

# Improving Maternal Health – Building Strong Families in Texas



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We envision a Texas in which all children grow up to be healthy, safe, successful, and on a path to fulfill their promise.

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### Our Focus Areas:

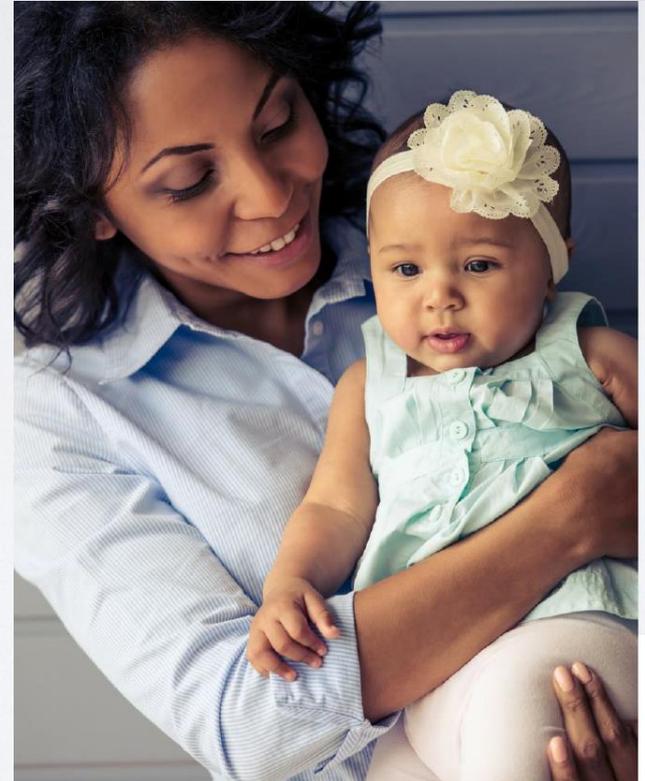
- Maternal and Child Health
- Mental Wellbeing
- Child Safety and Protection
- Early Childhood
- Youth Justice

# State policies that support maternal health will save women's lives and promote children's health and development

- Healthy babies and kids who succeed in school start with healthy pregnancies, healthy births, and healthy mothers
- While Texas has made some progress, still 1 in 10 Texas babies is born too early (premature) and 1 in 12 babies is born too small (low birth weight)
  - These rates have been higher than the national average for the last decade

# State policies that support maternal health will save lives and promote children's health and development

- Babies born too early or too small may face long term health issues like hearing loss, asthma, or disabilities that can affect their ability to be healthy and successful in school and beyond.
- Both preterm birth and low birth weight births can be prevented and influenced by the health of a woman before and during pregnancy.



# Maternal mortality and morbidity data are warning signs that we need stronger maternal health policies to support Texas moms and kids

- In recent years, hundreds of Texas women have died during pregnancy, childbirth, or the year after delivery
  - The Texas Task Force found that most of the maternal deaths it reviewed were preventable
  - Black mothers bear the greatest risk for maternal death or serious pregnancy-related complications compared to other Texas moms
- Maternal mortality is just the tip of the iceberg
  - Severe pregnancy complications (like hemorrhage, critically high blood pressure, and eclampsia) are much more common than maternal death and can be very damaging to mother and infant

# Texas Maternal Mortality & Morbidity Task Force

## September 2018 Report Findings

### **First, the Task Force did in-depth review of 89 cases of maternal death from 2012**

- Of cases reviewed, most maternal deaths were preventable
- Black women were at greatest risk of maternal death or serious complications
- Leading causes of pregnancy-related death in 2012 include: cardiovascular conditions; obstetric hemorrhage; infection/sepsis; and cardiomyopathy

### **Second, the Task Force looked at cases from 2012-2015**

- Most maternal deaths from 2012 – 2015 occurred more than 60 days postpartum
- Overdose was the leading cause of death for women during pregnancy and one year postpartum from 2012 – 2015

**Maternal mortality is just the tip of the iceberg** – serious complications much more common and can be damaging to mom and baby

# Top Maternal Health Risk Factors

Demographic groups at higher risk:

- Black women
- Age 40+
- Medicaid at time of delivery
- Urban counties
- Dallas/Fort Worth area; Texas Panhandle

Health factors increasing risk of maternal death:

- Late or no prenatal care
- Pre-pregnancy obesity, diabetes, high blood pressure
- Smoking during pregnancy

Source: Texas Dept. of State Health Services, Overview of Maternal Health Issues, Dr. Hellerstadt and Dr. Hollier (Mar 2018).

A close-up photograph of a newborn baby being held. The baby is wrapped in a white cloth, and their hands are visible, resting on a person's chest. The person's hands are gently supporting the baby. The background is dark, and the overall tone is soft and intimate.

# Steps State Leaders Can Take to Ensure More Mothers and Babies are Healthy

# (1) Ensure adequate funding for critical health programs aimed at improving maternal health

**Medicaid for Pregnant Women** – Coverage during pregnancy and up to 60 days postpartum for women with incomes up to 203% of Federal Poverty Level (FPL)

- Covers doctors visits, lab tests, labor & delivery, mental health & substance use

**CHIP Perinatal Program** – For pregnant women with income up to 207% FPL who are ineligible for Medicaid and do not have other insurance

- Covers 20 prenatal visits, 2 postpartum visits; does not cover behavioral health

**Healthy Texas Women and Family Planning Program** – Women's preventive care, but limited scope programs

**Legislature should fully fund Medicaid and CHIP – including projected caseload growth and medical cost growth; and continue funding for HTW and FPP**

## (2) Support Investments in DSHS Initiatives Designed to Improve Maternal Health

Support Texas Dept. of State Health Services (DSHS) Exceptional Item Request for \$7 million in 2020-21 State Budget

Exceptional Item included in House base budget, not Senate

### EI 3: Combat Maternal Mortality and Morbidity

- ◆ **Implement Maternal Safety Initiatives Statewide, \$2.7 M:** Promote and scale up implementation of new TexasAIM maternal safety bundles statewide.
- ◆ **Implement Care Coordination Pilot, \$1.0 M:** Create and implement training for Community Health Workers to identify women with high risk factors, provide education on preventive measures, and make appropriate referrals to care.
- ◆ **Develop and Train Providers on Use of Risk Assessment Tools, \$1.3 M:** Create and promote risk assessment tools for identification of maternal risk factors during routine prenatal care, such as chronic disease, obesity, and substance abuse.
- ◆ **Increase Public Awareness and Prevention Activities, \$2.0 M:** Enhance provider and community understanding about maternal risk factors and related preventive measures.

Method of Finance	FY 2020	FY 2021	Biennium
General Revenue	\$3.5 M	\$3.5 M	\$7.0 M
All Funds	\$3.5 M	\$3.5 M	\$7.0 M

FTEs	8
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Program Data	
Potential Birthing Hospital Partners for TexasAIM	238
Confirmed Maternal Deaths, 2012-2015	382

### (3) Improve maternal health through greater use of *TexasAIM* maternal safety bundles

- **Over 200 Texas hospitals already participate in *TexasAIM* and are adopting maternal health safety ‘bundles’ to reduce risks and save mom’s lives**
  - Each “bundle” provides instructions, checklists for health care staff to equip them to prepare for, identify, and prevent morbidity due to specific causes
  - Support funding for DSHS to implement AIM statewide
- **Encourage hospitals to incorporate AIM safety bundle designed around health disparities: *“Reduction of Peripartum Racial/Ethnic Disparities”***
  - This AIM bundle encourages staff-wide education on role of social determinants of health and implicit bias
  - Adding consistency in protocols & practices helps reduce bias

## (4) Promote health equity by utilizing more community health workers and *promotoras*

- Encourage hospitals, health centers, and health plans to utilize community health workers and *promotoras* to help more moms get needed medical care
- Support DSHS Exception Item request to implement a care coordination pilot with community health workers
  - Training for community health workers to identify women with high risk factors, provide education on prevention, and make referrals to care



## (5) Improve transportation options via Medicaid so more women can attend prenatal and postpartum medical appointments

- Transportation and child care are significant barriers to prenatal & postpartum care
- **Encourage more Medicaid health plans to offer and arrange ridesharing or taxi vouchers as Value-Added Service**
- **Allow mothers in Medicaid to travel with their children to medical appointments through the Medicaid non-emergency transportation benefit**  
(Right now, transportation vehicle is available to mom only)

# RECAP

## **Budget Recommendations**

1. Fully fund Medicaid and CHIP for caseload and cost growth; continue strong investment in Healthy Texas Women and FPP
2. Support DSHS Exceptional Item request to enhance Texas' maternal health initiatives

## **Policy Recommendations**

1. Auto-enroll young adults from Medicaid and CHIP to Healthy Texas Women to support smoother transitions between health programs
2. Increase access to health care before and after pregnancies
3. Improve transportation options via Medicaid so more moms can get to prenatal and postpartum medical appointments
4. Promote Texas AIM maternal health safety bundles statewide – including safety bundles designed to target health disparities
5. Promote health equity through greater use of community health workers



# THANK YOU!

For more information and to get involved:

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