Referral for Care:

- **Tobacco Use:** Assess all pregnant women about their past and present use of tobacco and exposure to second hand smoke. The patient who smokes should be strongly advised to stop smoking and be provided with tailored counseling to assist in smoking cessation. Patients who smoke should be offered a referral to an appropriate smoking cessation education and/or treatment program.

- **Substance Use:** A woman who acknowledges the use of any substances should be counseled about the implication of use during pregnancy, and strongly encouraged to refrain from use of any substances that may negatively affect the fetus. If appropriate, the woman should be offered a referral to a treatment program.

- **Depression:** Prenatal care providers should screen pregnant and postpartum women for depression utilizing an appropriate screening tool, and should have a system in place to ensure that positive screening results are followed by accurate diagnosis, implementation of treatment, and follow-up either within the practice or through referral.

Benefits and Support:

- **Fidelis Care** covers the weekly intramuscular injection of 17-P (J1725) without prior authorization for use in pregnant women with a history of pre-term delivery before 37 weeks gestation, and no symptoms of pre-term labor in the current pregnancy.

- Continue recommending to patients the use of 17-alpha hydroxyprogesterone beginning between 16-24 weeks gestation.

- Fidelis Care’s BabyCare program can help members adhere to 17P. For example, we can arrange for home care agencies to administer 17P to pregnant members in the community.

- For Fidelis Care’s BabyCare case management program, please call 1-800-247-1441.

If you have any questions, please call the Provider Call Center at 1-888-FIDELIS (1-888-343-3547).

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**Progesterone Treatment (17P) and Preventing Preterm Birth**

If you have any questions, please call the Provider Call Center at 1-888-FIDELIS (1-888-343-3547).

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**Fidelis Care**

Fidelis Care complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

**ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-343-3547 (TTY: 1-800-421-1220). 注意：如果您使用繁體中文，您可以免費獲得語言輔助服務。請致電1-888-343-3547 (TTY: 1-800-421-1220)。

**Prescribing 17P**

Risk Assessments

Standardized Tools

Diagnostic Codes

Guidelines for Counseling Members

Benefits and Support
Risk Assessments:
Conduct all risk assessment screenings (depression, tobacco use and drug/alcohol use) by the first two prenatal visits.

17-alpha hydroxyprogesterone and Risk Assessment Reference Guide:

<table>
<thead>
<tr>
<th>Code Type</th>
<th>Anticipated Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-alpha hydroxyprogesterone</td>
<td>HCPCS J1725</td>
</tr>
<tr>
<td>Depression Screening</td>
<td>ICD10 Z 13.89</td>
</tr>
<tr>
<td>Tobacco Smoking Screening</td>
<td>CPT 99407 (10mins); 99409 (&gt;10mins)</td>
</tr>
<tr>
<td>Drug Abuse Screening</td>
<td>CPT 99407 (15-30mins); 99409 (&gt;30mins)</td>
</tr>
<tr>
<td>Alcohol Abuse Screening</td>
<td>CPT 99407 (15-30mins); 99409 (&gt;30mins)</td>
</tr>
</tbody>
</table>

Risk Assessment should be:
- Reviewed at each visit.
- Repeated formally early in third trimester.
- Used to form the basis for the development of the care plan.
- Documented early in the medical record.

Standardized Tools & Resources:
- Depression: A number of validated screening tools are available, including both provider and patient-administered instruments.
- Edinburgh Postpartum Depression Scale (EPDS), PHQ-2 as an initial screening test, followed by the PHQ-9 to confirm a diagnosis for women who screen positive on the PHQ-2.
- Patients in NYC and the rest of New York State can also call 1-866-NYQUITS (1-866-697-8487).
- Substance Abuse/Alcohol: Assess member by using standardized questionnaire.

Development of a Care Plan:
Prenatal care providers should develop a care plan jointly with each pregnant woman which addresses the problems identified as a result of the initial and ongoing risk assessments. The care plan shall describe the implementation and coordination of all services required by the pregnant woman, be routinely updated and implemented jointly by the pregnant woman, her family and the appropriate members of the health care team.

Protocol for 17P Use:
- History of a previous singleton spontaneous preterm birth (20-36 weeks).
- Current singleton pregnancy.
- Initiate singleton pregnancy.
- Receive 17P injections weekly until 36 weeks gestation or delivery.
- *Note: Women who delivered multiple infants preterm and/or who are pregnant with multiples are not eligible for treatment.

Prescribing 17P:
- Physicians, nurse practitioners, licensed midwives and Article 28 clinics should use the newly established HCPCS procedure code, J1725, when billing for compounded 17P.
- Patients should not be given a prescription to obtain these drugs from a pharmacy. Doing so will result in a pharmacy claim denial and may cause an unnecessary delay in treatment.
- Fidelis Care can also arrange to ship 17P to a doctor’s office if doctors do not wish to “buy and bill” for the medication. Please call CVS specialty pharmacy at 1-800-238-7828 to arrange for a drop shipment to your office.

If you have any questions, please call the Provider Call Center at 1-888-FiDELIS (1-888-343-3547).