Healthier Babies: A Regional Collaborative to Improve Birth Outcomes for Pregnant Women on Medicaid

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Maternity in Medicaid

- High prevalence
 - Medicaid population demographics
 - Pregnancy as Medicaid qualifying event
- Big percentage of overall hospital use in a Medicaid Plan (NCQA data)
 - Total Discharges/1000 MM=8.35
 - Maternity Discharges/1000 MM=3.55
 - Meaning Maternity=42.5% ALL Hosp

Clinical and Financial Impact of LBW

- LBW infants 40 times more likely to die in first 4 weeks of life
- Average 1st year of life costs for LBW infants: \$93,800
- Savings for LBW over VLBW infant: \$59,700
- Estimated savings per dollar invested in LBW prevention: \$3

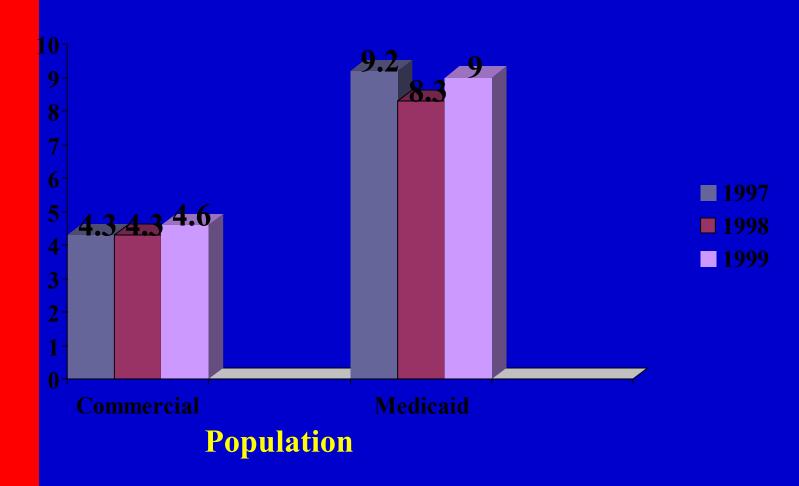
Source: NCQA

Medicaid Patients do worse

- NY State Pooled Managed Care Data
 - Total population: 6,977,275
 - 25 Commercial Plans, 21 Medicaid Plans

Risk-Adjusted Low Birth Weight





Rate

Medicaid Patients do worse

Healthy People 2000 LBW Goal: 5%

Healthier Babies Medicaid LBW:
 11.3%

What are the challenges to improving birth outcomes?

- Some intrinsic to Medicaid
 - Population turnover
 - "Social issues": housing, poverty, education
 - Cultural barriers
- Some "clinical"
 - Absence of clear knowledge base on "what works"
 - Significant co-morbidities (Substance Use, HIV, Mental Health...)

History and Background HBHF

- RWJF RFP: "Mending the Safety Net"
- HealthChoices: Pennsylvania's Mandatory Medicaid Managed Care Program
 - Philadelphia and 4 surrounding counties
- 4-6 Potential Contractors
- 15,000 deliveries per year

Broad, simple concept:

- Agree on one standard prenatal clinical data collection tool for MMCOs
 - Replace a heterogeneous, overlapping approach
- Build a centralized database to receive data
- Link with DOH Birth Certificate Database
- Produce state-mandated HEDIS and other reports

Problems identified at RWJF/CHCS site visit:

- Long term funding
- Confidentiality
 - Administrative/legal
 - Control/appropriate use
- Ownership

UPEF Development

- Clinician in charge
- Commitment to a one page form
- Commitment to obtain only data that would or should be available to a clinician at each visit
- Commitment to capture relevant clinical and "social" risks
- Initial input broadly participatory, final execution very narrow
- Field tested

Barriers

- Competitiveness
- Resource constraints under HealthChoices
- Confidentiality
- Marketplace events
- Provider and Advocate concerns
- "Null hypothesis" for prenatal intervention

Governance

- New non-profit corporation: Healthier Babies, Inc
- Solved both ownership and control issues
- Three classes of Directors
 - Appointed Directors
 - Health Department Directors
 - At Large Directors
- Has itself created opportunity for collaborative action

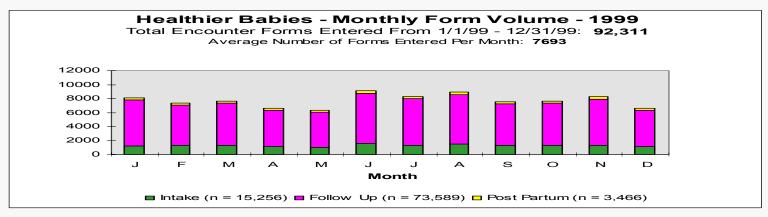
Critical Success Factors

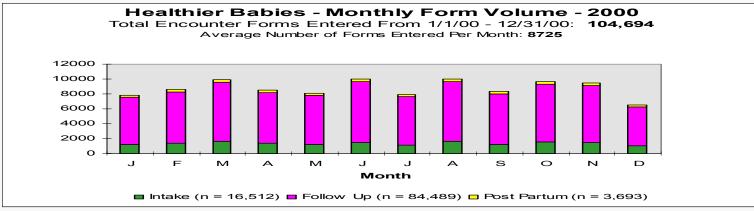
- Defined universe of MMCOs
- Defined universe of providers
- Clearly (sort of) defined clinical data set
- Leadership

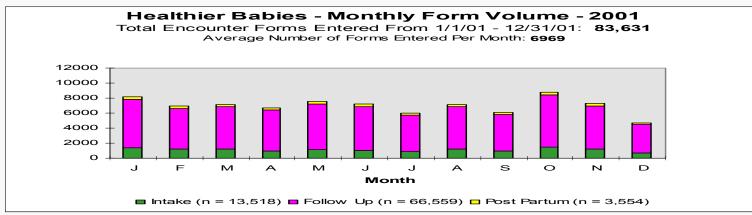
Results

- We exist, Board meets every other month
- We have Bylaws, contracts, money
- Over 90% of prenatal encounters are reported
 - 5 counties, 225 sites, 800 providers
- Database actually works
 - Case management
 - Reporting

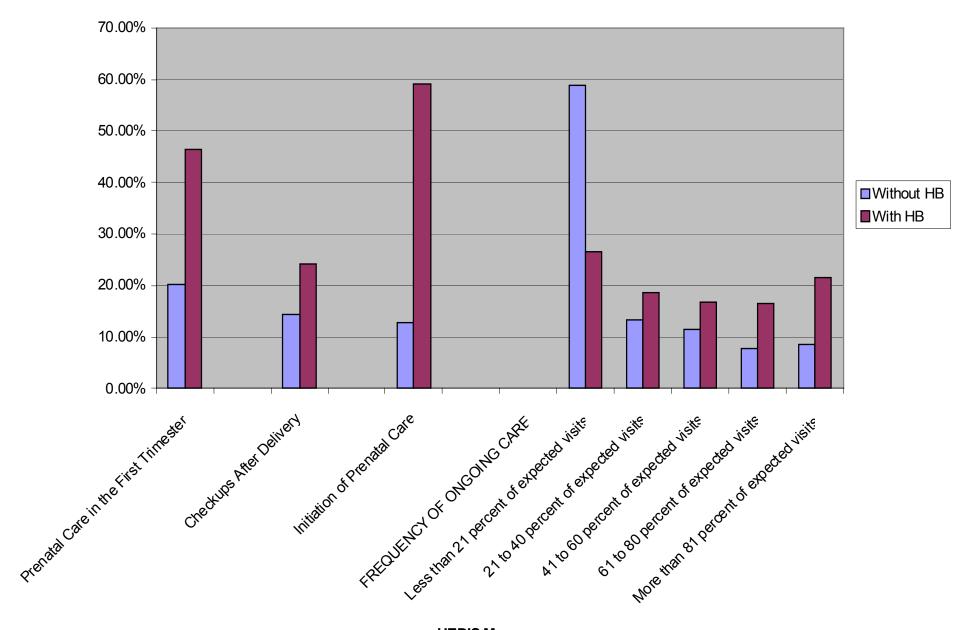
HEALTHIER BABIES: UPEF ENTRIES: 1999-2001





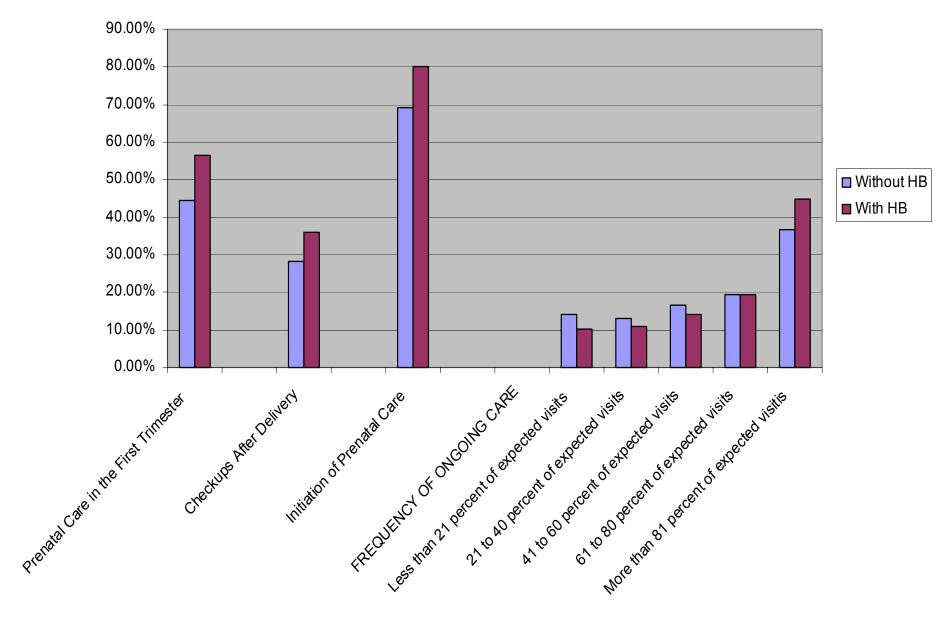


Company A HEDIS Improvement



HEDIS Measure

Company B HEDIS Improvement



HEDIS Measure

Figure 1. Weight Of Selected Risk Factors
Based On Their Strength Of Predicting
Poor Birth Outcome
(2000/2001 Births)

Risk Factor	Population Prevalence	Weight
Prior Preterm Birth	9.29%	13.9
Prior Low Birth Weight	9.98%	12.9
Cocaine/Heroin/Amphetamine Use	1.86%	12.4
Medical History: Diabetes	1.11%	10.2
Medical History: Hypertension	1.66%	10.0
Prior Pregnancy Complication	13.68%	9.6
Prior Infant Death	2.66%	9.0
Disabled Eligibility Status	4.0%	8.7
Less than 3 Recorded Visits	19.75%	6.7
Alcohol Use	3.94%	6.1
Prior Pregnancy Hypertension	3.29%	6.0
Marijuana Use	4.57%	4.8
Age Greater than 34	5.97%	4.7
Ever Homeless	5.87%	4.0
Tobacco Use	15.03%	3.7
Mental Iliness	5.37%	2.7

Figure 3. Weighted Risk Score

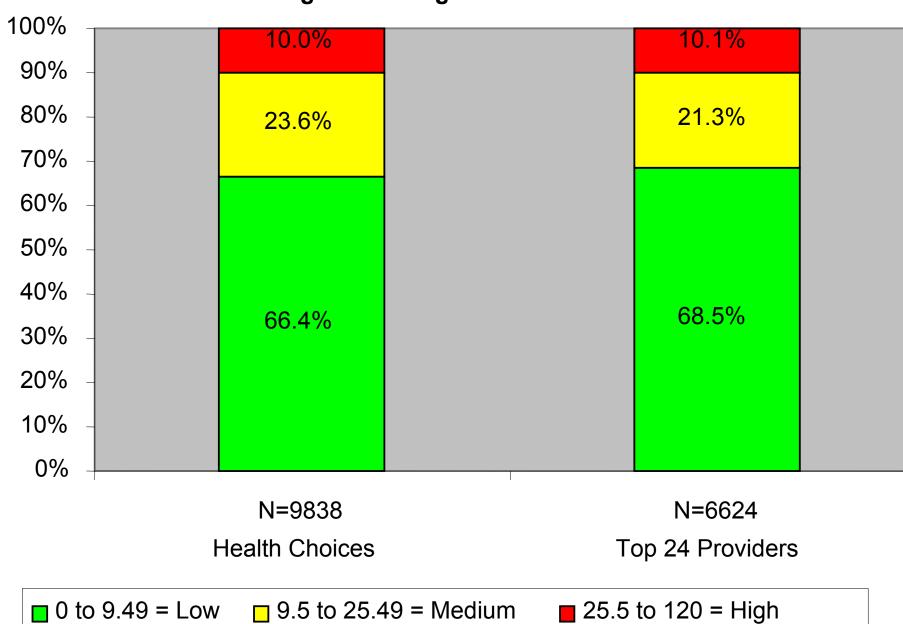


Figure 4: Weighted Risk Score for 2 Selected Individual Providers Compared to Health Choices Population

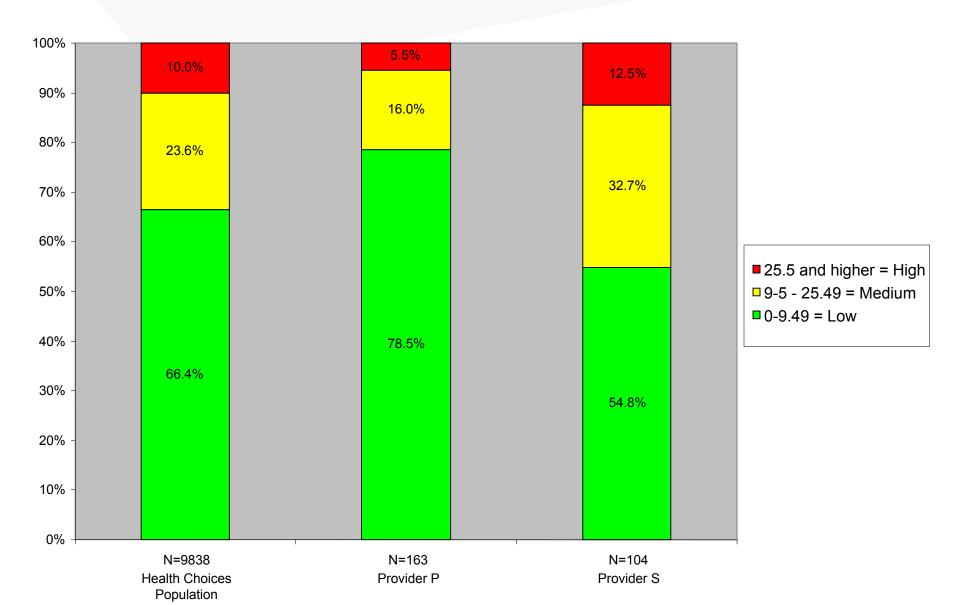


Figure 5. Mean Weighted Risk Scale: Top 24 Providers (Overall Mean = 9.49)

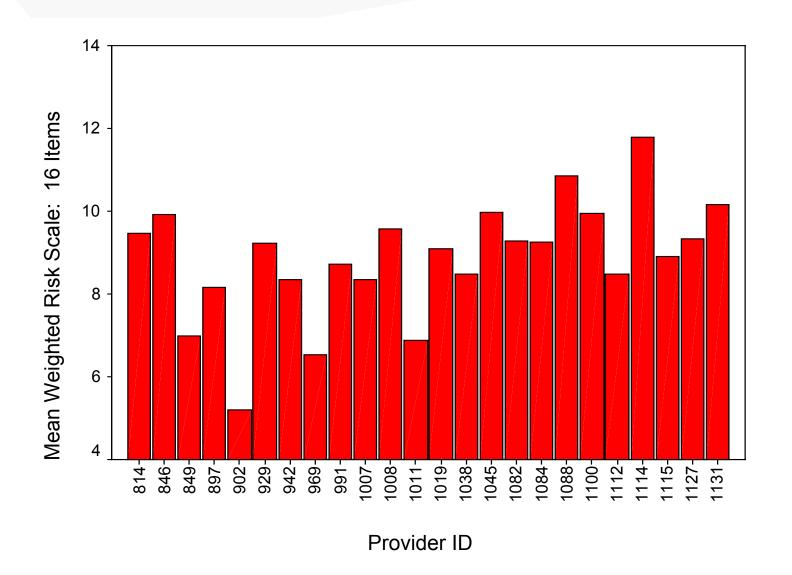


Figure 6a. Sample Provider Outcome Report: Low Medium, and High Risk Group Poor Birth Outcomes Compared To The Population

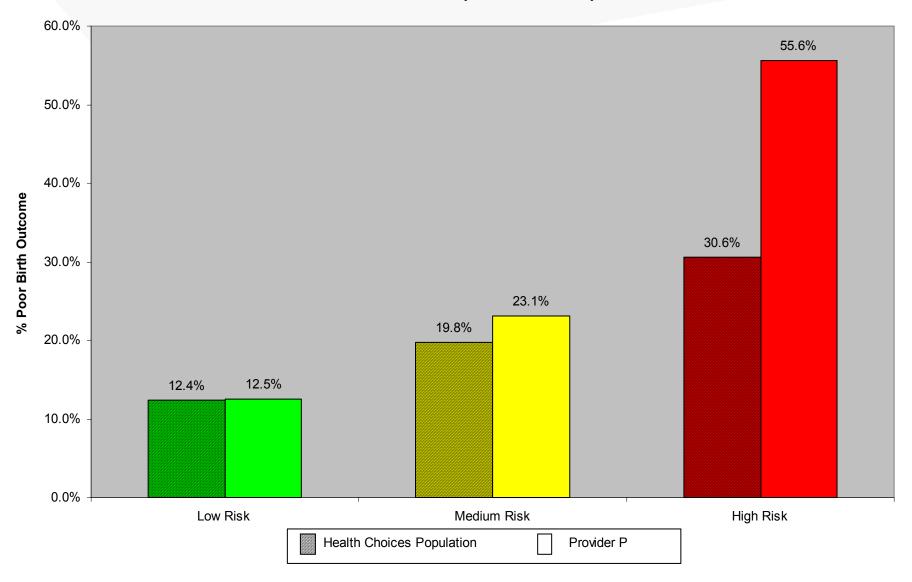


Figure 6b. Sample Provider Outcome Report: Low, Medium, and High Risk Group Poor Birth Outcomes Compared to The Health Choices Population

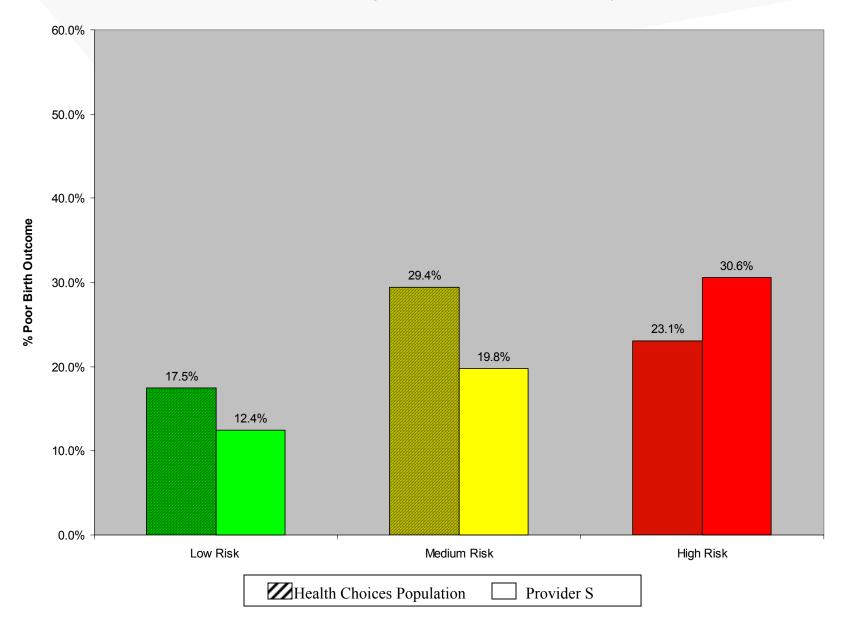
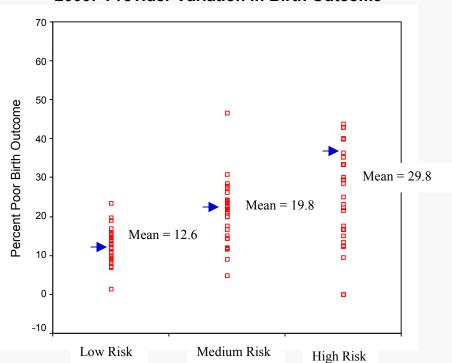


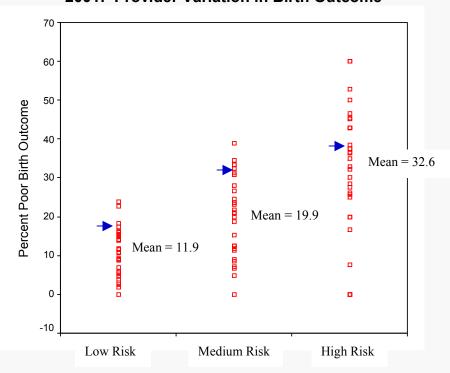
Figure 6. Provider Variation in Birth Outcome By Risk Group

(Largest 30 Providers)

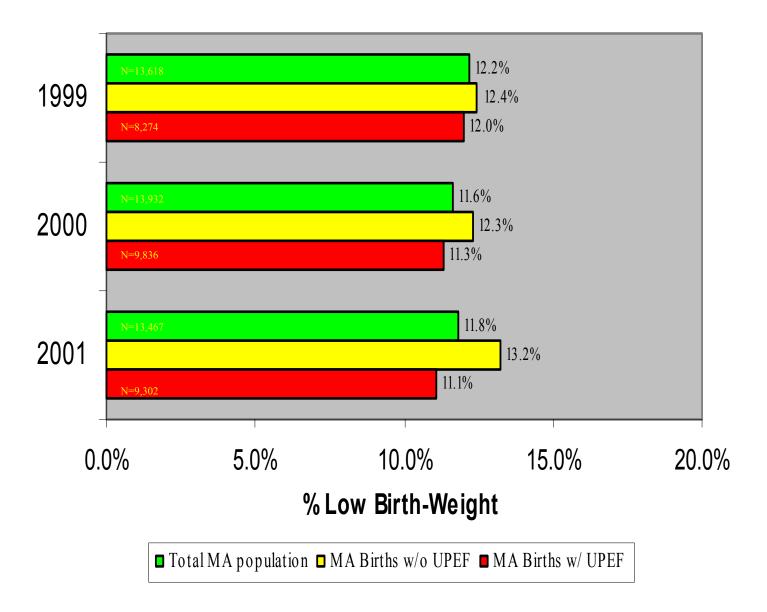




2001: Provider Variation in Birth Outcome

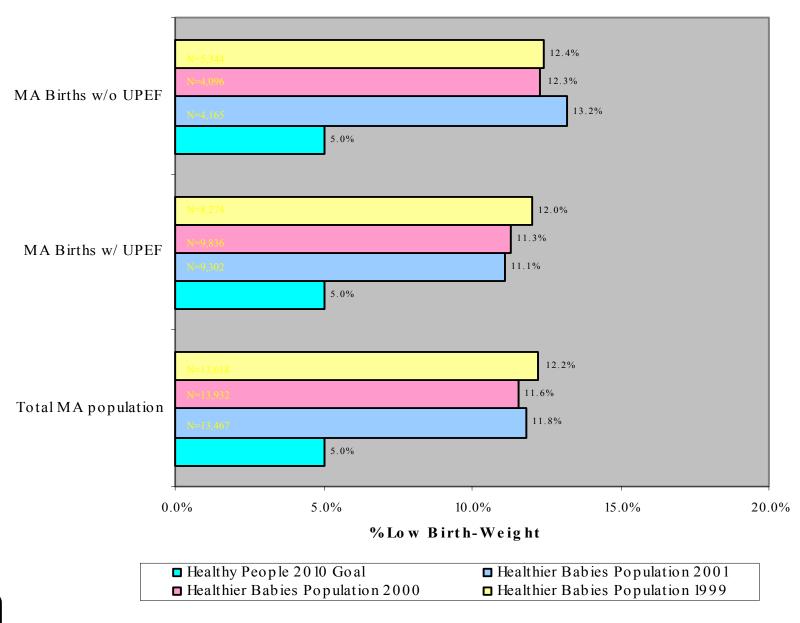


Low Birth-Weight in Healthier Babies Population



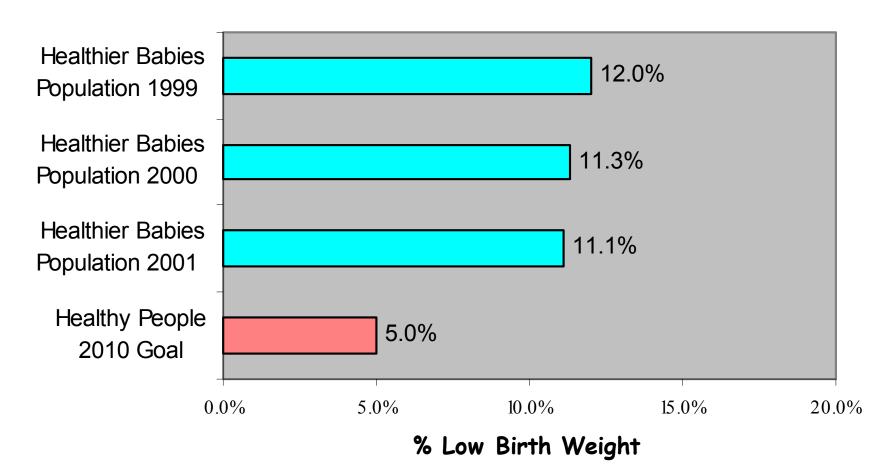


Low Birth-Weight Percentage in Healthier Babies Population





Low Birth Weight Percentage in Healthier Babies Population (MA births with at least one UPEF)





Key Constituents Healthier Babies, Healthier Futures, Inc.

- AmeriChoice of Pennsylvania
- Health Partners of Philadelphia
- Keystone-Mercy Health Plan
- Community Behavioral Health System
- Philadelphia Health Management Corp
- Philadelphia Department of Public Health
- Department of Public Welfare, Commonwealth of Pennsylvania