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
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
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

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Jessica:

CHALLENGES & OPPORTUNITIES FOR CHANGE

- Mental Health
  - Therapy
  - Medication management
- Substance Abuse History
  - Relapse plan
  - Outpatient treatment
- High Blood Pressure
  - Diet and exercise
  - Medication and/or monitoring
- Housing
  - Permanent housing
  - Sober living facility

Prenatal care
Interconceptional planning
Medical home
Insurance

Maternity Care Coalition
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, over-utilization of ER services, lack of follow-through
✓ 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

- 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

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## Safe Start: Project Management

### Project Management Team

**MCC, HUP, Keystone, CBH Key Leaders**

### Intervention Team
- MCC Advocates
- HUP Clinicians and Care Coordinator
- HUP Social Worker and Dietician
- Keystone First Case Manager

### Case Coordination
- PRN – meetings with social work and nurse care coordinators
- Weekly HUP care review meetings
- Biweekly Keystone First case review
- Monthly operations meeting

### Information Sharing
- Key Leader meetings
- Case conferencing
- Ongoing collaboration

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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

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