**DEPARTMENT OF HEALTH SERVICES STATE OF WISCONSIN**

Division of Medicaid Services

F-03188 (06/2023)

**FORWARDHEALTH**

**PRENATAL CARE COORDINATION PLAN OF OPERATION**

**INSTRUCTIONS:** Type or print clearly. The Wisconsin Department of Health Services (DHS) requires providers to send a plan of operation to DHS as part of enrollment and revalidation in Wisconsin Medicaid. The plan of operation describes the prenatal care coordination (PNCC) provider’s ability to carry out the full PNCC benefit and all PNCC activities in a family-centered and culturally appropriate way. The PNCC provider’s plan of operation must be part of the accessible records the PNCC provider keeps. Providers can find more information about these requirements in Wis. Admin. Code § [DHS 105.52(4)(h)](https://docs.legis.wisconsin.gov/document/administrativecode/DHS%20105.52%284%29%28h%29) and the Key Prenatal Care Coordination Requirements section of the PNCC service area of the ForwardHealth Online Handbook at [https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/ Display.aspx?ia=1&p=1&sa=54](https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx?ia=1&p=1&sa=54).

Providers can use this form to meet these record-keeping requirements. Providers can also keep records in a different way as long as they meet the requirements.

DHS can ask to see PNCC plans of operation to check that providers are meeting all policy rules. DHS will also use this information to check that the provider can meet the needs of Medicaid members.

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| **SECTION I – OVERVIEW OF OPERATIONS** |
| 1. Name – PNCC Provider       |
| 2. Goals, Mission, and Priorities – PNCC Provider       |
| 3. Name – Managing Employee (For example, a general manager, business manager, administrator, director, or other person who is responsible for the day-to-day operation of the organization)      |
| 4. Describe the policies the provider has that make sure they meet Medicaid rules about providing services, claims billing, documentation, how care plans address member needs, and confidentiality.       |
| 5. Describe the steps the provider uses to prioritize, monitor, and fix problems with the way they provide services.      |
| 6. Describe how the services the provider provides are family-centered and culturally appropriate.      |
| **SECTION II – SERVICE DELIVERY**  |
| 7. Describe the provider’s policies for scheduling PNCC services for members. Include information about how long it takes the provider to schedule services, how long it takes the provider to get in contact with the member and their support people (collateral contacts), and how the provider makes sure they meet each member’s individual needs with the right length and intensity of services.      |
| 8. Describe how the provider makes sure that hearing-impaired members and members whose primary language is not English have access to prompt and high-quality translator and interpreter services.      |

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| 9. Describe how the provider builds relationships with community agencies, social service providers, HMOs, and Medicaid primary care providers to support their ability to make referrals. Include a list of providers the PNCC provider has a relationship with and:* Descriptions of services the referred provider offers.
* The referred provider’s name, address, phone number, contact person, and any costs for the services.
* Written agreements that include the process for making referrals, how to communicate outcomes from the referrals back to the PNCC provider, and how the PNCC provider makes their staff aware of the procedures for referrals.

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| 10. Describe how the provider manages outreach to members.      |
| 11. Describe the provider’s policies and procedures for initial assessments and making regular assessment updates. Include how the provider makes sure that qualified professionals review and sign all assessments.      |

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| 12. Describe the provider’s process for making and updating care plans. Include details about how the provider: * Makes sure the care plan is reviewed every 60 days (or earlier if the member’s needs change) and updated if needed.
* Lets the member know that the care plan can be changed at any time and as often as needed.
* Lets the member know how to request changes to the care plan.
* Makes sure that care plans are filled out and signed by qualified professionals.
* Makes sure that care plans are made with the member and signed by them.

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| 13. Describe the provider’s policies and procedures for care coordination and monitoring services during and after the pregnancy, including: * Introducing the PNCC provider’s care coordinator, the person who will provide ongoing care coordination services to the member, if they were not already introduced during the initial assessment or care planning.
* Providing the member with the written name and phone number of the care coordinator and the person to contact in urgent situations or as backup if the care coordinator is unavailable.
* Following up with members receiving services and details about the time frames for the care coordinator to reach out to the member and steps to help the member access the services they are referred to.

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| 14. Describe how the provider offers health education and nutrition counseling services for members who need it. Include details on how the provider uses culturally appropriate resources.      |
| 15. Describe how the provider makes sure that members are included to the full extent of their ability in all decisions about their care.      |
| **SECTION III – STAFF HIRING AND TRAINING**  |
| 16. Describe the provider’s hiring process.      |
| 17. Describe how the provider’s staff (qualified professionals, care coordinators) are trained, including how providers are trained to provide quality services that are family centered and culturally appropriate.      |
| 18. What is the provider’s staff-to-client ratio (how many qualified professionals are there to members and how many care coordinators are there to members)? Describe how the provider makes sure that care coordinators have enough time to spend with each member. Also describe how the provider makes sure that qualified professionals have enough time to supervise, review assessments and care plans, and approve assessments and care plans.      |
| 19. Describe how the provider gives staff the opportunity to learn more and grow in their roles on an ongoing basis. Give details about how the provider makes sure the staff can learn about topics like pregnancy health, postpartum health, reproductive health, social support, breastfeeding, perinatal mood and anxiety disorders, substance use and pregnancy, housing, culturally appropriate care, interviewing, and trauma-informed care.      |
| **SECTION IV – SIGNATURE** |
| **SIGNATURE –** Managing Employee  |
| Print Name –Managing Employee      |
| Date Signed –Managing Employee |