



KENTUCKY CABINET FOR
HEALTH AND FAMILY SERVICES

Maternal Health Update

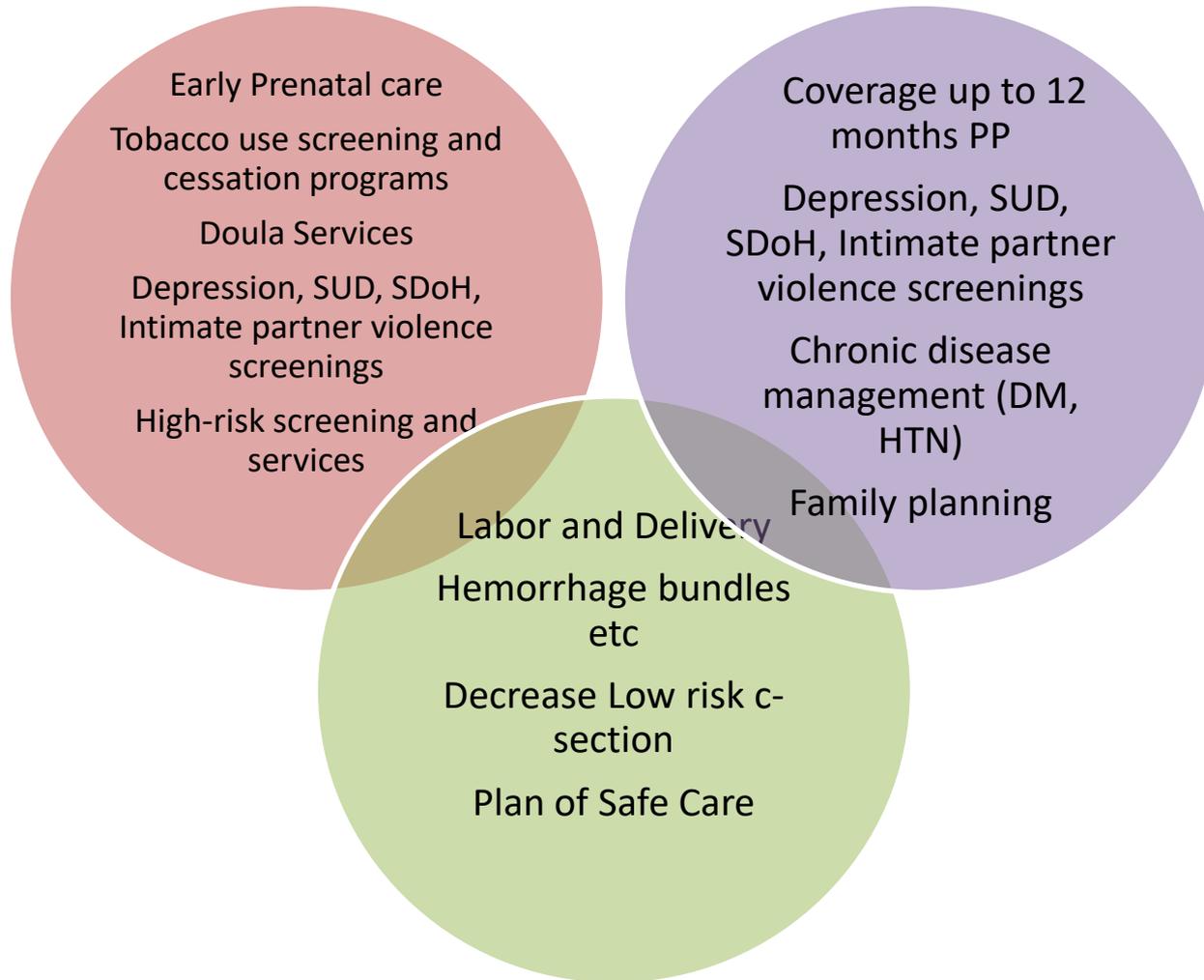
MAC

January 26, 2023

Recap

- Last time we discussed:
 - Serious Maternal Morbidity: moms with a SMM are 20.5 times more likely to die within 12 months of birth than moms without an SMM
 - Maternal Mortality: 79% of our maternal deaths are preventable
 - Suicide was the most common reason for admission within a year following birth in 2018 and 2019.

Three-Prong Approach to Maternal Health



Overview

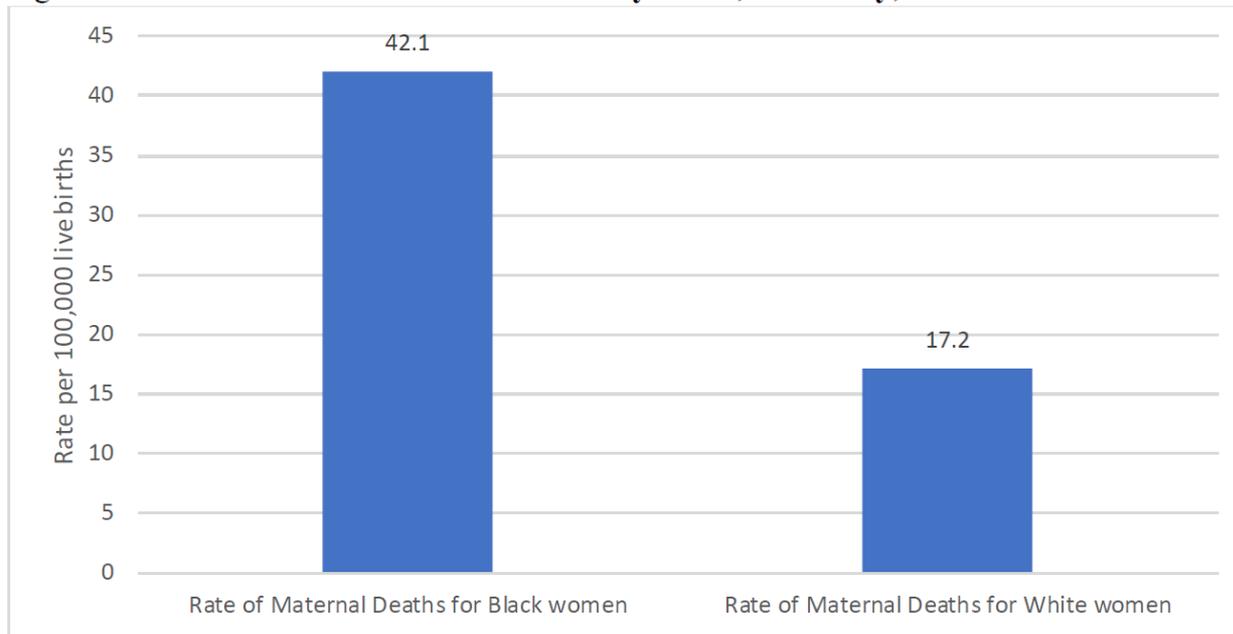
- Discuss racial disparities in KY Maternal health
- Talk a little about caesarean deliveries
- Focus on Post-partum care
 - Depression screening

Racial Disparities

- Kentucky's population is:
 - 87.5% White
 - 8.5% Black
- Majority of women live in the metro areas with access to hospitals with specialists
- Both groups have access to the same providers and hospitals

Maternal Mortality Annual Report

Figure 3: Difference in Maternal* Deaths by Race; Kentucky, 2018**



*Maternal death is defined as any female between the ages of 15-55 that was pregnant within one year prior to death or pregnant at death and died from any cause.

**2018 data is preliminary and numbers may change

Data Source: KY Vital Statistics files, linked live birth, and death certificate files years 2018

Serious Maternal Morbidity

- Black women are 1.7 times more likely to develop an SMM than White women
- If we can decrease SMM then we can decrease maternal mortality
- Women who undergo a Caesarean delivery are at increased risk of developing a SMM

Caesarean Deliveries

- In 2020, 31.8% of births nation-wide were caesarean deliveries (CD)
- In KY 34.3% of births were CD
- The KY low-risk caesarean delivery (LRCD) rate on the 2022 March of Dimes report card was:

27.4

PERCENT



LOW-RISK CESAREAN BIRTH

Percent of women who had Cesarean births and were first-time moms, carrying a single baby, positioned head-first and at least 37 weeks pregnant. These births are frequently considered low-risk.

Decreasing LRCDs with decrease Serious Maternal Morbidity and Maternal Mortality

Shift to Post-Partum Care:

Mother and Baby Outcomes

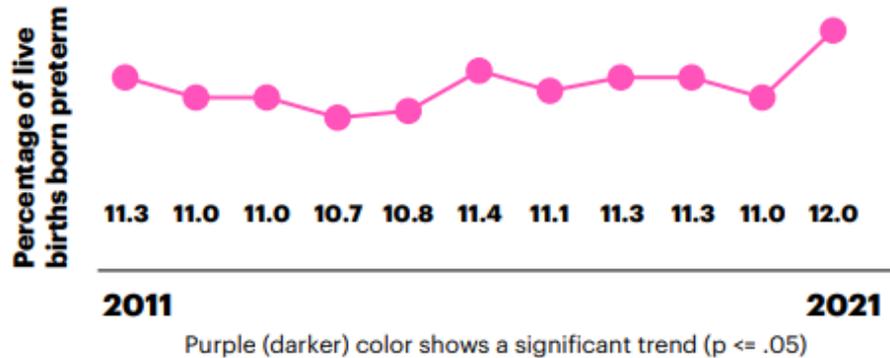
SUD and the Babies

- 5 years (2016-2020) KY Medicaid had 22,451 babies born to moms with SUD
- 5899 of those babies were diagnosed and treated for neonatal abstinence syndrome
- Women with SUD are more likely to have premature delivery

March Of Dimes Report Card 2022

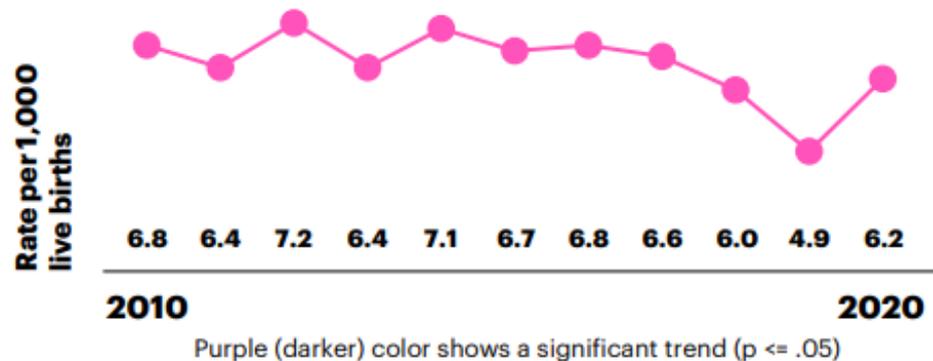
PRETERM BIRTH RATE

12.0%

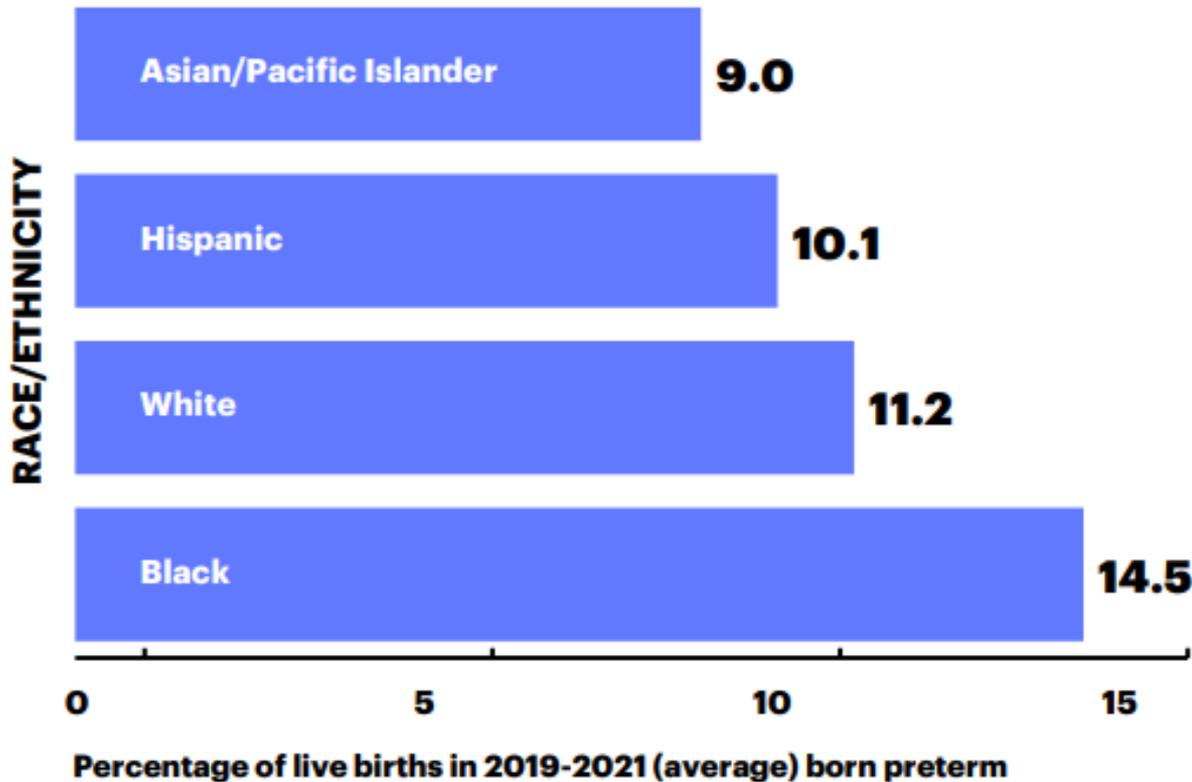


INFANT MORTALITY RATE

6.2



March Of Dimes Report Card 2022



In Kentucky, the preterm birth rate among Black women is 31% higher than the rate among all other women.

DISPARITY RATIO:

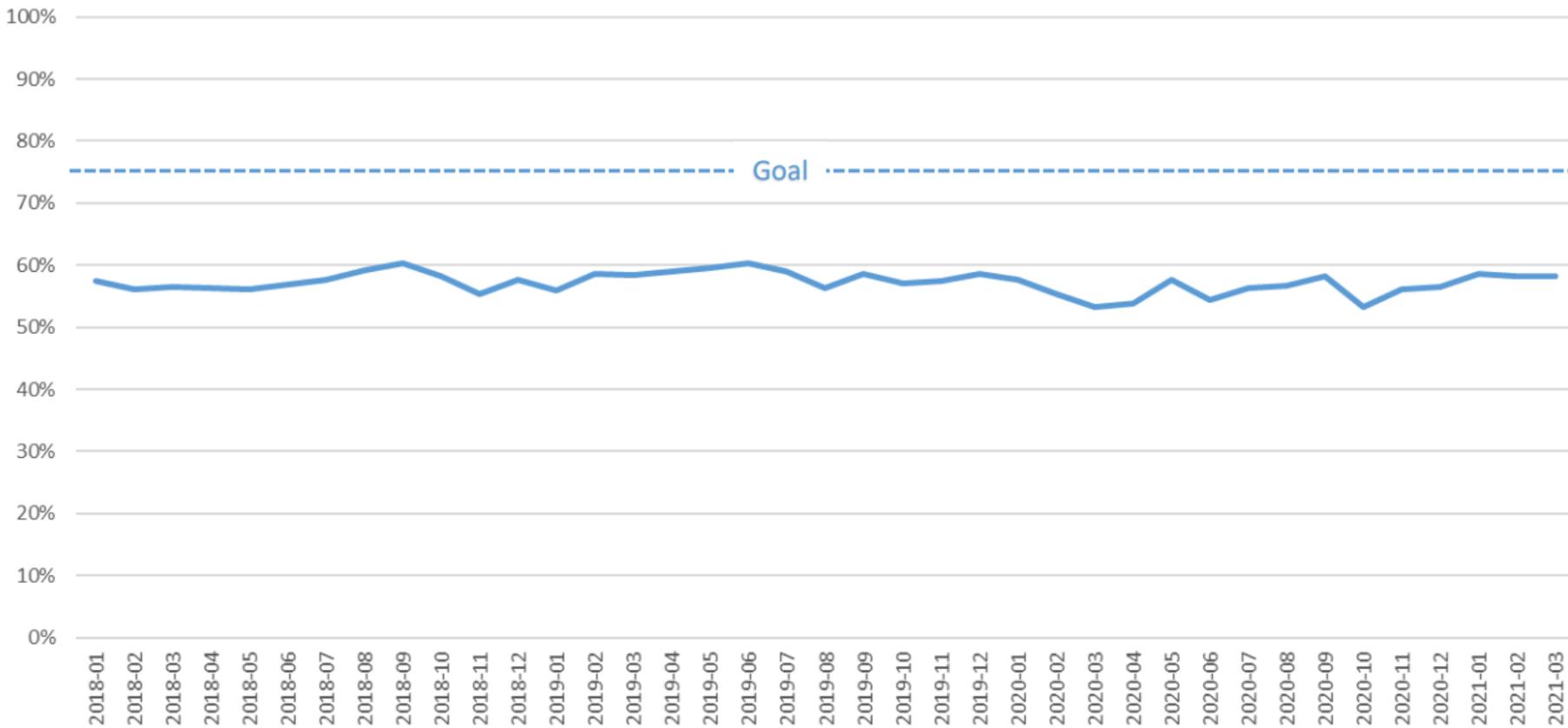
1.32

CHANGE FROM BASELINE:

No Improvement

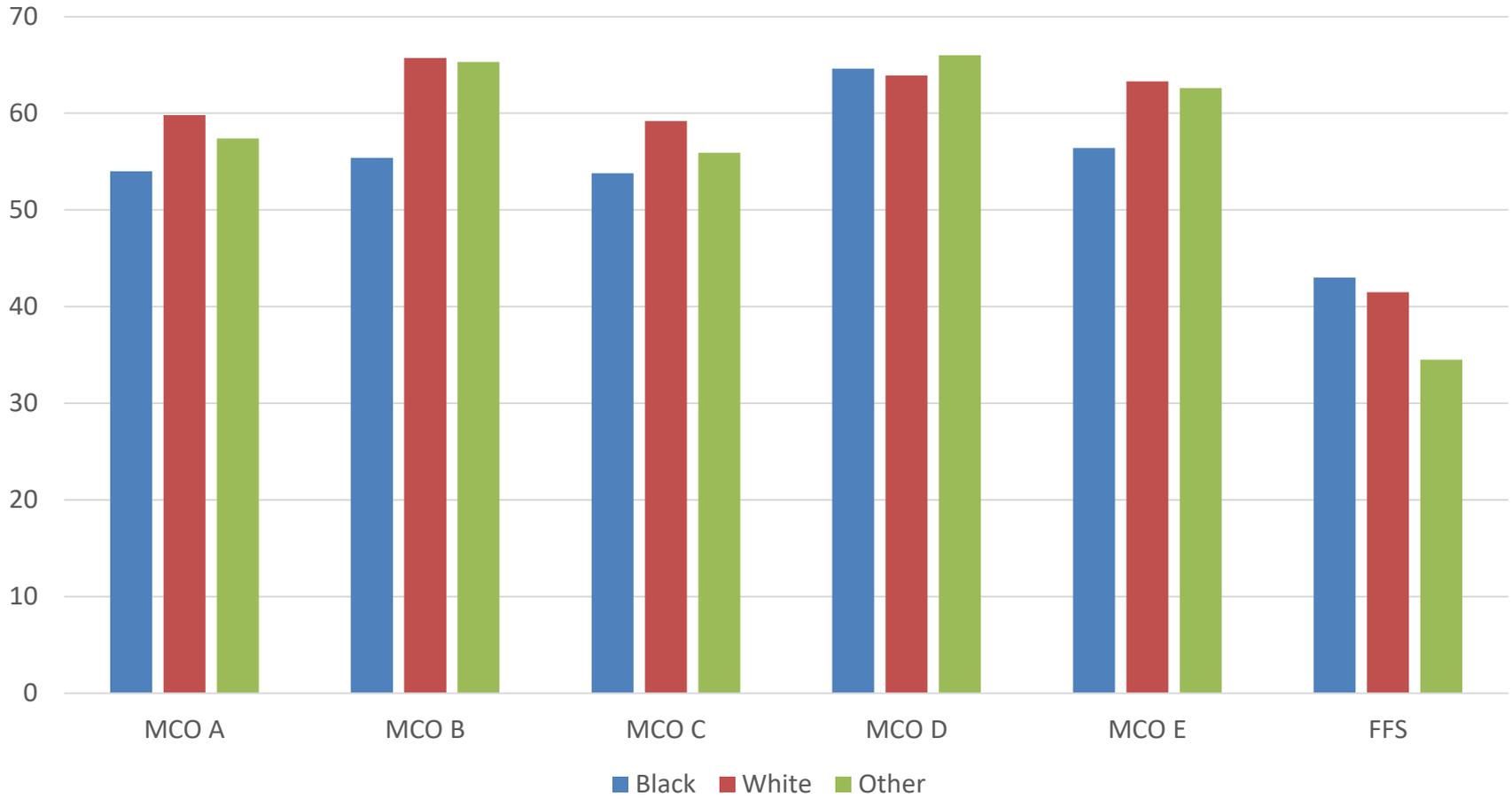
Percent

Percent of Live Deliveries having Post Partum Visit 3 - 60 days after Delivery



Month

PPV Rate by Race and MCO in 2019



The Post Partum Visit

- Provides an opportunity to assess women's physical recovery from pregnancy and childbirth
- Monitor Moms that had an SMM
- Address chronic health conditions, such as diabetes or hypertension
- Address mental health status, including postpartum depression
- Family planning, including contraception, pre-pregnancy counseling and birth spacing
- An opportunity to counsel women on nutrition, breastfeeding, and other preventive health issues
- Links women to care management services

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Screening for PP Depression

- One third of Moms on Medicaid have at least one ED visit within the year post-partum
- 1 Out of 10 of these ED visits are for behavioral health concern
- Medicaid reimburses for PPD screening in both the Obstetrician and Pediatrician office

Screening Pregnant and post-partum individuals for BH concerns such as SUD and depression will help identify issues early and allow for referral and treatment.

This simple activity could lead to improved outcomes for moms and babies.