
Maternal & Child Health

Key Policies to Improve Outcomes in Louisiana

March 28, 2024

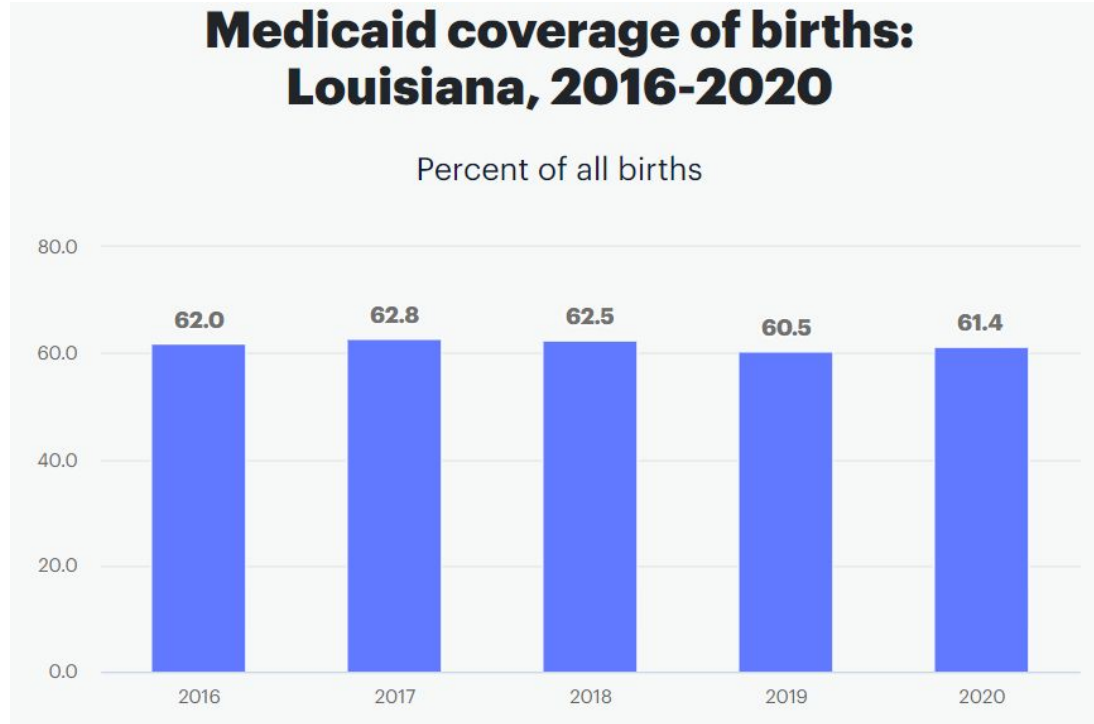
Partners



Agenda

1. Welcome and Overview - Frankie Robertson, The Amandla Group & Anne Jayes, Louisiana Public Health Institute
2. Policy Priorities
 1. **Senate Bill 190 by Sen. Gerald Boudreaux:** Increasing Medicaid Reimbursement rates- Frankie Robertson, The Amandla Group/Raegan Carter, LPCA
 2. **House Bill 702 by Rep. Matthew Willard & Senate Bill 142 by Sen. Regina Barrow:** Uniform Doula coverage- Frankie Robertson/ Dr. Victoria Williams, Birthmark Doulas
 3. **Senate Bill 135 by Sen. Royce Duplessis:** Medicaid Coverage for Pregnant Women- Jeanie Donovan, NOHD
 4. **Universally Available Home Visiting:** Susan Nelson, Louisiana Partnership for Women and Families
 5. Implementation follow up-Perinatal Mental Health (Act 188 & SR 136)
3. Feedback & Questions

You may notice we are going to talk a lot about Medicaid



Notes: Medicaid percentages indicate a woman was insured with Medicaid at the time of her birth.

Sources: National Center for Health statistics, final natality data 2018. Retrieved March 18, 2024, from www.marchofdimes.org/peristats.

SB 190 by Sen. Gerald Boudreaux

Increases the reimbursement rate for Medicaid providers for services that impact maternal health outcomes including: primary care, behavioral health, and rural health

SB 190 by Sen. Gerald Boudreaux

Community Health Workers Provide Critical Educational Services:

- Understanding and using medications
- Sexual health and STD prevention and screening
- Wellness, prevention, immunizations, nutrition, and other health promotion activities
- Elements of healthy lifestyles: weight, exercise, nutrition, recreation, managing stress, and others
- Alcohol and substance abuse and recovery
- Routine and preventive primary care, dental care, and well-child visits
- Breastfeeding and nutritional needs of mothers and infants
- Racial, ethnic, cultural, and socio-economic impacts on health and treatment outcomes
- Non-disease-specific patient education for prevention and health promotion
- Explaining and helping patients with accessing needed services
- Education and assistance to the patient on care referrals and care transitions and arrangements and appointments for services and visits

And more.....

MATERNAL VULNERABILITY IN LOUISIANA

Louisiana's mothers have a **very high vulnerability** to poor outcomes and are most vulnerable due to **overall physical health**

MVI by parish in Louisiana

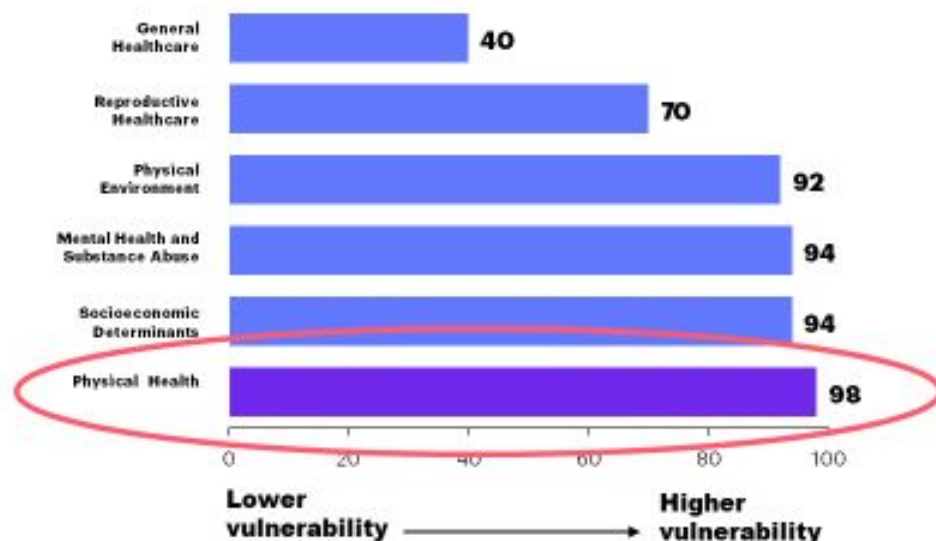


75% of parishes have high MVI



Factors related to maternal vulnerability

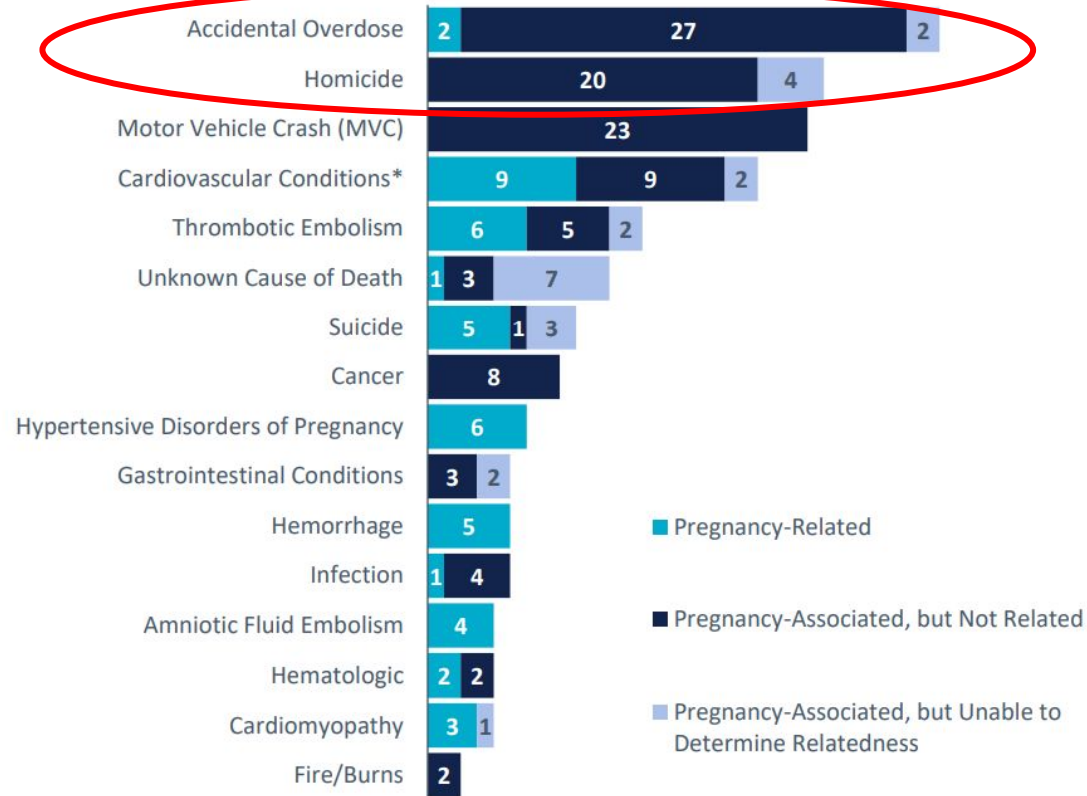
Higher scores indicate higher vulnerability



Notes: The Maternity Vulnerability Index (MVI) is a tool used to understand where birthing people in each state may be more likely to have poor outcomes, including preterm birth and maternal death, due to clinical risk factors and other social, contextual, and environmental factors. Visit <https://mvi.surgovertures.org/>

Source: Surgo Health, Maternal Vulnerability Index, 2023.

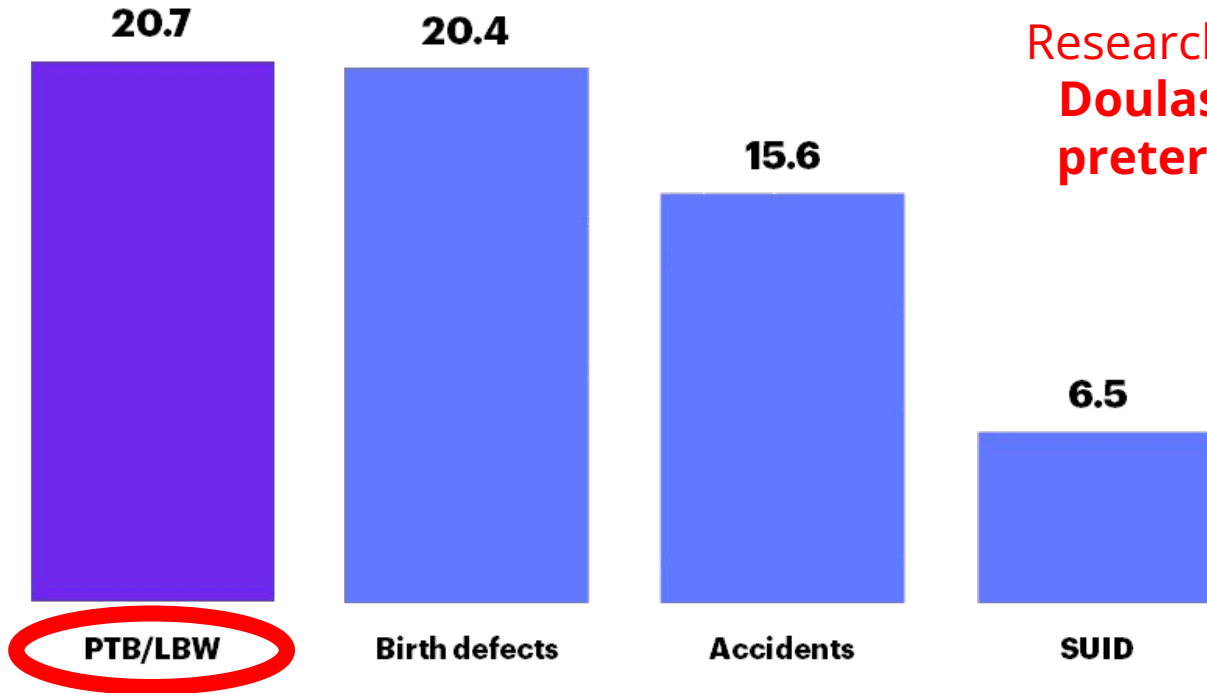
Pregnancy-Associated Deaths by Relatedness and Cause of Death as Determined by the Committee, 2017-2019



HB 702 by Rep. Willard + SB 142 by Sen. Barrow

Ensure minimum standards for coverage and minimum reimbursement rates for doulas across Medicaid insurance plans.

Leading causes of infant death in Louisiana, 2019-2021

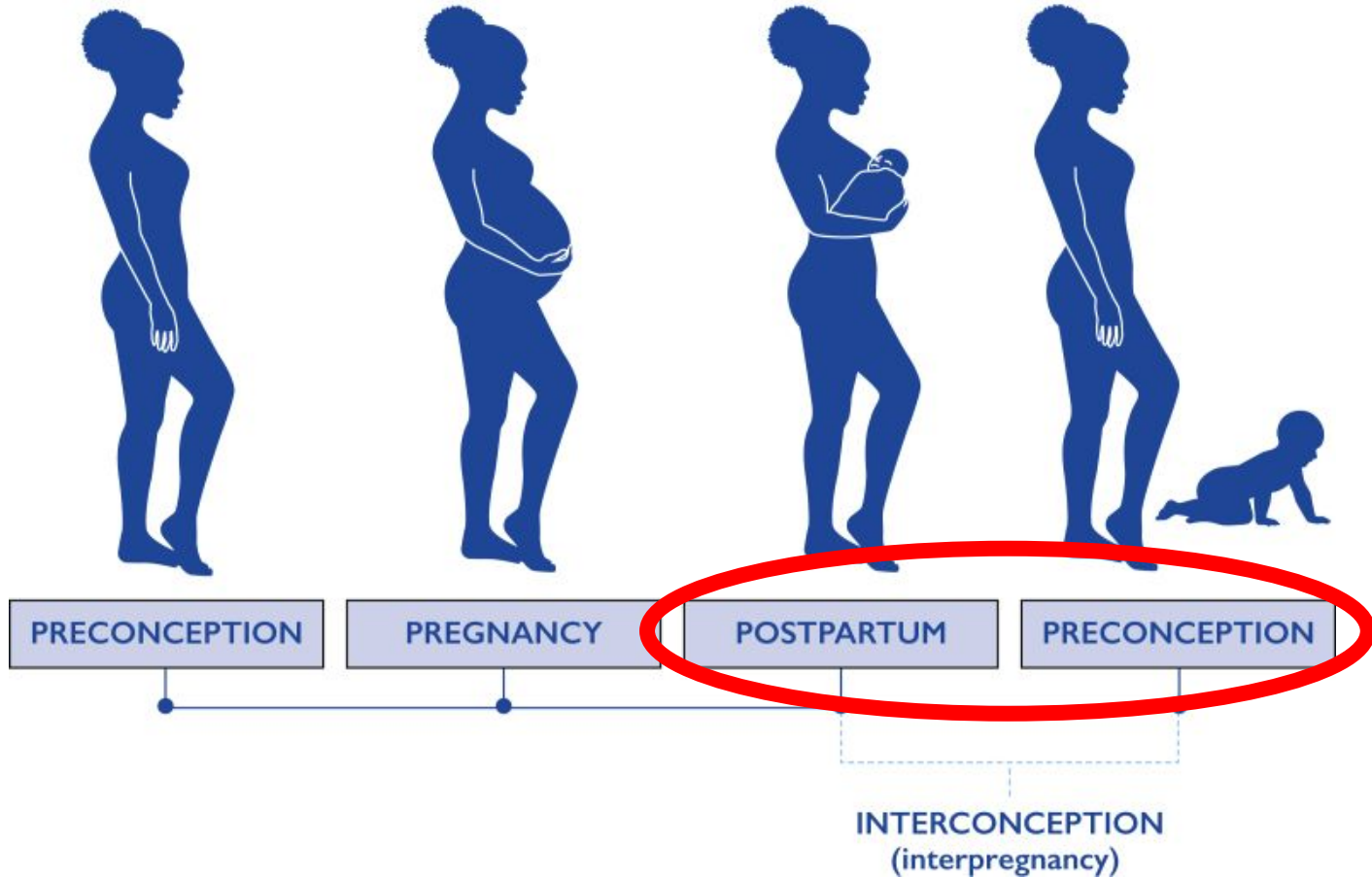


Research proved it:
Doulas prevent preterm births!

SB 135 by Sen. Duplessis

Amend the state's Medicaid pregnancy eligibility policy to ensure access to Louisiana's existing 12-month postpartum coverage for pregnant women earning up to 185% of the Federal Poverty Level.

PREGNANCY CONTINUUM AND INTERCONCEPTION CARE



And speaking of the importance of preterm birth prevention

- Louisiana's infant mortality rate is high because too many babies are born too soon or too small
- Infants born too soon or too small often share some characteristics:
 - ◆ Unmanaged chronic conditions *prior* to pregnancy
 - ◆ Prior preterm birth
 - ◆ Medicaid insurance
 - but it's not QUALITY OF CARE in hospitals... conditions related to **poverty** are the culprit

Universally Offered Newborn Nurse Home Visiting

- Two bills are in development to provide Medicaid and private insurance reimbursement mechanisms for newborn home visiting services.
- Based on recommendations of the recent [Louisiana Home Visiting Capacity Study](#) and building on success of the **Family Connects New Orleans pilot**, these bills would increase access to evidence-based home visiting services through providing a sustainable source of funding.
- Currently only **9.9% of Medicaid births** and **6.1% of all births** are served by a MIECHV program

Universally Offered Newborn Nurse Home Visiting

Family Connects Model Outcomes - 2 randomized control trials (2009 and 2014)

- Mothers more likely to complete 6-week postpartum health check (**LA Medicaid Quality Measure**)
- 50% lower rates of infant emergency medical care (ED visits and inpatient stays), sustained through 5th year of life; increased use of ED by mothers
- 44% lower rates of Child Protective Services investigations for suspected child abuse or neglect through the second year of life
- Mothers 30% less likely to experience possible postpartum depression or anxiety
- Community connections were 15% higher for Family Connects families, with more frequent use of community-based services at 6 months

