









N/A

**20 Would you like to become pregnant in the year after you deliver your baby?**

Yes- Talk with your doctor about having a healthy pregnancy

No- Talk to your doctor about birth control options

**21 Have you selected a pediatrician for your baby?**

Yes- Note pediatrician in notes

No- Offer assistance in selecting provider and note selection in notes

**22 Do you understand process and time frame in your state to enroll your baby in Medicaid coverage?**

Yes

No

**23 Note: Total Risk Score. Any score 1 or greater- enroll member into High Risk Pregnancy program.**

Select next question

**24 Note: All pregnant members also require PHQ 2/9 assessment AND AUDIT-C for adults OR CRAFFT for teens. Any positive screen for any of these assessments also requires member to be placed in High Risk Pregnancy program regardless of score on this assessment**

Select next question

**25 End Assessment**

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