



# All-State Medicaid and CHIP Call August 15, 2023



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# Agenda

- Increasing Access, Quality, and Equity in Postpartum Care in Medicaid and CHIP:  
A Toolkit for State Medicaid and CHIP Agencies
- Open Mic Q and A



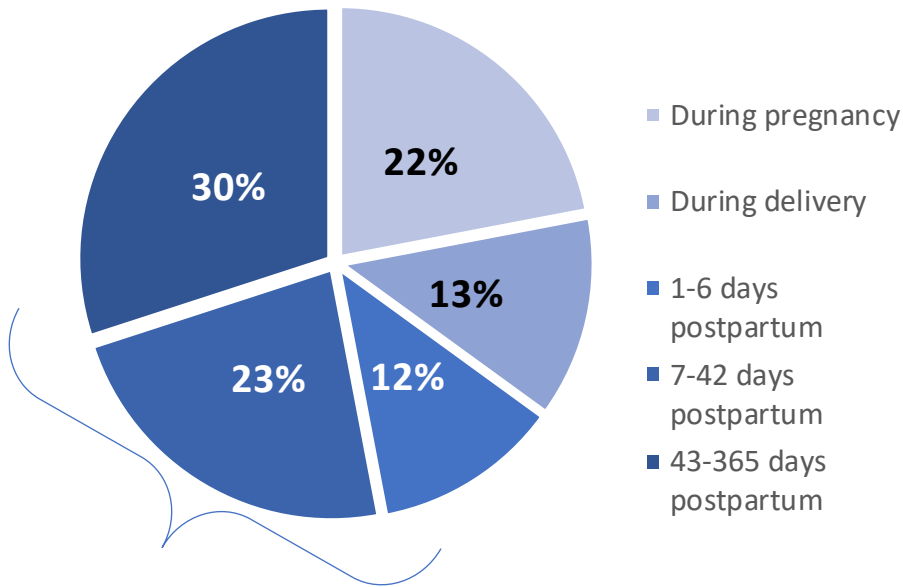
# Increasing Access, Quality, and Equity in Postpartum Care in Medicaid and CHIP: A Toolkit for State Medicaid and CHIP Agencies

*Division of Quality and Health  
Outcomes  
Children and Adults Health  
Programs Group  
August 2023*



# Why Focus on Postpartum Care?

Timing of pregnancy-related deaths in the U.S., 2017-2019



**65%** of deaths occurred in the postpartum period

•Source: Trost SL, Beauregard J, Njie F, et al. Pregnancy-Related Deaths: Data from Maternal Mortality Review Committees in 36 US States, 2017–2019. Atlanta, GA: Centers for Disease Control and Prevention, US Department of Health and Human Services; 2022. Available at: <https://www.cdc.gov/reproductivehealth/maternal-mortality/docs/pdf/Pregnancy-Related-Deaths-Data-MMRCs-2017-2019-H.pdf>

- Opportunity to improve maternal health outcomes and intervene on disparities by improving postpartum follow-up
- The leading causes of death after six weeks postpartum include treatable conditions such as mental health conditions, cardiac and coronary conditions, infections, blood clots, and cardiomyopathy
- Individuals who experience hypertension, gestational diabetes, and cardiac problems during pregnancy are also at an increased risk of being diagnosed with a chronic disease after the postpartum period

# Why Do Medicaid and Children's Health Insurance Program (CHIP) Need to Focus on Postpartum Care?

- Nearly two out of every three adult women enrolled in Medicaid are in their reproductive years (ages 19-44), and Medicaid currently finances about 41% of all births in the United States.
- 13% of postpartum individuals experienced depression, with higher rates among people of color and low-income individuals
- Average rate of postpartum care visits in 2021 for Medicaid health maintenance organization (HMO) plans was 76%, compared with 82% for commercial HMO plans
- 75% of people reported being asked about depression during postpartum visits in Louisiana, compared with 96% in Vermont
- Rates of postpartum follow-up among people with diabetes and/or hypertension ranged from 5.7% to 95.4%, with disparities linked to race, ethnicity, and lower levels of education

## Percentage of Births Covered by Medicaid, by State, 2021

Population: All births with Medicaid as principal payer for the delivery

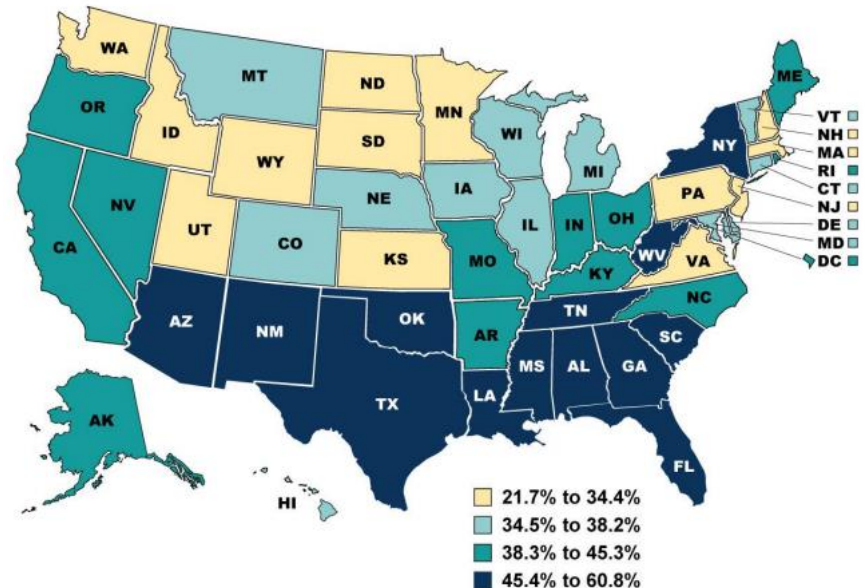


Image source:

<https://www.medicaid.gov/sites/default/files/2023-04/beneficiary-profile-2023.pdf>

# Best Practices in Postpartum Care

- **Postpartum care period beyond a single six-week postpartum check**
  - All individuals have contact with their health care providers within the first three weeks postpartum
  - An initial visit followed by individualized ongoing care including a comprehensive postpartum visit no later than 12 weeks after delivery and connection to ongoing primary and preventive care
  - Timely follow-up care and care transitions with providers for individuals with pregnancy complications or chronic medical conditions
- **Scope of care should include recovery from childbirth and assessment of :**
  - 1) Physical, social, and psychological well-being
  - 2) Infant care and feeding
  - 3) Reproductive health
  - 4) Sleep and fatigue
  - 5) Chronic disease management
  - 6) Health maintenance

Note: These recommendations are from the American College of Obstetricians and Gynecologists.

# How is CMS Supporting High-Quality Postpartum Care?

- Maternal Infant Health Initiative (MIHI):
  - Phase 1 (2014): Focused on improving the rate and quality of postpartum visits and increasing the use of effective methods of contraception
  - Phase 2 (2020): Focus on three recommended areas for improvement:
    - Decrease the rate of cesarean births in low-risk pregnancies
    - Increase the use and quality of postpartum care visits
    - Increase the use and quality of well-child visits for infants 0 to 15 months
- CMS Quality Improvement (QI) Technical Assistance Program:
  - Supports states and partners with data, information, and tools to improve care and outcomes for Medicaid and CHIP beneficiaries
  - Includes action-oriented affinity groups to help states develop QI projects, and implement, scale up, and spread effective initiatives

# States and Territories with Extended Postpartum Coverage

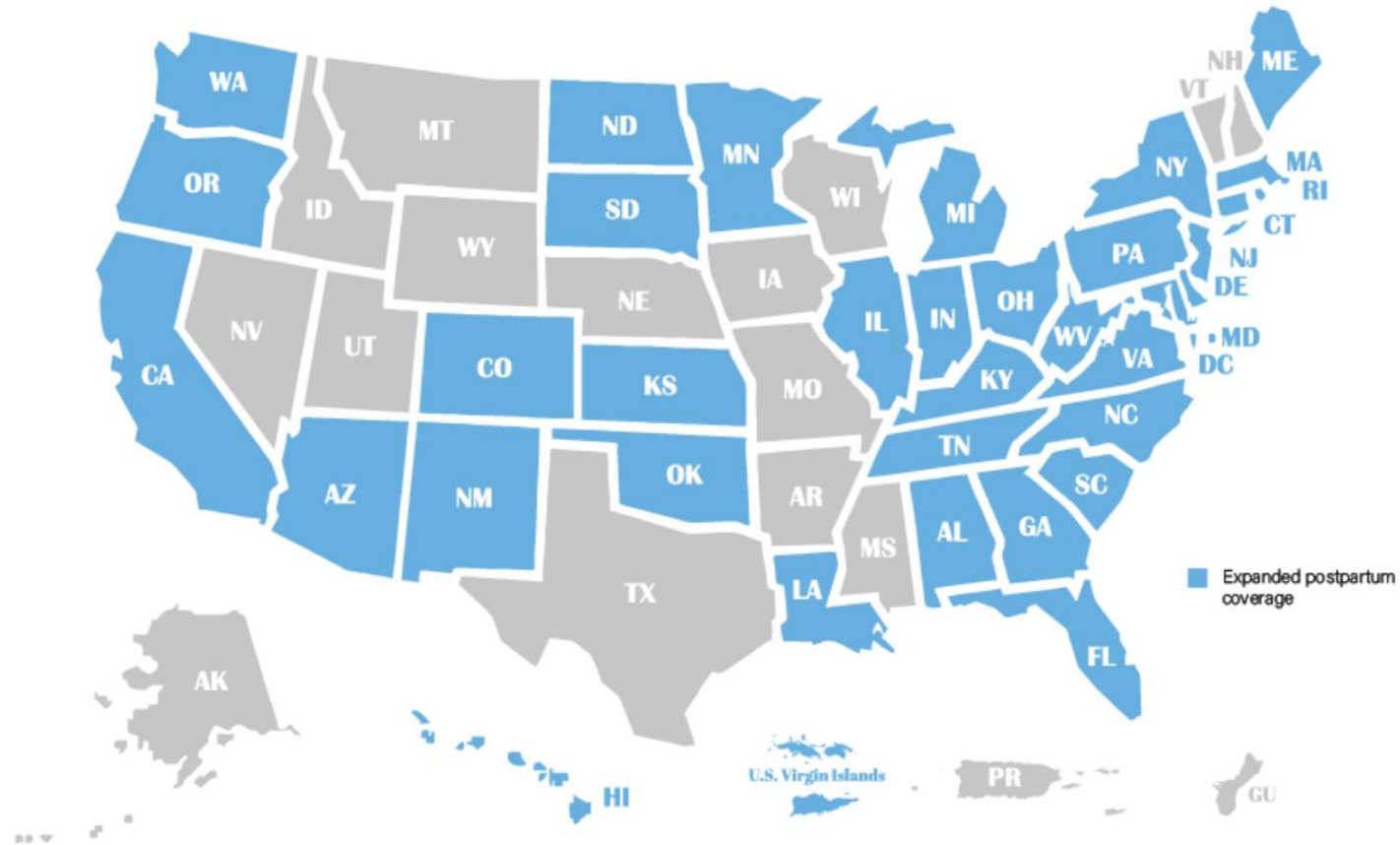


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<https://www.medicaid.gov/medicaid/quality-of-care/downloads/image-maternity-care-expansion.png>

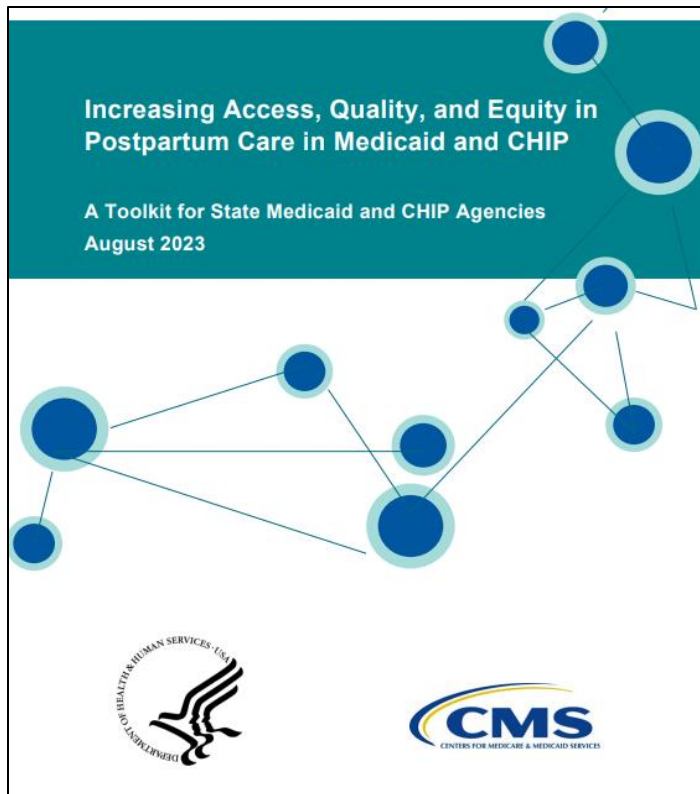


# Improving Postpartum Care Affinity Group

- April 2021 – April 2023
- 9 participating states
- Focused on the design and implementation of data-driven postpartum care QI projects
- This [webinar](#) spotlighted several state QI projects from the affinity group



# A Postpartum Care Toolkit for State Medicaid and CHIP Agencies



- Part of the [Cross-Cutting Initiative: CMS Maternity Care Action Plan](#)
- Catalogs policy, programmatic, and payment strategies to optimize postpartum care
- Outlines supporting federal authorities
- Describes evidence-based strategies
- Identifies measurement approaches
- Includes a *Postpartum Care Strategy Checklist* to assess gaps and opportunities

Available online: <https://www.medicaid.gov/medicaid/quality-of-care/downloads/ppc-for-state-and-medicaid-toolkit.pdf>

# Toolkit Organization

- Section I: How to Use the Medicaid and CHIP Postpartum Care Toolkit
  - Medicaid and CHIP Postpartum Care Strategy Checklist
- Section II: Strategies to Increase Access to Postpartum Care
- Section III: Strategies to Improve the Quality of Postpartum Care
- Section IV: Strategies to Address Disparities in Postpartum Care
- Section V: Strategies to Implement Quality Measurement and Improvement Approaches

# Postpartum Care Strategy Checklist Example

Strategies to Increase Access to Postpartum Care	
Promote Medicaid and CHIP coverage continuity	
<input type="checkbox"/>	Facilitate continuity of coverage for individuals following the end of their pregnancy.
<input type="checkbox"/>	Extend Medicaid and CHIP coverage beyond 60 days postpartum to 12 months.
Improve the capacity of the health care system to support postpartum beneficiary engagement with health care delivery teams	
Provide access to postpartum home visits and telehealth	
<input type="checkbox"/>	Include home visiting services for pregnant and postpartum individuals and case management services as a part of the home visit.
<input type="checkbox"/>	Identify home visiting pathway via Section 1915(b) and 1915(c) waivers or Section 1115 demonstrations.
<input type="checkbox"/>	Utilize telehealth and home monitoring services.
Increase access to transportation for postpartum care	
<input type="checkbox"/>	Provide easy access to non-emergency medical transportation for beneficiaries who need to get to and from medical visits but have no means of transportation.

← High-level strategy

← Policy option

← Detailed policy/  
change idea

# Strategies and Federal Authorities

## Improve the capacity of the health care system to support postpartum beneficiary engagement with health care teams

Effective strategies for supporting postpartum individuals' engagement in postpartum care and facilitating access to care teams include the following:

- Provide access to postpartum home visits and telehealth services
- Increase access to transportation for postpartum care

### Provide access to postpartum home visits and telehealth services

During prenatal visits or home visits conducted in the prenatal period, staff can work with individuals to increase awareness of the postpartum visit's importance and facilitate access to postpartum appointments. Some Medicaid and CHIP programs use nurse home visits to provide services to high-risk individuals, thus addressing some of the barriers to attending clinic- or hospital-based visits. For example, Michigan runs the Michigan Maternal Infant Health Program, which provides home visits for Medicaid beneficiaries. People who participated in this program were 1.5 times more likely to receive an appropriately timed postpartum care visit than those who did not participate (Box 5).<sup>26</sup>

← Strategy

## Box 6. Summary of federal guidance and state actions regarding the use of home visits to support postpartum care

### Federal guidance:

- [CMCS and HRSA Informational Bulletin, March 2, 2016, Coverage of Maternal, Infant, and Early Childhood Home Visiting Services.](#)

### State actions:

- Submit state plan to include home visiting services for pregnant and postpartum individuals.
- Include case management services as a component of home visiting.
- Explore using demonstrations to close gaps in funding, services, or populations served.

← Federal guidance

# Other Improving Postpartum Care Resources

## QI tools to begin and implement postpartum care QI projects

- Driver diagram with evidence/ experience-based change ideas
- Measurement strategy
- Highlights from the Improving Postpartum Care Affinity Group
- “Getting Started with QI” short video

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Home > Medicaid > Quality of Care > Improvement Initiatives > Maternal & Infant Health > Postpartum Care

### Improvement Initiatives

- Maternal & Infant Health
- Contraception
- Postpartum Care
- Low-Risk Cesarean Delivery
- Data and Measurement
- Resources
- Foster Care
- Well-Child Care
- Oral Health
- Asthma
- Reducing Obesity
- Behavioral Health
- Tobacco Cessation

## Postpartum Care

### Improving Postpartum Care

Postpartum care is an important part of the continuum of reproductive care across the life cycle. Care during the postpartum period involves not just a single postpartum visit but a series of visits beginning with the birthing event and transitioning to ongoing general healthcare. More than half of pregnancy-related deaths occur in the postpartum period, and 12 percent occur after six weeks postpartum. Medicaid and CHIP programs should engage in opportunities to improve postpartum care and work to eliminate preventable maternal mortality, severe maternal morbidity (SMM), and inequities. The Centers for Medicare & Medicaid Services (CMS) offers quality improvement (QI) technical assistance to help states increase access, quality, and equity of postpartum care in Medicaid and Children's Health Insurance Program (CHIP).

The technical assistance has two components:

1. [QI resources](#) to help state Medicaid and CHIP staff and their QI partners begin improving postpartum care for their beneficiaries
2. CMS's [Improving Postpartum Care learning collaborative](#), including approaches to improving postpartum care and state examples

For more information on these materials and other QI technical assistance, please email [MedicaidCHIPQI@cms.hhs.gov](mailto:MedicaidCHIPQI@cms.hhs.gov).

#### Postpartum Coverage Extension Resources

- [States that have Expanded Postpartum Coverage \(Map\)](#)
- [Improving Maternal Health and Extending Postpartum Coverage in Medicaid and CHIP \(December 2021 Webinar Slides\)](#)
- [Improving Maternal Health and Extending Postpartum Coverage in Medicaid and CHIP \(SHO 21-007\)](#)

Available at: [www.medicaid.gov/medicaid/quality-of-care/quality-improvement-initiatives/maternal-infant-health-care-quality/postpartum-care/index.html](https://www.medicaid.gov/medicaid/quality-of-care/quality-improvement-initiatives/maternal-infant-health-care-quality/postpartum-care/index.html)

# QI Technical Assistance Contact Information



To learn more or for QI technical assistance, contact CMS at [MedicaidCHIPQI@cms.hhs.gov](mailto:MedicaidCHIPQI@cms.hhs.gov)

# Questions