes with Intraluminal Device, Percutaneous Endoscopic Approach
	0UL74ZZ, Occlusion of Bilateral Fallopian Tubes, Percutaneous Endoscopic Approach
	0UL78DZ, Occlusion of Bilateral Fallopian Tubes with Intraluminal Device, Via Natural or Artificial Opening Endoscopic
	0UL78ZZ, Occlusion of Bilateral Fallopian Tubes, Via Natural or Artificial Opening Endoscopic
	Z30.2, Encounter for Sterilization
	Z98.51, Tubal Ligation Status
	CPT
	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 (e.g., 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 (e.g., band, clip, or Falope ring)
	58565, Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants
	<u>HCPCS</u>
	A4264, Permanent implantable contraceptive intratubal occlusion device and delivery system

Description	Codos
Description	Codes
Intrauterine Device (IUD/IUS)	ICD-10-CM Diagnosis Codes Z30.014, Encounter for initial prescription of intrauterine contraceptive device Z30.430, Encounter for insertion of intrauterine contraceptive device Z30.433, Encounter for removal and reinsertion of intrauterine contraceptive device Z30.431, Encounter for routine checking of intrauterine contraceptive device Z97.5, Presence of (intrauterine) contraceptive device T83.31XA, Breakdown (mechanical) of intrauterine contraceptive device, initial encounter T83.31XD, Breakdown (mechanical) of intrauterine contraceptive device, subsequent encounter T83.31XS, Breakdown (mechanical) of intrauterine contraceptive device, sequel T83.32XA, Displacement of intrauterine contraceptive device, subsequent encounter T83.32XD, Displacement of intrauterine contraceptive device, sequela T83.39XA, Other mechanical complication of intrauterine contraceptive device, initial encounter T83.39XD Other mechanical complication of intrauterine contraceptive device, subsequent encounter
	T83.39XS, Other mechanical complication of intrauterine contraceptive device, sequel ICD-10 Procedure Codes OUH97HZ, Insertion of Contraceptive Device into Uterus, Via Natural or Artificial Opening OUH98HZ, Insertion of Contraceptive Device into Uterus, Via Natural or Artificial Opening Endoscopic OUHC7HZ, Insertion of Contraceptive Device into Cervix, Via Natural or Artificial Opening OUHC8HZ, Insertion of Contraceptive Device into Cervix, Via Natural or Artificial Opening Endoscopic CPT 58300, Insertion of IUD
	HCPCS J7297, Levonorgestrel-releasing intrauterine contraceptive system, 52 mg, 3 year duration J7298, Levonorgestrel-releasing intrauterine contraceptive system, 52 mg, 5 year duration 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 NDC 00023585801, 50419042101, 50419042201, 50419042208, 50419042271, 50419042301, 50419042308, 50419042401, 50419042408, 50419042471, 51285020401, 51285020402, 52544003554

Description	Codes
Hormonal Implant	ICD-10-CM Diagnosis Codes Z30.017, Encounter for initial prescription of implantable subdermal contraceptive Z30.46, Encounter for surveillance of implantable subdermal contraceptive
	CPT 11981, Insertion, non- biodegradable drug delivery implant, Implanon or Nexplanon 11983, Removal with reinsertion, non- biodegradable drug delivery implant, Implanon or Nexplanon
	HCPCS J7306, Levonorgestrel (contraceptive) implant system, including implants and supplies J7307,Etonogestrel [contraceptive] implant system, including implant and supplies
	NDC 00052027201, 00052027401, 00052027480, 00052433001
Injectable (1- month/ 3- month)	HCPCS J1050, Injection, medroxyprogesterone acetate
	NDC 00009062601, 00009074630, 00009074635, 00009470901, 00009470913, 00009737604, 00009737607, 00009737611, 00247210801, 00703680101, 00703680104, 00703681121, 23490585401, 52125064001, 52125064001, 54569370100, 54569490400, 54569552700, 54569561600, 54569621900, 54868334801, 54868361300, 54868410000, 54868410001, 54868525700, 55045350501, 59762453701, 59762453702, 59762453801, 59762453802, 59762453809, 68788923301

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Oral
Contraceptive
Pills
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ICD-10-CM Diagnosis Codes

Z30.011, Encounter for initial prescription of contraceptive pills

Z30.41, Encounter for surveillance of contraceptive pills

HCPCS

S4993, Contraceptive pills for birth control

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NDC
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Oral Contraceptive Pills (continued)

NDC

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Patch	ICD-10-CM Diagnosis Codes Z30.016, Encounter for initial prescription of transdermal patch hormonal contraceptive device Z30.45, Encounter for surveillance of transdermal patch hormonal contraceptive device HCPCS
	J7304, Contraceptive supply, hormone containing patch, each NDC 00062192001, 00062192015, 00062192024, 50458019201, 50458019215, 50458019224, 54569541300, 54868467000, 00378334053
Vaginal Ring	ICD-10-CM Diagnosis Codes Z30.015, Encounter for initial prescription of vaginal ring hormonal contraceptive Z30.44, Encounter for surveillance of vaginal ring hormonal contraceptive device
	HCPCS J7303, Contraceptive supply, hormone containing vaginal ring, each NDC 00052027301, 00052027303, 00052027385, 54569586500, 54868483201, 55887075401,
Diaphragm	76413013103 CPT 57170, Diaphragm or cervical cap fitting with instructions
	HCPCS A4261, Cervical cap for contraceptive device A4266, Diaphragm for contraceptive use NDC 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,
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Table CCP-D. Codes Used to Identify Removal/Discontinued Use of LARC

Description	Codes
Discontinue Intrauterine	ICD-10-CM Diagnosis Codes
device (IUD)	Z30.432, Encounter for removal of intrauterine contraceptive device
	ICD-10 Procedure Codes
	0UPD7HZ, Removal of Contraceptive Device from Uterus and Cervix, Via Natural or Artificial Opening
	0UPD8HZ, Removal of Contraceptive Device from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic
	<u>CPT</u>
	58301, Encounter for removal of intrauterine contraceptive device
Discontinue Implant	CPT 11976, Removal, non-biodegradable drug delivery implant, Norplant 11982, Removal, non-biodegradable drug delivery implant, Implanon or Nexplanon

Table CCP-E. Codes Used to Identify Use of a Long-Acting Reversible Contraceptive Method (LARC)

Description	Codes
Intrauterine	ICD-10-CM Diagnosis Codes
Device (IUD/IUS)	Z30.014, Encounter for initial prescription of intrauterine contraceptive device
	Z30.430, Encounter for insertion of intrauterine contraceptive device
	Z30.433, Encounter for removal and reinsertion of intrauterine contraceptive device
	Z30.431, Encounter for routine checking of intrauterine contraceptive device
	Z97.5, Presence of (intrauterine) contraceptive device
	T83.31XA, Breakdown (mechanical) of intrauterine contraceptive device, initial encounter
	T83.31XD, Breakdown (mechanical) of intrauterine contraceptive device, subsequent encounter
	T83.31XS, Breakdown (mechanical) of intrauterine contraceptive device, sequel
	T83.31XA, Displacement of intrauterine contraceptive device, initial encounter
	T83.32XD, Displacement of intrauterine contraceptive device, subsequent encounter
	T83.32XS, Displacement of intrauterine contraceptive device, sequela T83.39XA, Other mechanical complication of intrauterine contraceptive device, initial
	encounter
	T83.39XD Other mechanical complication of intrauterine contraceptive device,
	subsequent encounter T83.39XS, Other mechanical complication of intrauterine contraceptive device, sequel
	ICD-10 Procedure Codes
	0UH97HZ, Insertion of Contraceptive Device into Uterus, Via Natural or Artificial Opening
	0UH98HZ, Insertion of Contraceptive Device into Uterus, Via Natural or Artificial Opening
	0UHC7HZ, Insertion of Contraceptive Device into Cervix, Via Natural or Artificial Opening
	0UHC8HZ, Insertion of Contraceptive Device into Cervix, Via Natural or Artificial Opening Endoscopic CPT
	58300, Insertion of IUD
	HCPCS
	J7297, Levonorgestrel-releasing intrauterine contraceptive system, 52 mg, 3 year
	duration J7298, Levonorgestrel-releasing intrauterine contraceptive system, 52 mg, 5 year duration
	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
	NDC
	00023585801, 50419042101, 50419042201, 50419042208, 50419042271, 50419042301, 50419042308, 50419042401, 50419042408, 50419042471, 51285020401, 51285020402, 52544003554

Description	Codes
Hormonal Implant	ICD-10-CM Diagnosis Codes Z30.017, Encounter for initial prescription of implantable subdermal contraceptive Z30.46, Encounter of surveillance of implantable subdermal contraceptive
	CPT 11981 Insertion, non- biodegradable drug delivery implant, Implanon or Nexplanon 11983, Removal with reinsertion, non- biodegradable drug delivery implant, Implanon or Nexplanon
	HCPCS J7306, Levonorgestrel (contraceptive) implant system, including implants and supplies J7307, Etonogestrel [contraceptive] implant system, including implant and supplies
	NDC 00052027201, 00052027401, 00052027480, 00052433001

E. ADDITIONAL NOTES

The Lactational Amenorrhea Method (LAM) is a highly effective, temporary method of contraception that can be used in the postpartum period. If the infant is being fed only its mother's breast milk, and the woman has not experienced her first postpartum menses, then LAM provides 98% protection from pregnancy in the first 6 months postpartum.²

Despite the protection from LAM, many health care providers will want to provide contraceptive services to women at the postpartum visit because the effectiveness of breastfeeding for pregnancy prevention drops quickly when women stop exclusive breastfeeding. It may be difficult for many clients to receive contraceptive services at that time.

Healthy People and the World Health Organization recommend an inter-pregnancy interval of at least 18 months; therefore all postpartum women can be considered at risk of unintended pregnancy for that period of time.

² Trussell J. Contraceptive Efficacy. In Hatcher RA, Trussell J, Nelson AL, Cates W, Kowal D, Policar M. Contraceptive Technology: Twentieth Revised Edition. New York NY: Ardent Media, 2011.