

**Sept. 8, 2021 Maternal Health Signify Documentation Updates for Contractors Webinar**  
**Minutes/Summary Document**

**Attendees:** Shawna Staack, Clayton County VNA; Paula Klocke, New Opportunities; Cheryl Lahr, Crawford County Public Health; Kendra Friesth, Webster County; April Knight, Humboldt County; April Yusten, Siouxland; Angela Rausch, MICA; Kellie Cooper, NIACAO; Debbie Ackerman, Johnson County; Dena White, Family Inc; Julie Miller, Marion Co.; Lorrie Greiner, Mills Co; Melissa Kinney, Calhoun County; Diana Strahan, HACAP; Mary Schwery, Crawford; Wanda O'Neill, New Opportunities; Melissa Bell, TMPH; Amanda Johnson, Calhoun County; Anne Carstens, Greene County; Jeri Giebelhausen, Lee County; Becky Borgman, EveryStep; Keri Houdek, HACAP; Shannon McManus, Clinton/Jackson counties; Carla Bernholtz, New Opportunities; Brooke Schlee, Allen Women's Health; Mathe Elola, JCPH; Rebecca Schultz, TMPH; Amber Schon, New Opportunities; Angela Munson, HACAP; Bridget Konz, IDPH; Jenny Sharrick, Family Inc; Maggie Wright, Scott County; Meg Hamilton, JCPH; Lindsey Walker, EveryStep; Melissa Woodhouse, Marion County; Breanna Case, Webster County; Sara Miller, Greene Co.; Ana Anguiano, Woodbury Co.; Jana Larsen, MICA; Cindy Harpenau, Mid-Sioux;

**General Information:**

All documentation guidance and forms can be found on the MCAH portal (please remember that this website is only for grantees, not for public use). The original training on the new changes is available on that site, as is the recording from this webinar. We will post the updated forms and all Signify guidance materials here as soon as they are available:

<https://idph.iowa.gov/Bureau-of-Family-Health/MCH-Portal/Maternal-Health>

**Slides:**



**Updates for Contractors**

Sylvia Navin  
Molly Gosselink  
April Pepper

## Recap of changes introduced July 1st

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1. New Surveys (the only required surveys for MH)
  - a. Pregnancy Intake
  - b. All Visits
  - c. Discharge Survey
  - d. Oral Health Survey (not new but still required)
2. New Bundles
  - a. First Visit
  - b. Subsequent Visit
  - c. Postpartum Visit
  - d. Postpartum Only
  - e. Home Visit
  - f. Previous bundles to continue:
    - i. PE Only
    - ii. OH Only
    - iii. Dental Screening
    - iv. Dental High Risk
    - v. Dental Moderate Risk
    - vi. Lactation Class Only

## Recap of changes introduced July 1st (continued)

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Referral source: now in MH Episode and no longer a standalone activity

Elements from Health Service Activities now in surveys:

- Depression, Domestic Violence, and Substance Use Screening
- Education Type

New elements in surveys:

- Tobacco use
- Current Trimester

# Adjustments since July 1st based on feedback

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- Add "Topic" Field back in to the Health Services activity and pre-populate within the bundles to prompt/remind staff to enter services (e.g. Health Education, Psychosocial, AAS)
- Add "Prescreen, negative" to the All Visit Survey Question #4a (Which substance use tool was used)
- Update the All Visit Survey Question #5c to include the actual EPDS responses to question 10
  - Response to "The thought of harming myself has occurred to me"
    - Yes, quite often
    - Sometimes
    - Hardly Ever
    - Never
- Completely remove "program admission" and "program discharge" activities and only use "Complete Survey" activity to remind staff to complete the appropriate surveys in the bundles. Data that was previously pulled based on discharge date will be pulled based on Episode End Date.
- Remove "Prior Auth No" from common fields - it will need to be completed in each health service activity with a prior authorization



QA Review

- ★ 30 Records Reviewed
    - Health Service Activity after 8/1/21
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## Pop Quiz!

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It's the client's first visit and you are providing Health Education, Medicaid Prenatal Risk Assessment, and Psychosocial. What survey(s) do you need to complete in Signify? (select all that apply)

- Pregnancy Intake
- All Visits
- Discharge Survey
- Oral Health
- Previous Pregnancy

## Pop Quiz!

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You're providing a home visit to a postpartum only client. Which survey(s) do you need to complete in Signify? (select all that apply)

- Pregnancy Intake
- All Visits
- Discharge Survey
- Oral Health
- Previous Pregnancy
- Outcome Summary

## Pop Quiz!

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Which of the following data elements are **not** required to be entered into the Maternal Health Episode?

- Provider Update (Medical Home)
- Pediatrician
- Due Date
- Primary Payor
- Program Enrollment

### Attendee Questions:

- Would you be able to create a report under MH QA, that checks if the admit or discharge surveys are completed.
  - *New reports are being created, and this will be one of them.*
- PHQ2- Can that be added as an option?
  - *We'll look into it*
- When will Admit and Discharge activities disappear?
  - *Admit and Discharge Activities will disappear Oct. 1, 2021*
- If you discharge a client in Signify without seeing them, do you have to put a discharge survey in or just close the maternal health episode?
  - *You do not need to complete a discharge summary if you are not able to contact a client postpartum. A reminder, all tier 2 agencies are required to do post partum follow up with clients, in some form, though we recognize that some clients will not receive care post partum because they don't desire to have the service or you are unable to reach them.*
- So all data has to be entered by the 15th of the month that you saw the patient. If that doesn't happen you don't get paid for it?
  - *All data needs to be entered by the 15th of the month following the service.*
  - *For example: Service was on June 23, the documentation needs to be in Signify by July 15.*
- Do we do an oral health survey only at intake or discharge?

- *Yes, the Oral Health Survey is only completed at the intake and the discharge (not subsequent visits). It is attached to the Complete Survey Activity.*
- If we are seeing a PP and it isn't their discharge visit (they will see them at least once more) do we still do the d/c survey?
  - *The discharge survey can be completed at either visit as it contains quite a bit of the delivery information, so it may be beneficial to complete it at the first pp visit.*
- Are you able to send your QA results to each local agency so we can use the data for local agency data improvement?
  - *April is working on new reports that will be beneficial for agencies to use for QA. These will be sent to the agencies when they are available.*
- Adding another activity for staff can be time consuming and get missed. Is it possible to just have a question added to the All Visit Survey asking if Dental CC was provided on that visit? And this be used to pull data too?
  - *We'll have to talk further with oral health to determine if this is possible. Likely it will not be adequate for data collection, but we'll ask!*
  - *Unfortunately, this will not work for documentation. An activity must be created and the proper care coordination must be completed and documented in order to receive credit (for the dental performance measure) for the service.*
  - *To help mitigate the risk of forgetting to document separately, we will add the dental care coordination activity back into the following bundles, with the payor source prepopulated to other (MAF cannot be billed on the same day a direct service was provided):*
    - *First visit*
    - *Subsequent visit*
    - *Postpartum visit*
    - *Home visit*
    - *Postpartum only*
    - *Oral Health*
- To do care coordination, do we need to be making a dental appointment for them? or what counts as the care coordination?
  - [\*Please refer to the Maternal Health Services summary for requirements\*](#)
- Do we need a care plan for every client or only HR clients?
  - *Only clients with a prenatal risk assessment score of 10 or greater need a care plan.*
- Our nurse asked if we are getting updated nursing assessment forms?
  - *There are a couple more tweaks we need to make and we will send them/post them with the rest of the materials.*
- Will you highlight what you've changed from the previous versions so we can easily identify what we need to revise on our local forms that we've already developed?
  - *Yes, we'll post a PDF with tracked changes.*
- Oral Health only needs care coordination if it is high risk client, correct?
  - *We will need to follow up on this with oral health.*

- Can you go over the prescreen thing?
  - *The SBIRT prescreen is 2 questions that you can ask prior to doing a whole SBIRT to determine if a full screening needs to be done. If it's negative, you don't need to go into the full screening.*
  - *\*If you ask any type of screening questions, and they are negative (no alcohol or illicit substance use), you may use this question to answer "negative." This is the follow up guidance from the meeting.*
- Prenatal Risk Assessment, continue?
  - *Yes, you need to continue to do the prenatal risk assessment and keep the full assessment in the chart (paper or electronic). In Signify, you will indicate the Prenatal Risk Assessment was completed by answering the question in the All Visit survey and entering the score. You should **not** complete the separate Prenatal Risk Assessment Survey in Signify.*