

## PERINATAL RISK ASSESSMENT (PRA) 17P REFERRAL MEDICAID TIP SHEET

FORMS & FUNCTIONS	
<b>PRA FORM</b>	Completed at first prenatal visit and submitted to Family Health Initiatives via PRA SPECT <a href="http://www.praspect.org">www.praspect.org</a> within 5 business days
<b>17P UNIVERSAL FORM</b>	Initiated at first prenatal visit if preterm birth history ( ≤ 37 weeks or 3 weeks prior to due date) <b>AND</b> patient ≤ 24 weeks gestation
<b>17P PATIENT LIST</b>	Displays patients eligible for 17P therapy on <a href="http://www.praspect.org">www.praspect.org</a>

- The goal of a healthy pregnancy is to deliver a baby at 40 weeks gestation. The purpose of 17P therapy is to safeguard women from delivering ≤ 37 weeks gestation
- 17P therapy is only effective if initiated when patient is ≤ 24 weeks gestation
- The PRA is filled out upon a woman's entry into prenatal care. If Para P (preterm birth) is ≥ 1 **AND** patient is ≤ 24 weeks gestation:

Entry Into Prenatal Care	Physical Assessment	Perinatal History
Date of <sup>*</sup> first visit <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <small>M M                      D D                      Y Y</small>	Blood Pressure <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	Gravida <sup>*</sup> <input type="text"/> <input type="text"/> Para <sup>*</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>T      P      SAB      EAB      L</small>
Date of 1st visit under MCO <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <small>M M                      D D                      Y Y</small>	Pre Pregnancy Weight (lbs) <input type="text"/> <input type="text"/> <input type="text"/>	Date of most recent live birth <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <small>M M                      D D                      Y Y</small>
LMP <sup>*</sup> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <small>M M                      D D                      Y Y</small>	Current Weight (lbs) <input type="text"/> <input type="text"/> <input type="text"/>	Weeks Gestation of Preterm loss(es): <i>select any that apply</i> <input type="radio"/> <21 wks <input type="radio"/> 21-34 wks <input type="radio"/> >34 wks
EDC <sup>*</sup> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <small>M M                      D D                      Y Y</small>	Height (Ft-Inches) <input type="text"/> - <input type="text"/>	Specify # of Weeks Gestation of most advanced loss: <input type="text"/> <input type="text"/>

1. Fill out prepopulated 17P Universal form (serves as both prescription and authorization)
2. Send 17P Universal form to Medicaid Managed Care Organization  
**Note:** You do not need to send 17P Universal form to Horizon NJ Health
3. Enter 17P outcome on PRA|SPECT

### To complete 17P Universal form:

Login [www.praspect.org](http://www.praspect.org) > Click 17P > Click Eligible Medicaid Patients > Click Show All or first letter of patient's last name > Click Complete Form > Click Save

### To enter 17P outcome:

Login [www.praspect.org](http://www.praspect.org) > Click 17P > Click Patients in Need of Outcome > Click Show All or first letter of patient's last name > Select outcome > Click Save

### To update completed 17P Universal form:

Login [www.praspect.org](http://www.praspect.org) > Click 17P > Click 17P Patients [Completed] > Click Show All or first letter of patient's last name > Click Update Form to right of patient's name