Measure #335: Maternity Care: Elective Delivery or Early Induction Without Medical Indication at ≥ 37 and < 39 Weeks (Overuse) – National Quality Strategy Domain: Patient Safety

2017 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Outcome

DESCRIPTION:
Percentage of patients, regardless of age, who gave birth during a 12-month period who delivered a live singleton at ≥ 37 and < 39 weeks of gestation completed who had elective deliveries or early inductions without medical indication

INSTRUCTIONS:
This measure is to be reported each time a procedure is performed for patients undergoing delivery or induction at 37 or 38 weeks gestation during the performance period. This measure may be reported by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Reporting:
The listed denominator criteria is used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions allowed by the measure. The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
All patients, regardless of age, who gave birth during a 12-month period delivering a live singleton at ≥ 37 and < 39 weeks of gestation completed without medical indication for induction

Denominator Criteria (Eligible Cases):
All patients, regardless of age
AND
Live Singleton (ICD-10-CM): Z37.0
AND
Patient procedure during **performance period** (CPT): 59400, 59409, 59410, 59510, 59514, 59515, 59610, 59612, 59614, 59618, 59620, 59622
AND
Delivery between ≥ 37 and < 39 weeks gestation

NUMERATOR:
Patients who had elective deliveries or early inductions

Numerator Options:

Performance Met:	Early elective delivery or early elective induction not performed (≥ 37 and < 39 weeks gestation) (G9355)
OR	
Denominator Exception:	Medical indication for induction [Documentation of reason(s) for elective delivery (C-section) or early induction (e.g., hemorrhage and placental complications, hypertension, preeclampsia and eclampsia, rupture of membranes- premature or prolonged, maternal conditions complicating pregnancy/delivery, fetal conditions complicating pregnancy/delivery,, late

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pregnancy, prior uterine surgery, or participation in clinical trial)] (G9361)

OR

Performance Not Met: Early elective delivery or early elective induction performed (≥ 37 and < 39 weeks gestation) (G9356)

RATIONALE:

Elective delivery or early induction often leads to prematurity, increased costs, and an increased incidence of cesarean section. Studies have determined that elective delivery or elective cesarean section prior to the gestational age of 39 weeks may result in significant short term neonatal morbidity (neonatal intensive care unit admission rates of 13-21%). Among women undergoing induction, women with their first pregnancies have a higher rate of cesarean delivery than women with prior vaginal births. Recent research shows that infants born prior to 39 weeks face a higher risk of breathing disorders and other problems than those who remain in the womb longer.

CLINICAL RECOMMENDATION STATEMENTS:

The following evidence statements are quoted verbatim from the referenced clinical guidelines: ACOG induction of labor guidelines (ACOG, 2009)

The goal of induction of labor is to achieve vaginal delivery by stimulating uterine contractions before the spontaneous onset of labor. Generally, induction of labor has merit as a therapeutic option when the benefits of expeditious delivery outweigh the risks of continuing the pregnancy. The benefits of labor induction must be weighed against the potential maternal and fetal risks associated with this procedure.

"Labor may also be induced for logistic reasons, eg, rapid labor, distance, or psychosocial reasons. In such circumstances, at least 1 of the criteria (for being > 39 weeks) should be met or fetal lung maturity should be established".

Indications for induction of labor are not absolute but should take into account maternal and fetal conditions, gestational age, cervical status, and other factors. Following are examples of maternal or fetal conditions that may be indications for induction of labor:

- Placental abruption
- Chorioamnionitis
- Fetal demise
- Gestational hypertension
- Preeclampsia, eclampsia
- Premature rupture of membranes
- Post-term pregnancy
- Maternal medical conditions (eg, diabetes mellitus, renal disease, chronic pulmonary disease, chronic hypertension, antiphospholipid syndrome)
- Fetal compromise (eg, severe fetal growth restriction, isoimmunization, oligohydramnios)

The individual patient and clinical situation should be considered when determining whether an induction of labor or waiting to perform a C-section at 39 weeks is contraindicated. Generally, some of the contraindications to labor induction are the same as those for spontaneous labor and vaginal delivery. They include, but are not limited to, the following situations:

- Vasa previa or complete placenta previa
- Transverse fetal lie
- Umbilical cord prolapse
- Previous classical cesarean delivery
- Active genital herpes infection
- Previous myomectomy entering the endometrial cavity

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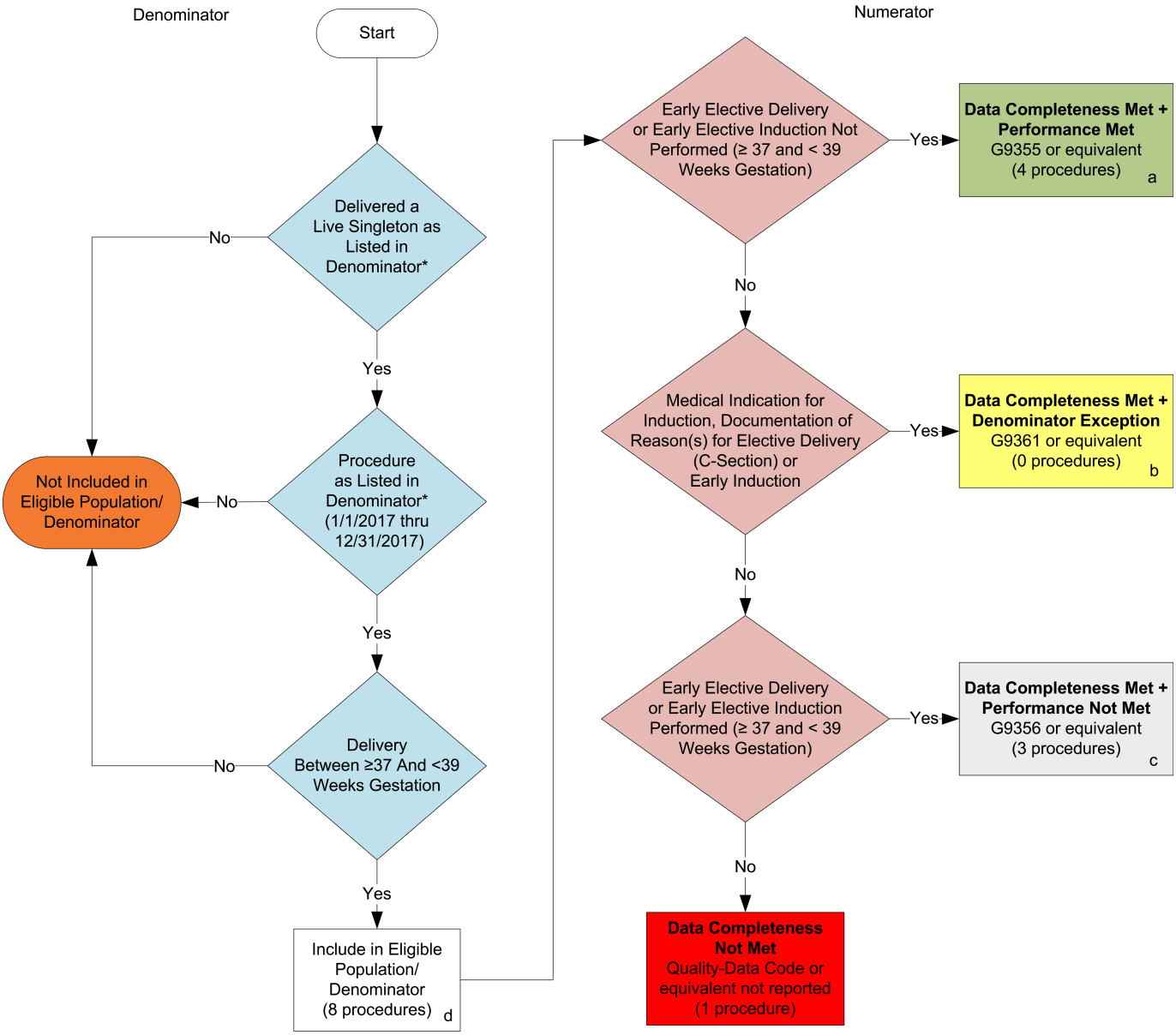
2017 Registry Individual Measure Flow
#335: Maternity Care: Elective Delivery or Early Induction Without Medical Indication at ≥ 37 and < 39 Weeks (Overuse)



SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a=4 procedures) + Denominator Exception (b=0 procedures) + Performance Not Met (c=3 procedures) = 7 procedures = **87.50%**

Eligible Population / Denominator (d=8 procedures) = 8 procedures

Performance Rate=

Performance Met (a=4 procedures) = 4 procedures = **57.14%**

Data Completeness Numerator (7 procedures) – Denominator Exception (b=0 procedures) = 7 procedures

*See the posted Measure Specification for specific coding and instructions to report this measure.
NOTE: Reporting Frequency: Procedure

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2017 Registry Individual Measure Flow

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Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator
2. Check Delivered A Live Singleton:
    a. If Delivered Live Singleton as Listed in the Denominator equals No, do not include in Eligible Population.
    b. If Delivered Live Singleton as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
3. Check Encounter Performed:
    a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
    b. If Encounter as Listed in the Denominator equals Yes, proceed to check Delivery Between ≥37 Weeks and <39 Weeks Gestation.
4. Check Delivery Between ≥37 Weeks and <39 Weeks Gestation:
    a. If Delivery Between ≥37 Weeks and <39 Weeks Gestation equals No, do not include in Eligible Patient Population. Stop Processing.
    b. If Delivery Between ≥37 Weeks and <39 Weeks Gestation equals Yes, include in Eligible Population.
5. Denominator Population:
    a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 procedures in the sample calculation.
6. Start Numerator
7. Check Early Elective Delivery or Early Elective Induction Not Performed (≥ 37 and <39 Weeks Gestation):
    a. If Early Elective Delivery or Early Elective Induction Not Performed (≥ 37 and <39 Weeks Gestation) equals Yes, include in Data Completeness Met and Performance Met.
    b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 procedures in Sample Calculation.
    c. If Early Elective Delivery or Early Elective Induction Not Performed (≥ 37 and <39 Weeks Gestation) equals No, proceed to Medical Indication for Induction, Documentation of Reason(s) for Elective Delivery (C-section) or Early Induction.
8. Check Medical Indication for Induction, Documentation of Reason(s) for Elective Delivery (C-section) or Early Induction:

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a. If Medical Indication for Induction, Documentation of Reason(s) for Elective Delivery (C-section) or Early Induction equals Yes, include in Data Completeness Met and Denominator Exception.

b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 0 patients in Sample Calculation.

c. If Medical Indication for Induction, Documentation of Reason(s) for Elective Delivery (C-section) or Early Induction equals No, proceed to Early Elective Delivery or Early Elective Induction Performed (> 37 and <39 Weeks Gestation).

9. Check Early Elective Delivery or Early Elective Induction Performed (≥ 37 and <39 Weeks Gestation):

   a. If Early Elective Delivery or Early Elective Induction Performed (≥ 37 and <39 Weeks Gestation) equals Yes, include in Data Completeness Met and Performance Not Met.

   b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 3 procedures in the Sample Calculation.

   c. If Early Elective Delivery or Early Elective Induction Performed (> 37 and <39 Weeks Gestation) equals No, proceed to Data Completeness Not Met.

10. Check Data Completeness Not Met

    a. If Data Completeness Not Met equals No, Quality Data Code or equivalent was not reported. 1 procedure has been subtracted from the data completeness numerator in the sample calculation.

SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a=4 procedures) + Denominator Exception (b=0 procedures) + Performance Not Met (c=3 procedures) = 7 procedures = **87.50%**

Eligible Population / Denominator (d=8 procedures) = 8 procedures

Performance Rate=

Performance Met (a=4 procedures) = 4 procedures = **57.14%**

Data Completeness Numerator (7 procedures) – Denominator Exception (b=0 procedures) = 7 procedures

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