

# Strategies to Improve Maternal and Infant Health Outcomes in Medicaid

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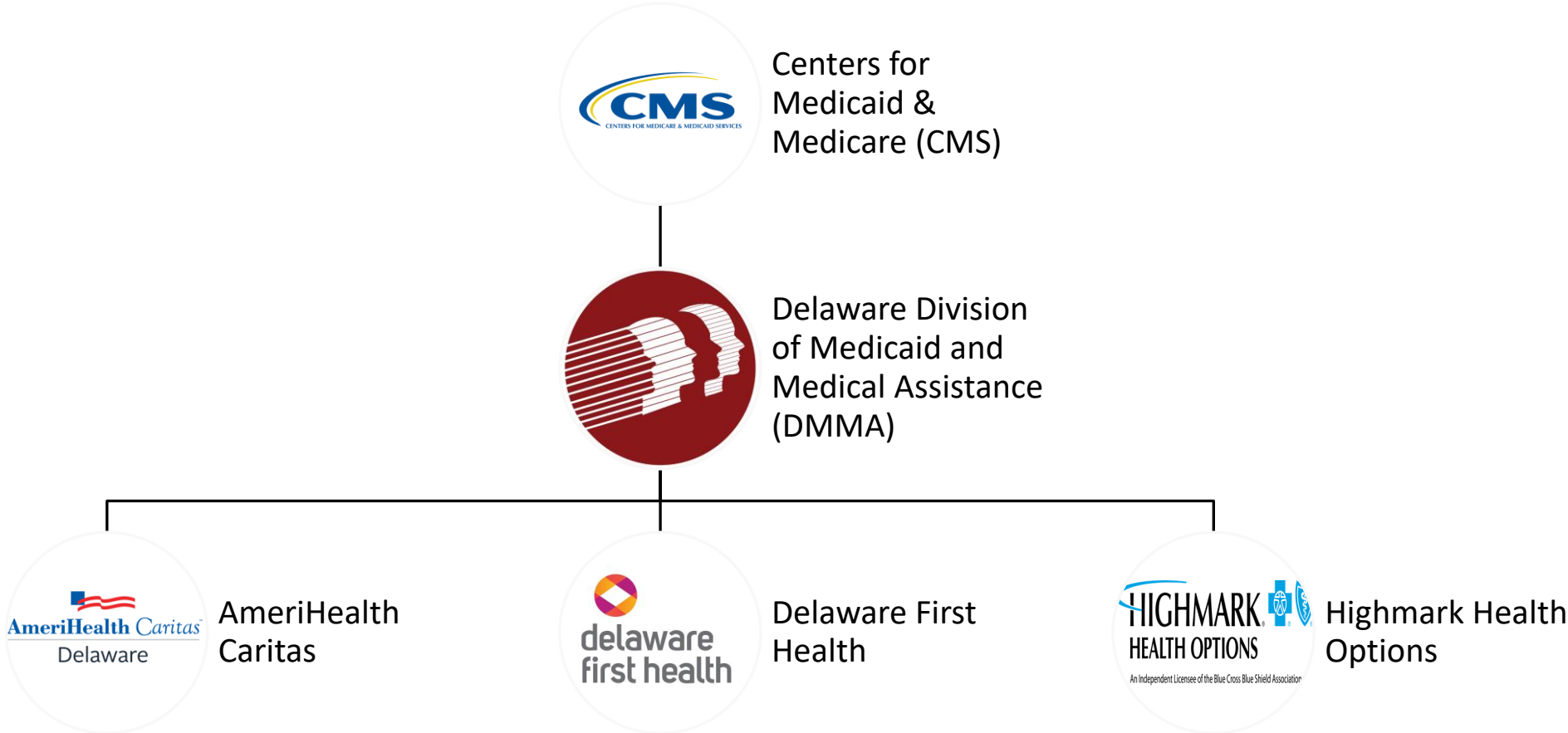
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# Medicaid Overview



# Medicaid Coverage

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Medicaid finances ~40% of births in Delaware

Delaware has robust coverage for pregnant and postpartum population

- Expansion state
  - Pregnancy eligibility - 212% FPL
- Postpartum extension
  - Coverage from 60 days to 12 months





# Maternity Benefits

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- Comprehensive prenatal & postpartum care coverage
- Lactation services and support
- Maternal care coordination
- Family planning
- New for 2024:
  - Doula coverage
  - Postpartum nutrition benefit

# Data & Oversight

## Delaware Perinatal Quality Collaborative (DPQC)

- Stakeholder collaboration to improve perinatal outcomes

## Maternal Mortality Review Committee (MMRC)

- Findings of maternal mortality cases with development of comprehensive recommendations

## Performance Improvement & Quality Measure

- Healthcare Effectiveness Data and Information Set (HEDIS)
- Performance Improvement Project (PIP)

# Continuum of Care

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## Attention to Women's Health Prior to Pregnancy

- Educate members on the importance of Optimal Perinatal health and early prenatal care
- Assure and support Robust Provider network
- Support Integrated Care systems and Value Based Partnerships
- Collaborate with Providers and Community Partners to optimize health prior to pregnancy
- Provide quality initiatives and incentives to encourage providers to address health conditions that may affect pregnancy (Obesity, Hypertension, Diabetes, Inactivity, SUD, Mental Health)

## Attention to Early Pregnancy and Prenatal Care

- Collaborate with Providers to assist connection with hard to reach/lost to contact members
- Incentivize Providers to inform MCO at early identification
- Connect with Facilities to identify early pregnancy
- Support Midwifery and Doula Programs

# Continuum of Care

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## Attention in the Postpartum period

- Continuation of Doula support
- Support Provider/Patient relationship
- Bring Community Partners/Support Service organizations and Providers together





# Collaboration

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Communication is KEY

MCOs are looking to partner with providers and various stakeholders

Currently participate in various workgroups throughout the state (DPQC, DHMIC, MCDRC, etc)

Opportunities to further partner and support OB offices in caring for our pregnant members

We want to help you, help our members



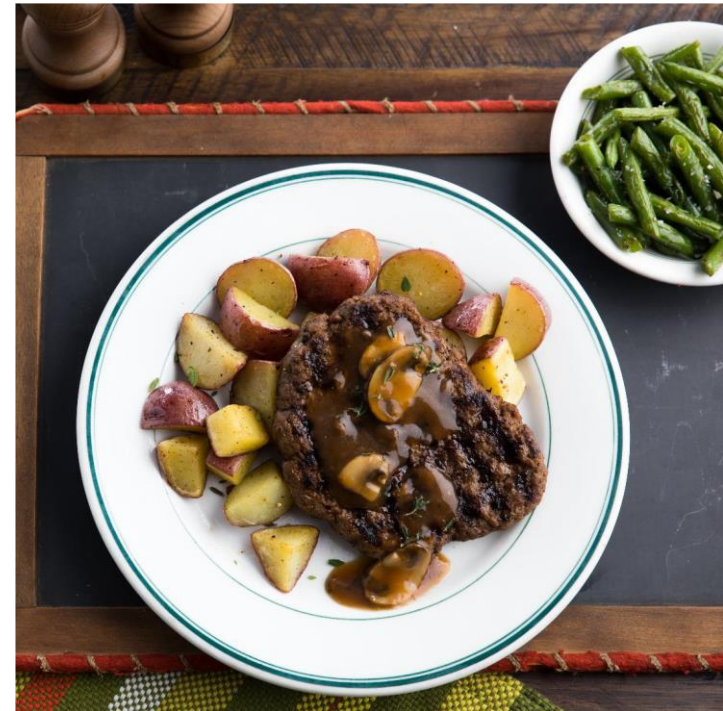
# Leveraging New Benefits

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## DOULA SERVICES



## POSTPARTUM NUTRITIONAL PROGRAM



# Doula Coverage

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Doulas will practice independently and enroll as Medicaid providers.

- Each MCO has a Doula Liaison to assist with onboarding process

Doula services to be provided to Medicaid members:

- Minimum of one (1) prenatal visit
  - Max of three (3) prenatal visits
- Max of three (3) postpartum visits
  - Must be completed within 90 days of delivery date
- 90 minutes per visit (home or virtual)
- Labor / birth attendance

Max of three (3) postpartum visits may be provided following the loss of a pregnancy; however, one (1) prenatal doula visit must have been conducted to qualify for postpartum doula visits.

# MCOs -Ready to partner with doulas for onboarding process

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# Postpartum Nutrition

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Medicaid members are eligible to receive food delivered to their home:

- After a live birth
- Up to 12 weeks postpartum
- Diapers and wipes will be included with food deliveries





# SDOH – Health Equity through HEDIS

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(2023) New measures added to HEDIS set for commercial plans, Medicaid and Medicare – Health plans measured on evaluating and responding to Social Determinants of Health

Food insecurity screening and intervention

Housing insecurity screening and intervention

Transportation insecurity screening and intervention

Race and ethnicity stratification

Affirming gender relevant care – revised measures that do not limit pregnancy and childbirth to individuals who do not identify as a women.



## WIC

Pregnant women up to 6 weeks after birth  
Breastfeeding women up to infant's first birthday  
Postpartum – not breastfeeding up to 6 mo after birth  
Child or infant less than 5 years of age

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## SNAP

Must be US citizens or eligible aliens  
Individuals who receive TANF, GA or Supplemental Security income do not need to meet an income test to receive benefits  
Maximum gross monthly income limit for most households 200% of the Federal Poverty Level.

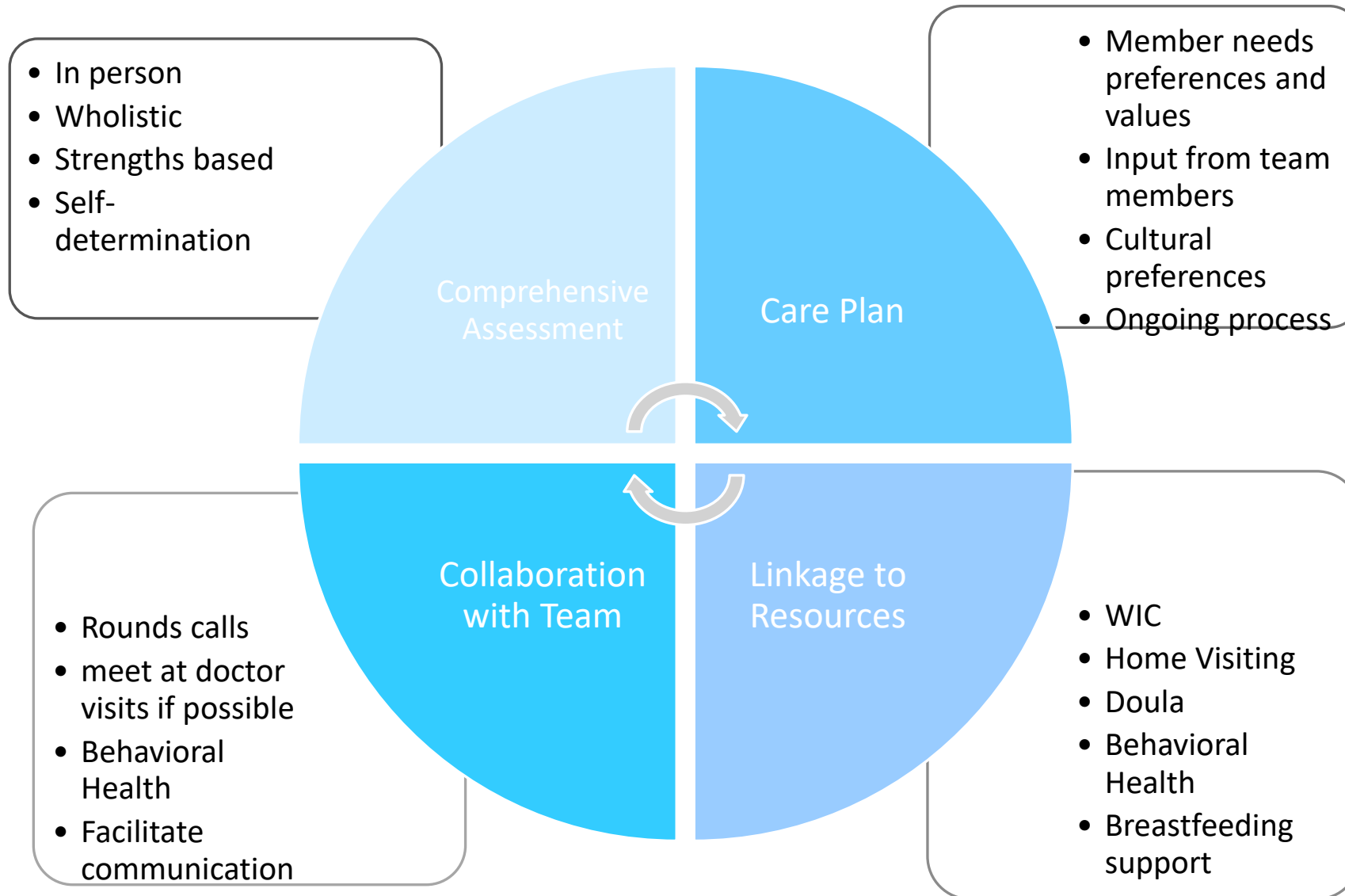
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## Value Add Benefits

Benefits added to support non-medical needs beyond the Required benefits.  
Seek to improve quality and health outcomes

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# Care Coordination Overview



# Maternal Care Coordination Core Functions

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Educate re: benefits of prenatal care and connecting to care

Extensive Health Education – (trimester specific, nutrition, substance use impact, birth plan, breastfeeding, well-baby care, birth spacing, family planning)

Ongoing depression screening, initiating treatment and collaboration with providers as appropriate

Consistent contact with member to reassess and monitor care plan





# Discussion & Questions

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