



Weekly Provider News

April 15, 2015

Postpartum (PP) Incentive: Changes to the PP Form

Providers who submit a postpartum (PP) form documenting a postpartum visit, can receive a \$25 incentive for each approved form (one per member). The postpartum visit must be provided between 21 and 56 days following delivery.

The PP form has recently been updated to allow you to document the Practice NPI and the Rendering Provider NPI numbers. **Please discard any old forms and use the revised form that can be found on the next page or on the Alliance Form Library under Provider 2015 Care Based Incentive Forms** (<http://www.ccah-alliance.org/formlibrary.html>).

All previously submitted postpartum forms will be reprocessed by the Alliance and providers will get reimbursed for all approved forms. We apologize for any inconvenience this may have caused.

If you have any questions, please call Health Education Line at (800) 700-3874 ext. 5580.

Questions?

Contact your Provider Services Representative or call Provider Services at (800) 700-3874 ext. 5504

Healthy Moms and Healthy Babies

Postpartum Care Form



Dear Alliance Member,

Make sure you are healthy after the birth of your baby! It is very important to see your doctor **within 3 to 8 weeks** after you have your baby. This is called a postpartum visit. At this visit, your doctor will check to make sure you're doing well. You can also talk about family planning and get help with breast feeding if you need it.

See your doctor between ____ / ____ / ____ **and** ____ / ____ / ____

If you see your doctor between the dates above, **you can receive a \$25 gift card** from the Alliance.

Important: If you had a C-section, you will see your doctor 2 weeks after you have your baby. While you are at that visit, schedule a time to come back for a second visit between the dates shown above.

To receive your gift card, fill out this form. Take it with you to your visit, and have the doctor sign and date it. Send us the signed form in the enclosed envelope. (No stamp is needed.) We will send you a gift card after we receive your form and confirm your visit. This takes about 4 to 6 weeks.

If you would like information about breast feeding or if you need a breast pump, please call our Health Education Line at 1 (800) 700-3874 ext. 5580.

Alliance Member - Please fill out this section:

Name: _____ Alliance ID#: _____
Address: _____ Date of birth: _____
City: _____ Zip code: _____
Phone number: _____

Provider - Please fill out this section and fax to 1 (877) 793-8504:

Date of delivery: _____ Date of postpartum visit: _____

NOTE: This form is not to be used for a 2-week C-section follow up. The member qualifies for the gift card only if the appointment is between the dates listed above. PCPs will receive \$25 for the first submitted and approved Postpartum Form.

Provider name: _____ Practice NPI: _____ Rendering Provider NPI: _____

Provider phone number: _____

Provider signature or office stamp: _____