



MOMobile Safe Start: A Community Response to Maternal Mortality

The Wilson Center

November 19, 2015



Maternity Care Coalition's Mission:

To improve maternal and child health and wellbeing through the collaborative efforts of individuals, families, providers and communities.

City of Brotherly & Sisterly LOVE

- ☐ Highest poverty rate of 10 largest cities:
- √ 39% of children live below poverty
- ✓ Two-thirds of births are Medicaid



- Alarming racial disparities:
 - ✓ Black infant mortality rate 13.4 versus 7.7 White
 - ✓ Black maternal mortality rate 4 times higher than White rate
 - ✓ Maternal mortality rate 50% higher than U.S. average



MATERNAL MORTALITY in PHILADELPHIA

2010-2012

Maternal Mortality Report

Of the 55 deaths reviewed

24 deaths were "non-medical"

- √ 15 due to accidents (drugs, motor vehicle, fire)
- √ 6 homicides
- ✓ 2 suicides
- ✓ 1 undetermined

31 deaths due to natural causes

- √ 19 were related to pregnancy or childbirth
- √ 1 was determined to be preventable

Maternal Mortality Report

Women who died were disproportionately:

- ✓ Black (overall 56%; and 74% of pregnancy related)
- ✓ Hispanic
- ✓ Lower socio-economic status
- ✓ Overweight or obese
- ✓ HIV +

Pregnancy related mortality rate: **27.4 per 100,000 live births**

JESSICA'S STORY

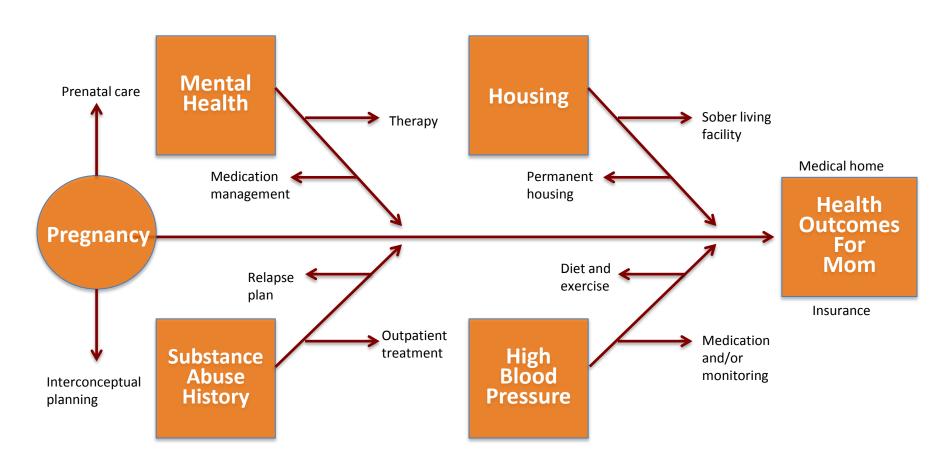


- ✓ Age 42, no prenatal care ? months pregnant
- ✓ Six children; none live with her
- ✓ Care divided among 3 providers, in different neighborhoods and don't regularly communicate
- ✓ No stable housing

- ✓ History of trauma, foster care and actively using alcohol and drugs since 13
- ✓ Mental health diagnosis
- ✓ Hypertension
- ✓ Early stages of recovery

Maternity Care Coalition

Jessica: CHALLENGES & OPPORTUNITIES FOR CHANGE



Safe Start MOMobile

VISION

A consumer friendly, culturally responsive, seamless and transparent system of care and support for high risk pregnant women that ensures safe pregnancy outcomes and lifelong health.



Safe Start MODEL

- ✓ Community based
 - Community health workers
 - Cultural competence
- ✓ Address barriers individual and systemic
- ✓ Patient navigation
- ✓ Linkage to resources
- ✓ Education and support
- ✓ Patient Activation model
- Clinical partnership to ensure coordination of care



Hospital of University of Pennsylvania Helen O. Dickens Center for Women's Health

IDEAL PARTNER

- ✓ Busy urban clinic with active high risk population
- √ 95% of patients on Medicaid
- ✓ Co-located with behavioral health (Penn Center for Women's Behavioral Wellness)
- ✓ Struggle with high no-show rates, overutilization of ER services, lack of followthrough

- ✓ Acknowledge the impact of social determinants on health outcomes
- ✓ Believe in community health worker model
- ✓ Committed to team approach
- ✓ Expertise in training community health workers/patient navigators for hospital settings
- ✓ Potential for academic/community research partnership – to demonstrate and test health outcomes and cost effectiveness

Keystone First Community Behavioral

Critical PARTNERS

Keystone First

- ✓ Pennsylvania's largest Medicaid managed health care plan
- ✓ Founded by Sisters of Mercy
- ✓ Long term partner of MCC
- ✓ Struggle with reaching pregnant women and keeping them connected to care
- ✓ Leadership interested in improving coordination of care

Community Behavioral Health

- Provides mental health and substance abuse services for Philadelphia Medicaid recipients
- ✓ Authorizes payment
- ✓ Believes in need for cross-system collaboration
- ✓ Leadership interested in quality improvement and innovation

Safe Start: Project Management

Project Management Team MCC, HUP, Keystone, CBH Key Leaders

Intervention Team	Case Coordination	Information Sharing
MCC Advocates	PRN – meetings with social work and nurse care	Key Leader meetings
HUP Clinicians and Care Coordinator	coordinators	Case conferencing
HUP Social Worker	Weekly HUP care review meetings	Ongoing collaboration
and Dietician	Biweekly Keystone First case	
Keystone First Case Manager	review	
Wallager	Monthly operations meeting	

Safe Start

COMMUNITY ENGAGEMENT & POLICY

- ✓ Educate community about maternal mortality and morbidity
- ✓ Engage Managed Care Organizations and relevant government agencies to work towards systems integration
- ✓ Work towards reimbursement for Doulas, Community Health Workers and home based behavioral health

Safe Start

VISION FOR SUCCESS

Knowledgeable and empowered women and community

Integrated system of care

- ✓ Improved health outcomes
- ✓ Reduction in cost
- ✓ Timely and appropriate support for women

Sustainability

- ✓ Trained and skilled providers and partners
- ✓ Research driven evidence
- ✓ Stakeholder and payor commitment