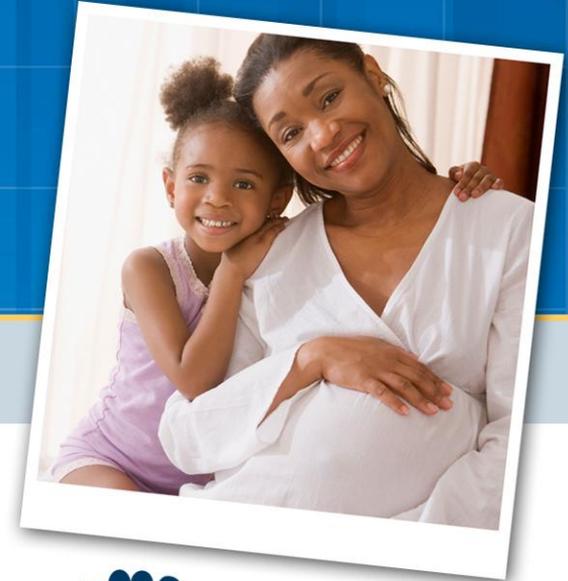
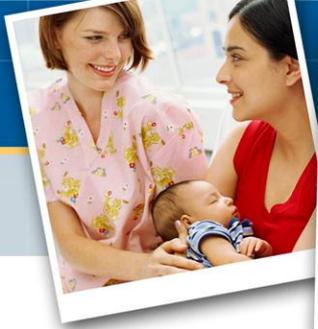


CENTENE[®] Corporation



Start Smart for Your Baby[®]

Ohio Collaborative to Prevent Infant Mortality
Care Coordination Committee – October 27, 2011
Brad Lucas, MD



Ohio Babies

In an average week in Ohio:

- **2,902 babies are born.**
- **382 babies are born preterm.**
- **254 babies are born low birthweight.**
- **22 babies die before reaching their first birthday.**

National Center for Health Statistics, final natality data.

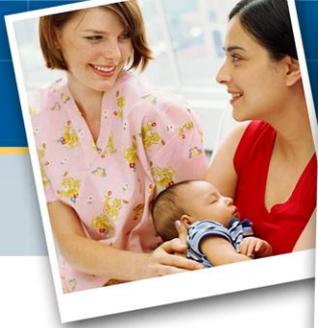
National Center for Health Statistics, period linked birth/infant death data.

Annual number of birth defects based on estimates from the Centers for Disease Control and Prevention.

National Newborn Screening and Genetics Resource Center.

Institute of Medicine. 2007. Preterm Birth: Causes, Consequences, and Prevention. National Academy Press, Washington, D.C. Published and unpublished analyses.

Retrieved October 19, 2010, from www.marchofdimes.com/peristats.



The Problems

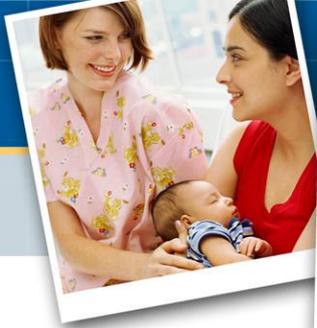
Barriers

- Significant barriers to health education
- Significant barriers to accessing healthcare providers and community organizations

Administrative

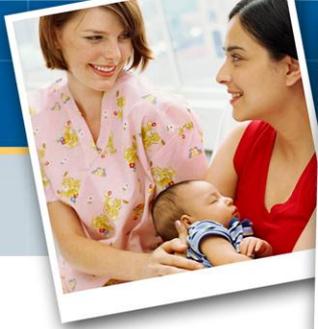
- Loss of Medicaid eligibility in the postpartum period
- Late enrollment in health plans
 - Late prenatal care
 - 21.5% of pregnant women in our health plans are not enrolled until the third trimester





Start Smart for your Baby[®]

- Centene-wide comprehensive pregnancy management program
 - Wellness and Disease management
 - Case management
 - Care coordination
- Supports educational and social needs
- Extends from pre-conception to the first 1-2 years of life of the child



Goals

- Case manage high-risk pregnancies
- Reduce adverse health care events
- Educate and empower members to take part in improving their health and the health of their unborn babies and newborns
- Improve birth outcomes such as:
 - Fewer low birth weight deliveries
 - Fewer neonatal ICU admissions
 - Fewer neonatal ICU days / 1000 births





Start Smart for Your Baby Tactics

- **Identifying High-risk Pregnant Members**
 - Notification of pregnancy form
- **Case Management**
 - High-risk pregnancies the key target of the program
 - Assign a case manager (nurse) to a member for coordination of care
- **Member Education**
 - Low-risk and high-risk members benefit from educational tools
 - Handbook, materials, journey book, MP3 players, website
- **Member Incentives**
 - CentAccount rewards card, gift cards, baby gifts
- **Post-Partum Outreach**
 - Counseling, pediatric care education, NICU kits, diapers
 - Postpartum depression needs, lactation program, family planning



Case Management Key to Improving Outcomes for High-risk Pregnancies

- Most often a case manager is a nurse or social worker assigned to help the member understand what is going on with her body during the pregnancy
 - Offers educational guidance about treatment, medicines, member questions
 - Keeps medical team informed about health problems or issues
 - Offers emotional support
 - Helps find resources



www.startsmartforyourbaby.com



Education is a Big Part of Start Smart

Are You Pregnant?
¿Está embarazada?

We at Buckeye Community Health Plan want to help you have a healthy baby!
If you are pregnant, call us and we'll send you a Start Smart for Your Baby gift.

1-866-246-4358
TTY 1-800-750-0750

¡Nosotras en Buckeye Community Health Plan queremos ayudarte para que tengas un bebé saludable!
Si está embarazada, llámonos y le enviaremos un regalo de "Start Smart for Your Baby".

Start Smart
for Your Baby

Buckeye
Community Health Plan

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Start Smart
for Your Baby

Your Pregnancy Guide

Dear Member,

Congratulations on the birth of your new baby and welcome to the Start Smart for your Baby[®] program! Buckeye Community Health Plan wants you and your baby to be happy and healthy. The materials in this folder are meant to help you with that.

We have included a booklet which will teach you about newborn and infant care. If you need this booklet provided in Spanish, please contact us at the number provided below. There are also some brochures which explain many of the services and resources available to you and your child. Start with the Newborn Journey Book. It is a great little booklet to carry with you when you take your baby to the doctor since there are places in it to take notes. Most of all there are coupons in the book which you can get signed and send in to receive up to \$45 in Wal-Mart gift cards just for getting your baby to all their well-child check-ups.

This is our way of saying thank you for taking care of yourself and your baby. We want you both to grow healthy and stay healthy![™] If you have any questions feel free to call us at 1-866-246-4358 TTY 1-800-750-0750. Enjoy your wonderful new addition to the family!!!

Sincerely,
Buckeye Community Health Plan

Start Smart
for Your Baby

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NEWBORN JOURNEY BOOK

Start Smart
for Your Baby

Grow healthy. Stay healthy.™

Buckeye
Community Health Plan

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Start Smart for Your Baby - Website Content Update

Home | Publications | Blog | About Us | Resources | Contact Us

LATEST PUBLICATIONS

- What helps Morning Sickness?
- What helps Morning Sickness?
- What helps Morning Sickness?

What helps Morning Sickness?
Many are pregnant and looking for ways around the morning sickness that comes with pregnancy. There are many ways to help you feel better and stay healthy during your pregnancy. This is our way of saying thank you for taking care of yourself and your baby. We want you both to grow healthy and stay healthy![™] If you have any questions feel free to call us at 1-866-246-4358 TTY 1-800-750-0750. Enjoy your wonderful new addition to the family!!!

Start Smart
for Your Baby

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Member Connections Phones Provided to Qualified Members

- Helps us keep in touch with members who are difficult to reach
- Phone is pre-programmed
 - Doctor's phone number
 - Case manager's phone number
 - NurseWise (24-hour tele-nurse)
 - Transportation
 - Health plan
 - Domestic abuse hotline
- Newer smart phones have additional features
 - Podcasts
 - Guides
 - Web links



Member Connections smart phone



Notification of Pregnancy

- Identifies pregnant members as early in pregnancy as possible
- Provider version and member version
- Assigns proprietary risk score
- Case management referral of high-risk members

Notification of Pregnancy Form

The earliest possible completion of this form allows the Start Smart for your Baby[®] program to best use our resources and services to help you and your patient achieve a healthy pregnancy outcome. **Please complete clearly in black ink and fax to: 866-681-5125.**

BRIDGEWAY[®]
HEALTH SOLUTIONS

Start Smart[™]
for Your Baby

Member Info

First Name _____ Last Name _____ Mailing Address _____ Member ID# _____
 City _____ State _____ Zip _____
 Home Phone # _____ Email Address _____ ID# _____ Policy Holder _____
 Cell Phone # _____ EDC _____ Delivery Hospital _____
 Other insurance _____
 Date of 1st visit _____
 Gravida _____ Para _____
 SAB _____ EAB _____
 Mother enrolled in WIC: Yes No

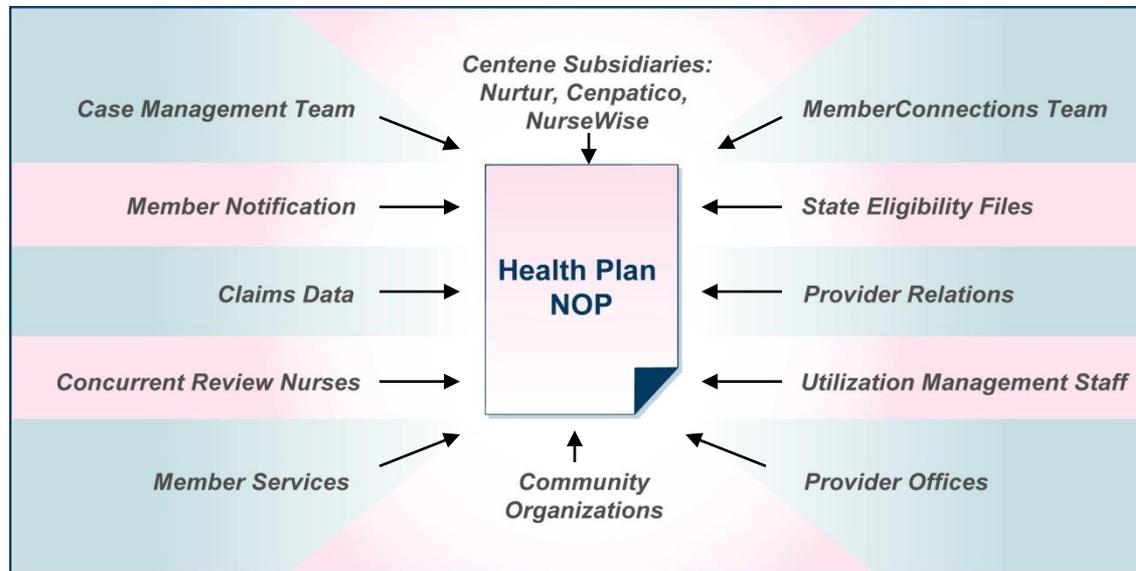
Pregnancy risk assessment (mark all that apply)

Previous Preterm Delivery (<37 weeks)
 Previous second trimester loss (14-24 weeks)
 or Stillborn/week _____
 Previous Cesarean Section
 Existing Medical Condition Hypertension Sickle cell

Personal history of clotting disorder or family history of thrombotic event
 Mental illness
 Domestic Violence (history or current)
 Smoker
 Alcohol abuse
 Drug abuse
 17 years or younger
 35 years or older
 Other significant risk factor
 No known risk factors

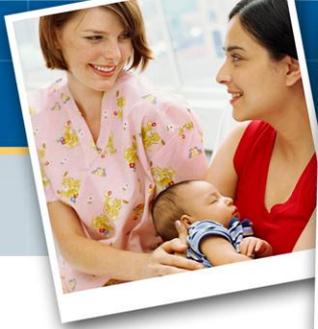


“It’s everyone’s responsibility to identify pregnant members”

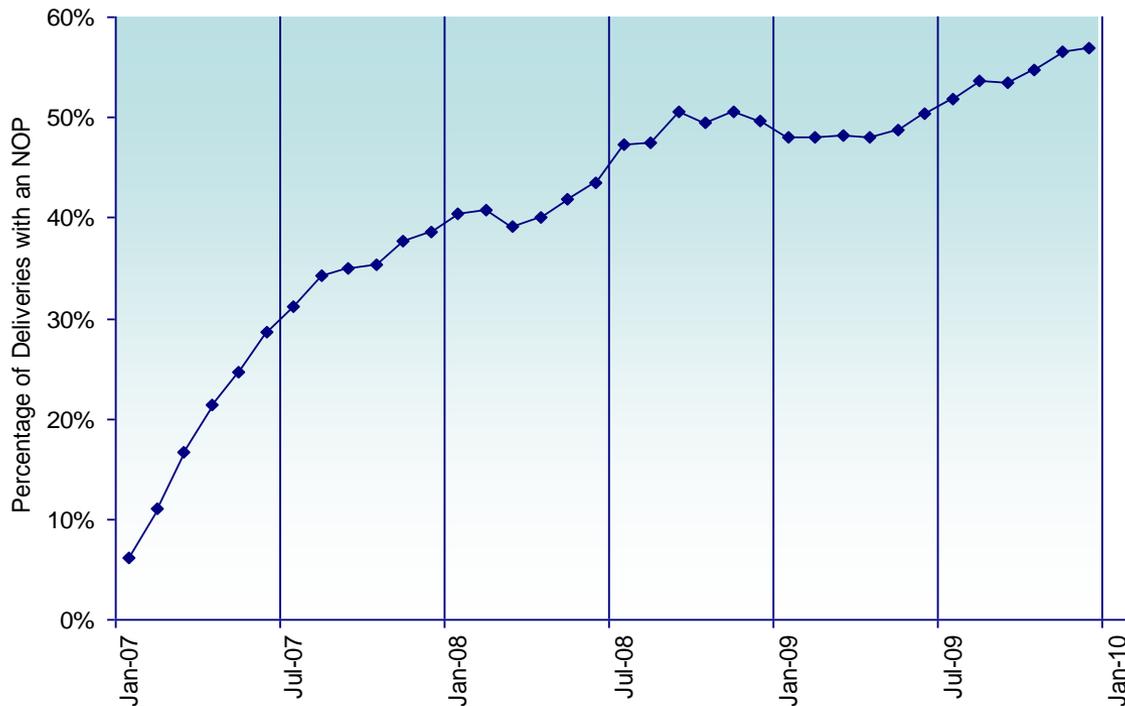


Maximize “Notification of Pregnancy” Intake

- Standardized form
- Multiple intake sources
- Education program
 - Providers
 - Employees
 - Members
- Incentives
 - Providers
 - Members
 - Employees

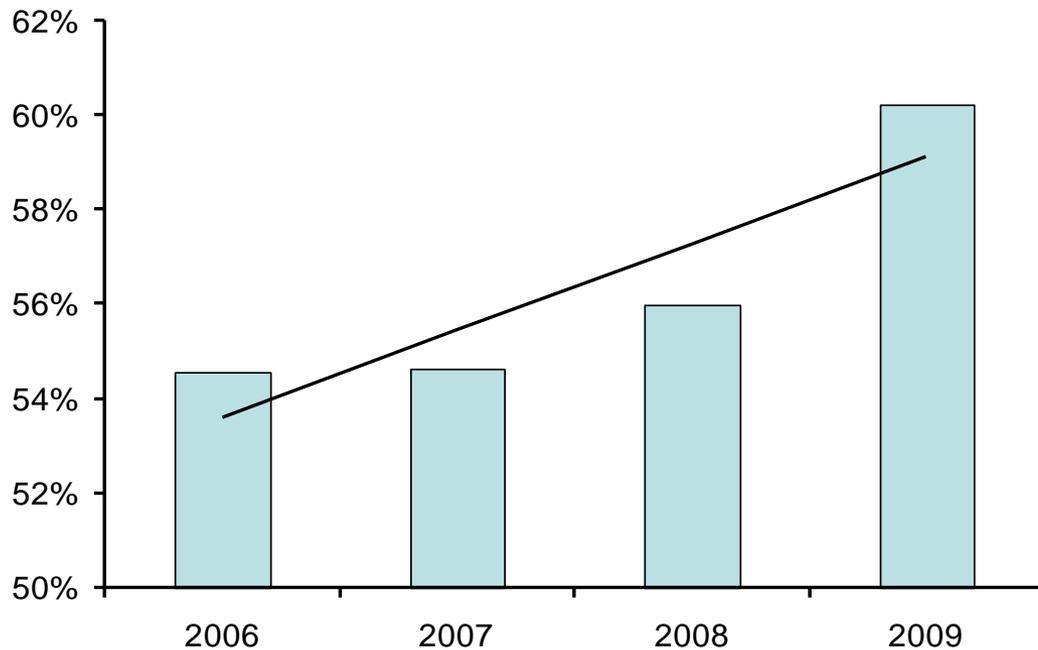


More Pregnancies are Participating in the Program





Pregnant Women are Going to Their Doctors More Frequently

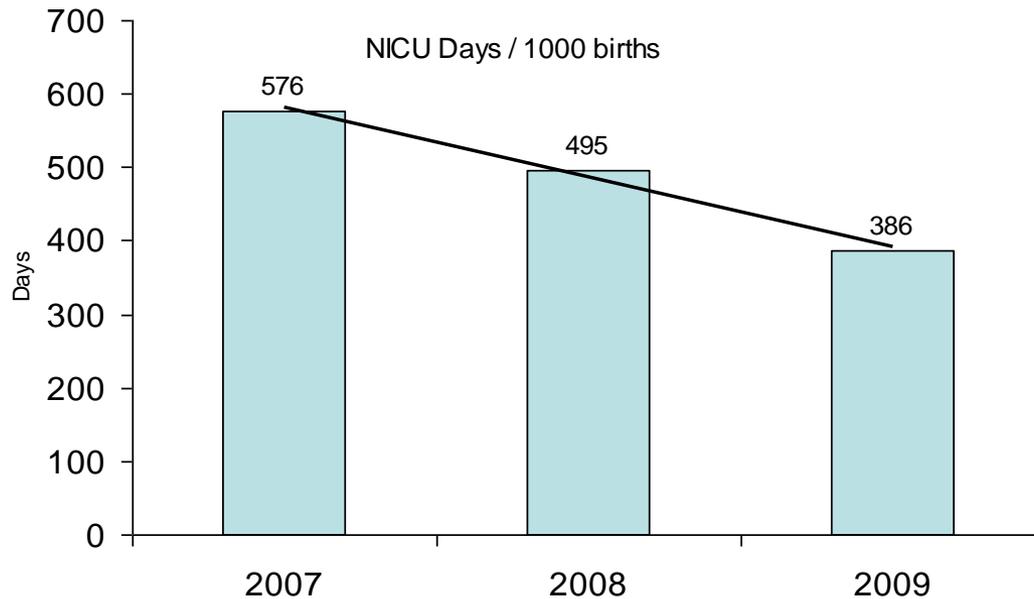


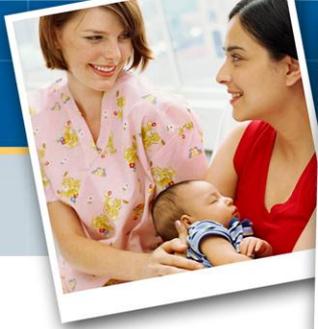
Source: all participating plans

HEDIS definition: Percentage of pregnancies who went to 81% or more of their required prenatal visits (administrative rates)

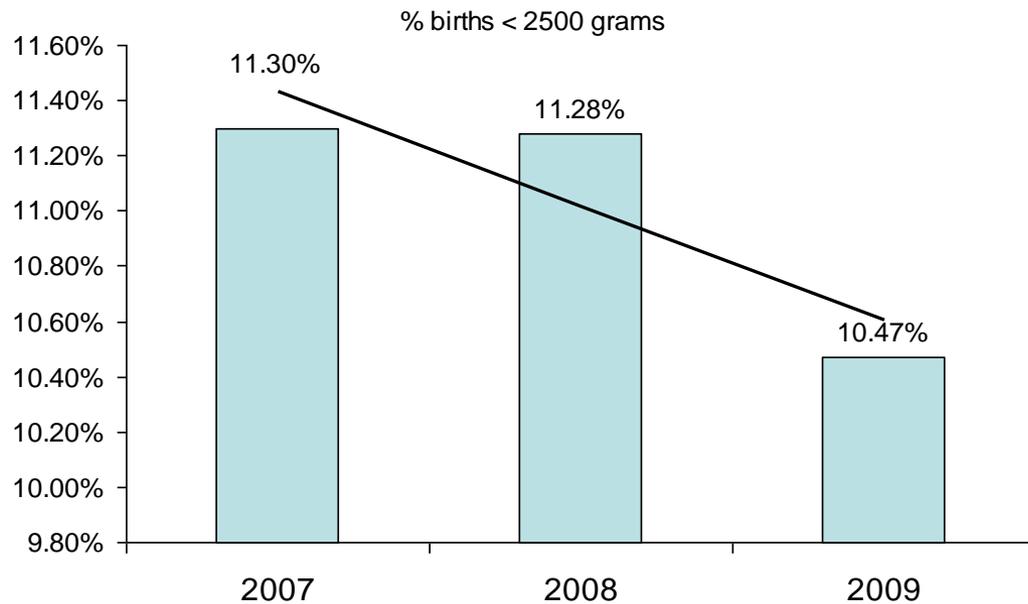


The Number of Days in NICU Is Dropping





The Number of Low Birth Weight Deliveries Is Decreasing





Pregnancy Outcomes of Managed Medicaid Members Prescribed Home Administration of 17P

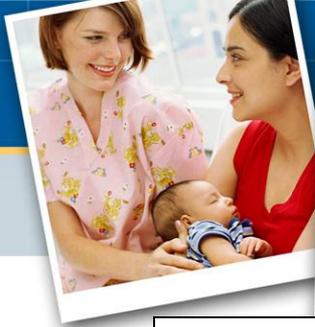
- Examined patient adherence to treatment guidelines and rates of recurrent spontaneous preterm birth in managed Medicaid population prescribed 17P
- Retrospective observational study of data prospectively collected between 7/2004 and 5/2010
- 790 patients with prior SPTD provided care in 6 states through one of Centene's managed Medicaid health plans
- **Primary outcome: Adherence with treatment guidelines**
 - Initiation of treatment (16-20.9 w vs. ≥ 21 w)
 - Completion of recommended treatment
- **Secondary outcome: Rates of recurrent SPTD**
 - <37 weeks
 - <35 weeks
 - <32 weeks



Comparison to Previously Published Rates of Recurrent Preterm Delivery

	Managed Medicaid n=790	Rebarber et al. 17P in Clinical Practice n = 3139	NICHD Meis 17P n = 306
Spontaneous PTD <37 w	28.2%	29.8%	29.4%
PTD <35 w	14.7%	15.5%	20.6%
PTD <32 w	6.5%	7.0%	11.4%

*Rebarber A, et al. J Matern Fetal Neonatal Med. Oct 2010.
Meis P, et al. N Engl J Med. June 2003.*



Notification of Pregnancy as a Means for Improving Birth Outcomes in a Medicaid Population

Authors: Brad Lucas, MD, FACOG, MBA; Mary Mason, MD, MBA; Amy Poole-Yeager, MD; Kara House, MBA; Rebecca Strubberg

Study Objectives

To determine if birth outcomes are positively impacted by the health plan receiving a **Notification of Pregnancy (NOP)** from the members' physician or medical office. Lack of social, behavioral, and educational resources may lead to poor healthcare decisions among Medicaid patients. When a health plan is alerted about pregnant members through NOPs, it can devote OB case management and educational resources to the pregnant patients. It can also offer targeted programs for higher risk medical problems.

Data Collection Methods

Timeframe: 2008

Sources: Claims
NOP database

Denominators:

- Birth events with a corresponding NOP
- Birth events without a corresponding NOP

Numerators:

- Babies delivered under 2500g
- Babies delivered under 1500g
- Babies delivered under 1000g
- Babies delivered and deemed seriously ill at birth

Results

24,469 deliveries without the aid of the early Notification of Pregnancy were studied. Of these, 11.75% of babies were born with a birth weight under 2500g; 2.07% were born under 1500g; 0.85% were born under 1000g. Additionally, 10.86% of these babies were deemed seriously ill at birth.

Comparatively, the 34,558 deliveries that did utilize a Notification of Pregnancy realized much better percentages. Deliveries of babies with a birth weight under 2500g were 10.71% — a 9.7% difference. Birth weights under 1500g were 1.52% and deliveries under 1000g were 0.59% (a 36.2% and 44.1% difference, respectively). Similarly, the percentage deemed seriously ill at birth declined to 9.67% — a 12.3% difference.

Conclusion

The Notification of Pregnancy process enables a health plan to statistically and significantly improve birth outcomes through proactive support and education for pregnant members.

Results demonstrate **statistically significant improvement across all categories** when comparing birth outcomes in patients with NOPs to those without.

deemed seriously ill at birth

12 percent fewer
with use of NOP

low birth weight: **under 2500g**

9.7 percent fewer
with use of NOP

very low birth weight: **under 1500g**

36 percent fewer
with use of NOP

extremely low birth weight: **under 1000g**

44 percent fewer
with use of NOP



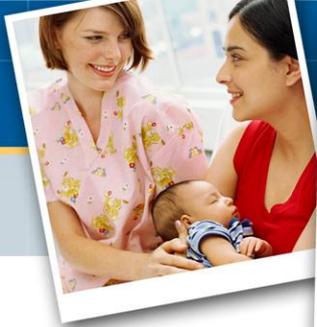
Effects of a Pregnancy Management Program On Birth Outcomes in Managed Medicaid

- **Managed Care, April 2011. Mary Mason, MD; Brad Lucas, MD; Amy Poole-Yeager, MD et al.**
- **Retrospective propensity-adjusted cohort comparison**
- **Low-birth-weight outcome was reduced when women participated in a managed maternity program, compared with nonparticipants**
- **Results of our study support strongly reduction for <1500 g and <1000 g events for the program participants with 95% statistical credibility and reduction in <2500 g events for the participants with 90% statistical credibility.**



Effects of a Pregnancy Management Program On Birth Outcomes in Managed Medicaid

- The reduction likelihood ranges from a low of 7.9% for <2500 g births for NOP participants, to higher reductions at 20.0% for <1500 g births and 31.2% for <1000 g outcome for program participants.
- The program actively encourages early notification of pregnancy and increased awareness of the program amongst members and network physicians.
- Another important finding is that the results are not driven by variations in race or regions.



Start Smart for Your Baby[®]

-Recognized Success

- 2009 NCQA Best Practice
- 2009 Medicaid Plans of America Best Practices
- 2009 Case in Point Magazine Platinum Award Honorable Mention
- 2010 Case in Point Magazine Platinum Award Winner- Buckeye Community Health Plan 17P Case Management Program
- 2010 URAC Best Practices in Health Care Consumer Protection and Empowerment Awards- Platinum Award