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Routine Antenatal Care and Screening

Adjudication Guideline

Approved by:
Daman

Responsible:
Medical Standards & Research

Related Adjudication rules:

- Obstetrical Ultrasound Scans
- Indications
- Down Syndrome Screening

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Abstract

For Members

Well-being of both mother and baby are monitored during pregnancy. Antenatal tests are designed to help make pregnancy safer by screening the mother for particular conditions and assessing the development of the baby. Pregnant women with complications, or have experienced complications in previous pregnancies, usually require additional care.

Aside from screening tests, antenatal care also includes education and counseling on many topics that affect pregnancy. These include: ideal weight gain, proper nutrition, intake of supplements, vaccinations, breastfeeding, postpartum care, etc.

Coverage of routine antenatal care and screening by Daman is subjected to policy terms and conditions. Daman covers routine antenatal services for married women with maternity benefit.

For Medical Professionals

This adjudication guideline provides coverage guidance on baseline clinical care for all pregnant women covered under Daman plans. Pregnant women with complications, or have experienced complications in previous pregnancies, usually require additional care, which has to be determined by the treating physician.

Scope

This adjudication guideline highlights the coverage of routine antenatal screening tests and care for all health insurance plans administered by Daman. It also includes coverage of screening tests and care during the pre-conception period. Additionally, it provides guidance on baseline clinical care for all pregnant women covered under Daman plans. Pregnant women with current complications or have experienced complications in previous pregnancies usually require additional care, which has to be determined by the treating physician.

This guideline was based on the local UAE standards (Dubai Health Authority Antenatal Care Protocols and Health Authority Abu Dhabi Standard for Routine Antenatal Screening and Care) together with the incorporation of the international best practice.

Adjudication Policy

Eligibility / Coverage Criteria

Coverage of Antenatal care and screening tests

Daman covers routine antenatal screening tests and care for married pregnant ladies with Maternity benefit. For coverage details, please refer to Tables 1, 2 and 7.

Routine antenatal immunization & chemoprophylaxis coverage for pregnant ladies with maternity benefits is subject to policy terms and conditions. Please refer to Table 3.

Coverage of Pre-conception care and screening tests

Pre-conception screening should be limited to a maximum of one per year. Any subsequent care shall follow the clinical pathway appropriate for the screening findings.

Daman covers pre-conception care for Thiqa members under Thiqa scheme Preventative Care. For Basic and Enhanced plans, coverage is subject to policy terms and conditions. For coverage details, please refer to Tables 4, 5 and 6.

Services (refer to Additional information) done outside of the listed time frame can still be covered, if they have not been previously done during the present pregnancy. Only Down's Syndrome-related tests and anomaly scan will be rejected if performed outside of the recommended timing.

Requirements for Coverage

ICD, CPT and drug codes must be coded to the highest level of specificity.

Non-Coverage

Pre-Conception services are not covered, except for Thiqa members and Enhanced members with Medical Check-up benefit.

Antenatal services are not covered for unmarried females and for plans without maternity benefit.

Payment and Coding Rules

Please apply DHA and HAAD payment rules and regulations. Relevant coding manuals (ICD, CPT, etc.) should also be used.

Adjudication Examples

Example 1

Question: A 26 year old female under Basic plan (Maternity benefit) with diagnosis of Supervision of normal first pregnancy, is advised CBC, Serological screening for Hepatitis B and Urine testing. Will these tests be covered?

Answer: Yes, as the tests are considered routine antenatal screening tests.

Example 2

Question: A 34 year old female under Enhanced plan (Maternity benefit) with diagnosis of Supervision of other normal pregnancy is advised Cytomegalovirus test and Chorionic villus sampling (CVS). Will these services be covered?

Answer: No. CMV testing and CVS are not considered medically necessary as routine tests in a normal pregnancy. There should be other medical indications documented in the medical record and submitted on the claim for the services to be covered.

Appendices

A. References

1. <http://www.haad.ae/HAAD/LinkClick.aspx?fileticket=NGHLA-XduVg%3D&tabid=820>
2. <http://www.isahd.ae/content/docs/GC%2001-2015%20Antenatal%20care%20protocols.pdf>
3. <https://www.icsi.org/asset/13n9y4/Prenatal.pdf>
4. <https://www.nice.org.uk/guidance/cg62/resources/antenatal-care-for-uncomplicated-pregnancies-975564597445>
5. <http://bestpractice.bmj.com/best-practicSRVConograph/493.html>
6. https://www.uptodate.com/contents/initial-prenatal-assessment-and-first-trimester-prenatal-care?source=search_result&search=antenatal&selectedTitle=1~150
7. https://www.uptodate.com/contents/prenatal-care-second-and-third-trimesters?source=search_result&search=antenatal&selectedTitle=3~150
8. <http://apps.who.int/iris/bitstream/10665/250800/1/WHO-RHR-16.12-eng.pdf?ua=1>

B. Revision History

Date	Change(s)
01-06-2012	V 1.0 Release.
01-07-2013	V 2.0 New template.
15-07-2014	V 3.0 - Disclaimer updated as per system requirements. - Restored original effective date.
01-03-2017	V 3.1 - Incorporation of Dubai Health Authority Routine Antenatal Standards. - General content update.

C. Additional Information and Tables

Abu Dhabi Providers

Table 1: HAAD-recommended Antenatal Counseling & Education

Visits	Screening; Counseling & Education (15 min)	Basic	Enhanced	Thiqa
First Antenatal visit (ideally before 10 weeks)	Medical and family history including risk profiles		Covered. Included in E/M.	
	Physical examination including: height, weight, BMI, blood pressure			
	Physical activity			
	Nutrition & diet including Vitamin D supplements			
	Nausea and vomiting			
	Importance of continuity of care			
	Physiology of pregnancy			
	Discuss antenatal screening including fetal aneuploidy screening			
	Genetic Counseling			
	Book first trimester combined Down Syndrome screening			
16 weeks	Accurate recording of menstrual dates		Covered. Included in E/M.	
	Weight/ BMI, blood pressure			
	Fundal height			
	Pre-term labor screening*			
	Nutrition and weight			
	List of medications, herbal supplements, vitamins			
	Fetal growth			
	Nutrition and weight			
	Breastfeeding			
	Nausea and vomiting			
	Physiology of pregnancy			
	Follow-up of modifiable risk factors			
	Continuity of care			
Review labs from visit 1				

	Schedule Anomaly scan to be done at 18-20 weeks	
25 weeks	Weight/ BMI, blood pressure	Covered. Included in E/M.
	Fundal height	
	Follow-up of modifiable risk factors	
	Classes	
	Family issues	
	Length of stay	
	Gestational diabetes mellitus (GDM)	
	Continuity of care	
28 weeks	Weight/ BMI, blood pressure	Covered. Included in E/M.
	Fundal height	
	Follow-up modifiable risk factors	
	Discussing plans for work	
	Physiology of pregnancy	
	Fetal growth	
	Awareness of fetal movement	
Continuity of care		
31 weeks	Weight/BMI, blood pressure	Covered. Included in E/M.
	Fundal height	
	Continuity of care	
34 weeks	Weight/ BMI, blood pressure	Covered. Included in E/M.
	Fundal height	
	Follow-up of modifiable risk factors	
	Travel	
	Breastfeeding	
	Episiotomy	
	Labor & delivery issues	
	Warning signs/pregnancy induced hypertension	
	Vaginal birth after caesarean (VBAC)*	
	External cephalic version (ECV)*	
36 weeks	Weight/ BMI, blood pressure	Covered. Included in E/M.
	Fundal height	
	Follow-up of modifiable risk factors	
	Postpartum care	
	Breastfeeding	
	Paediatric care (care of new baby,	

	vitamin K) Contraception When to call provider Discussion of postpartum depression Vaginal birth after caesarean (VBAC)* Caesarean Section (C-S) consents and discussion if indicated* Pain management Consider weekly visits	
38 weeks	Weight/ BMI, blood pressure Fundal height Cervix exam Follow-up of modifiable risk factors Postpartum vaccinations Infant CPR Options for post-term pregnancy Labor & delivery update C-S consents and discussion if indicated* Pain management	Covered. Included in E/M.
40 weeks	Weight/ BMI, blood pressure Fundal height Follow-up of modifiable risk factors Postpartum vaccinations Infant CPR Options for post-term pregnancy Labor & delivery update	Covered. Included in E/M.
41 weeks	Weight/ BMI, blood pressure Fundal height Follow-up of modifiable risk factors Postpartum vaccinations Infant CPR Options for post-term pregnancy Labor & delivery update Offer a membrane sweep Offer induction of labor	Covered. Included in E/M.

Table 2: HAAD-recommended Antenatal Screening Tests

Visits	Screening Tests	Basic	Enhanced	Thiqa
First Antenatal visit (ideally before 10 weeks)	Confirming pregnancy		Covered.	
	Pregnancy test		Covered.	
	Rubella susceptibility		Covered.	
	HIV		Covered.	
	Varicella		Covered.	
	Syphilis (RPR, VDRL)		Covered.	
	Hepatitis B virus		Covered.	
	Complete Blood Count		Covered.	
	Vitamin D	Not covered.	Subject to policy terms and conditions.	Covered.
	Hemoglobinopathy screening*	Not covered.	Subject to policy terms and conditions. ***	Covered. ***
	ABO/Rh/Ab screen		Covered.	
	Urine – dipstick & CNS		Covered.	
	Cervical cancer screening*	Not covered.	Subject to policy terms and conditions. ***	Covered. ***
11- 14 weeks	Down syndrome screening		Covered.	
	Chorionic Villus Sampling*		Covered.	
16 weeks	Fetal heart tones		Covered.	
	Urine - dipstick		Covered.	
	Preterm labour screening*		Covered.	
	Amniocentesis* should be done after 16 weeks, if indicated		Covered.	
18 – 21 weeks	Detailed anomaly scan		Covered.	
25 weeks	Fetal heart tones		Covered.	
	Urine dipstick - proteinuria		Covered.	
28 weeks	Fetal heart tones		Covered.	
	Gestational Diabetes Mellitus screening if clinically indicated or		Covered.	

	high risk: <ul style="list-style-type: none"> body mass index >30 kg/m² previous macrosomic baby ≥ 4.5 kg previous gestational diabetes family history of diabetes (first-degree relative with diabetes) ethnic family origin with a high prevalence of diabetes 	
	Repeat Rh antibody screen*	Covered.
	CBC	Covered.
	Urine dipstick- proteinuria	Covered.
	Hepatitis B Ag*	Covered.
31 weeks	Fetal heart tones	Covered.
	Urine dipstick - proteinuria	Covered.
34 weeks	Urine dipstick - proteinuria	Covered.
	Fetal heart tones	Covered.
	Ultrasound*	
36 weeks	Fetal heart tones	Covered.
	Confirm fetal position (if breech, offer cephalic version)	
	Urine dipstick - proteinuria	Covered.
	Culture for group B streptococcus	Covered.
	CBC	Covered.
38 weeks	Fetal heart tones	Covered.
	Urine dipstick - proteinuria	Covered.
40 weeks	Fetal heart tones	Covered.
	Urine dipstick - proteinuria	Covered.
41 weeks	Fetal heart tones, Fetal assessment (Ultrasound +CTG)	Covered.
	Urine dipstick - proteinuria	Covered.

*If clinically indicated or high risk; ***If not done previously

Table 3: HAAD-recommended Antenatal Immunization and Chemoprophylaxis

Visits	Immunization & Chemoprophylaxis	Basic	Enhanced	Thiqa
First Antenatal visit (ideally before 10)	Hepatitis B*	Not Covered.	Subject to policy limits, and conditions.	Covered.
	Tetanus booster*			
	Progesterone*			
	Influenza (inactivated)*			

weeks)	Nutritional supplements including folic acid	Covered.
16 weeks	Rh(D) Immune Globulin (RhoGAM)*	Covered.
25 weeks	Rh(D) Immune Globulin (RhoGAM)*	Covered.
28 weeks	Rh(D) Immune Globulin (RhoGAM)*	Covered.
34 weeks	Rh(D) Immune Globulin (RhoGAM)*	Covered.

*If clinically indicated or high risk

Table 4: HAAD-recommended Pre-Conception Counseling and Education

Counseling & Education	Basic	Enhanced	Thiqa
Medical and family history including risk profiles	Not Covered.	Subject to policy terms and conditions.	Covered. Included in E/M.
Height and weight/ BMI			
Blood pressure			
Physical Examination			
Nutrition and weight			
Smoking cessation			
List of medications, vitamins			
Accurate recording of menstrual dates			
Importance of early registration of pregnancy and continuity of care			
Physiology of pregnancy			
Genetic counseling			

Table 5: HAAD-recommended Pre-Conception Screening Tests

Screening	Basic	Enhanced	Thiqa
Cholesterol & HDL**	Not Covered.	Subject to policy terms and conditions.	Covered.
Rubella, Varicella			
Vitamin D screening			
HbA1C**			
Cervical cancer screening**			

**As per protocol

Table 6: HAAD-recommended Pre-Conception Immunization and Chemoprophylaxis

Immunization & Chemoprophylaxis	Basic	Enhanced	Thiqa
Tetanus booster*	Not Covered.	Subject to policy terms and conditions.	Covered.
Rubella*			
Varicella*			
Hepatitis B vaccine*			
Folic acid supplement			

*If clinically indicated or high risk

Dubai and Northern Emirates Providers

Table 7: DHA-recommended Antenatal Services

Weeks AOG	Service	Basic	Enhanced	Thiqa
10-14	History and full physical examination		Covered.	
	Complete Booking Risk Assessment Tool			
	Offer 1st trimester genetic screening at 11-13 weeks			
	Discussion of Low Risk GP led care			
	Make scan appointment for 18-20 weeks at clinics/hospital			
	Confirmation of pregnancy		Covered.	
	Dating scan		Covered.	
	Full Blood Count		Covered.	
	Blood group, Rhesus status and antibodies		Covered.	
	VDRL		Covered.	
	Urinalysis		Covered.	
	Rubella serology		Covered.	
	HIV		Covered.	
	Hep C offered to high risk patients		Covered.	
	Hep B screening*		Covered.	
Glucose Tolerance Test if high risk <ul style="list-style-type: none"> ▪ body mass index >30 kg/m² ▪ previous macrosomic baby ≥ 4.5 kg ▪ previous gestational diabetes ▪ family history of diabetes (first-degree relative with diabetes) ▪ ethnic family origin with a high prevalence of diabetes 		Covered.		

	Fasting/random blood glucose or HbA1c for all due to high prevalence of diabetes in UAE	Covered.
11-13	Genetic screening (Down's screening)	Covered.
16	Antenatal visit	Covered.
18-20	Detailed anomaly scan	Covered.
20	Antenatal visit	Covered.
25	Antenatal review and risk status, record results	Covered.
	Review ultrasound result (change EDD only if USG scan is 10 days different to menstrual dates)	
	Fetal growth surveillance	
	Repeat GTT for high risk patient if normal at first visit	
28	Antenatal review and risk status, record results	Covered.
	Review ultrasound result (change EDD only if USG scan is 10 days different to menstrual dates)	
	Fetal growth surveillance	
	Full Blood Count	
	Rhesus antibody screen	
	If Rh-, give Anti D one dose (28-30 wks)	
31	Antenatal review and risk status, record results	Covered.
	Fetal growth surveillance	Covered.
34	Antenatal review and risk status, record results	Covered.
	Fetal growth surveillance	Covered.
	Rhesus antibody screen	Covered.
36	Antenatal review and risk status, record results	Covered.
	Confirm presentation	Covered.
	Fetal growth surveillance	
	Low vaginal swab for group B haemolytic strep (screening)	Covered.
38	Antenatal review and risk status, record results	Covered.
	Confirm presentation	Covered.
	Fetal growth surveillance	
40	Antenatal review and risk status, record results	Covered.
	Confirm presentation	Covered.
	Fetal growth surveillance	
41	CTG	Covered.
	Bishops score	Covered.
	Membrane sweep	

Appointment for induction of labor at 40+10

*as per international best practice