

Improving Maternal Health for Our Communities: *HRSA Services to Advance the Health and Well-being of Women, Children, and Families*

***CMS Rural Maternal Health
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**Lee Wilson, Senior Advisor,
Maternal and Child Health Bureau (MCHB)
Health Resources and Services Administration (HRSA)
U.S. Department of Health and Human Services (HHS)**



Objectives

- **Provide HRSA's framework for maternal health and an overview of HRSA's maternal health activities**
- **Support collaboration and engagement with MCH stakeholders**
- **Highlight key programs to improve maternal health**
- **Highlight new programs and initiatives**



HRSA Mission & Strategic Goals

Mission:

To improve health outcomes and address health disparities through access to quality services, a skilled health workforce, and innovative, high-value programs.



Improve Access to Quality Health Care and Services



Foster a Health Care Workforce Able to Address Current and Emerging Needs



Enhance Population Health and Address Health Disparities through Community Partnerships



Maximize the Value and Impact of HRSA Programs



Optimize HRSA Operations to Enhance Efficiency, Effectiveness, Innovation, and Accountability

Coordination Across the Federal Government

- Federal Partners Workgroup on Improving Maternal Health
 - Led by HRSA
 - Includes participating agencies across HHS and the U.S. Agency for International Development and U.S. Department of Veterans Affairs
 - HHS Office on Women's Health
 - HHS Office of Population Affairs
 - HHS Office of Minority Health
 - Agency for Healthcare Research and Quality
 - Substance Abuse and Mental Health Services Administration
 - National Institutes of Health
 - Indian Health Service
 - Centers for Medicare & Medicaid Services
 - Centers for Disease Control and Prevention
- Coordination with CDC to monitor maternal mortality and severe maternal morbidity and collaboration with AHRQ on communication tools related to AIM



Maternal Health Efforts within HRSA

Health Center Program

- Provides primary care covering the prenatal to postpartum period through Federally Qualified Health Centers



Health Workforce Programs

- Train providers including physicians
- Scholarship programs support maternal health care providers planning to practice in underserved areas



Rural Maternity and Obstetrics Management Strategies (RMOMS) Program - **NEW**

- Supported by HRSA's Federal Office of Rural Health Policy
- Will support award recipients in improving access to and continuity of maternal and obstetrics care in rural communities



Maternal and Child Health Bureau



Mission:
Improve the health of America's mothers,
children, and families.

Statement of the Vision

- All women are supported in attaining and sustaining optimum levels of health and well-being throughout their life course.
- All women have access to the same level of high-quality health care services
- The Federal Government, working through its agencies, with its stakeholders, and with the public, supports and advances maternal health and the prevention of severe morbidity and mortality.



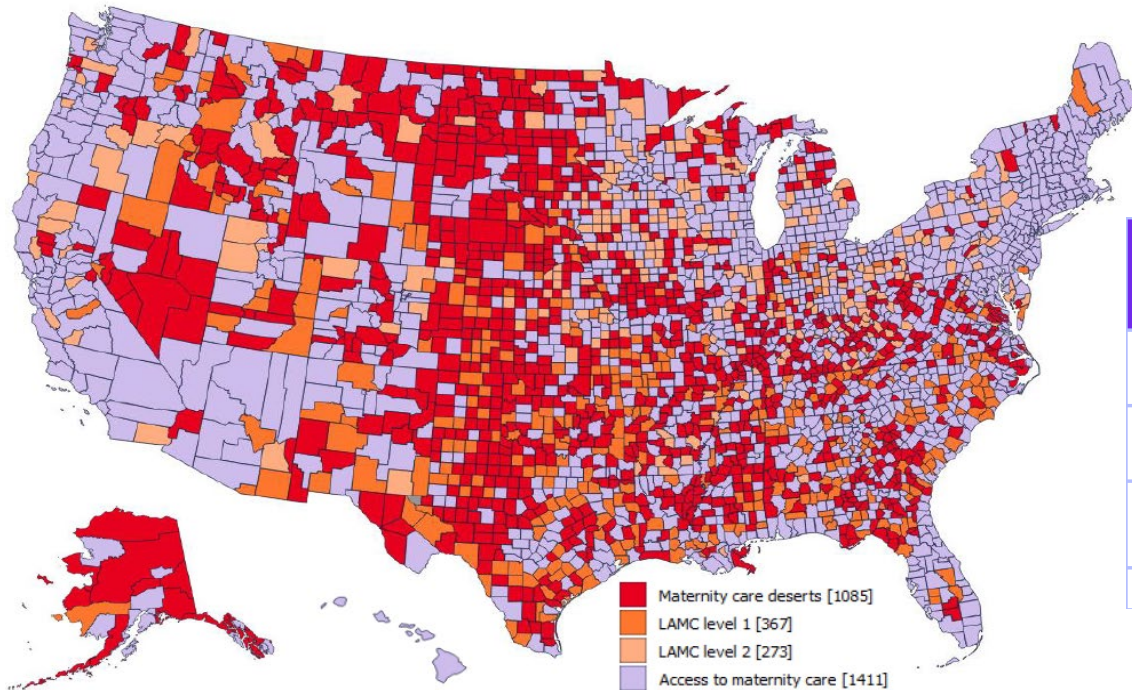
A Present and Growing Problem: Maternal Mortality

- Rate of maternal mortality and severe maternal morbidity **higher** in U.S. than other high-resource countries, and it does not appear to be improving. (hemorrhage, severe hypertension, and venous thromboembolism).
- Mental and behavioral health conditions, including opioid use disorder, are emerging causes of maternal death.
- Demographic issues (age, health status)
- Inequities
 - Racial and ethnic minorities
 - Non-Hispanic Black women are **three to four times** more likely to die from pregnancy complications than non-Hispanic White women.
 - Medically-underserved areas



Maternal Health Care Access

- In 2016, **over half of all counties had limited or no access** to hospital-based obstetric services or obstetric providers
- In 2016, 12.2% of annual births (~500,000) were to women who have limited or no access to maternity care in their counties



Definitions	Maternity care deserts	Limited access to maternity care (LAMC)	
		Level 1	Level 2
Hospitals offering obstetric (OB) care	zero	<2 Hospitals	<2 Hospitals
OB Providers (OB/GYN, CNM) per 10,000	zero	<60	<60
Proportion of women 18-64 without health insurance*	any	10% or greater	Less than 10%

Notes: OB/GYN = obstetrician/gynecologists; CNM = certified nurse midwives
*U.S. average is approximately 10%.

3 Key Objectives: Access, Data, & Innovation

Access

Increasing access to quality, evidence-based care for women of childbearing age by improving and strengthening health systems, clinical service delivery, data-driven quality improvement, and workforce development.

Data

Building data collection and analysis capacity to improve our understanding of the causes of, and effective strategies to address, maternal mortality in the U.S.

Innovation

Supporting innovation to ensure pregnant women have access to and receive appropriate and timely care.



Title V MCH Services Block Grant to States

FY 2019 Budget = \$557.8 M



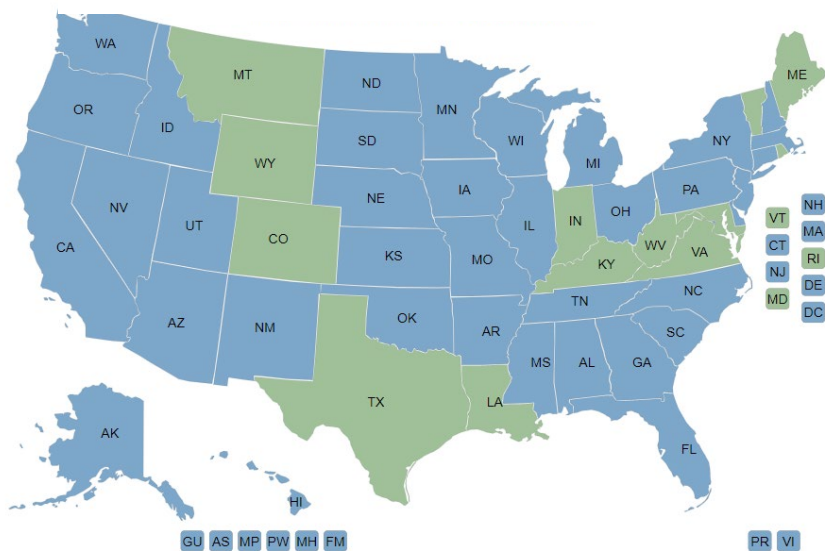
Reach & Impact

56 million people in
FY2017

- **86%** of all pregnant women
- **99%** of infants
- **55%** of children

Title V MCH Services Block Grant to States

NPM 1: Well-Woman Visit – States Selected: 46



States that selected the specified measure are highlighted in blue.

<https://mchb.tvisdata.hrsa.gov/>

- Increasing annual well woman visits
- Preventing low-risk cesarean deliveries
- Reducing the prevalence of risky behaviors during pregnancy
- Funding for maternal mortality activities, which may include maternal mortality review committees (MMRC), in 56 of 59 states/jurisdictions

Maternal, Infant, Early Childhood Home Visiting (MIECHV) Program

- First authorized in 2010 as part of the Patient Protection and Affordable Care Act.
- Most recently re-authorized in 2018 with \$400M appropriation annually for 2018-2022.
- Administered by HRSA (state/territory programs) in partnership with the Administration for Children and Families (tribal grants, research/evaluation, and technical assistance).



MIECHV: Reach and Scope

- Grantees are in all 50 states, D.C., and five territories, and 888 counties.
- In FY 2018, states reported:
 - Serving more than 150,000 parents and children
 - Providing over 930,000 home visits
- Grantees have provided 5.2 million home visits over the past seven years.



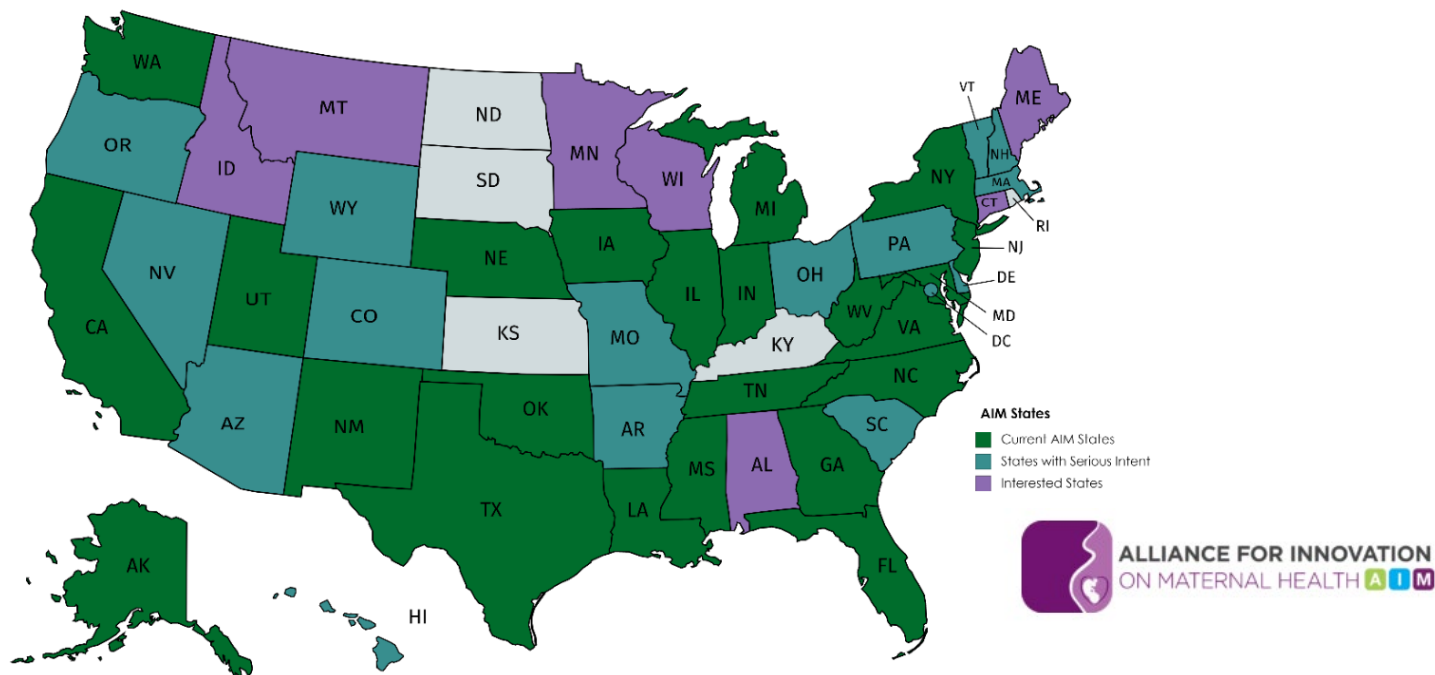
Healthy Start: Eliminating Disparities in Perinatal Health

FY 2019 Budget = \$123M

- Focus on communities with highest infant mortality rates
- Support community-driven efforts to decrease infant mortality
 - In FY2019, the program's 100 grantees will serve women, children, and families in **34 states, D.C., and Puerto Rico.**
 - New funding for grantees to provide clinical services to support maternal health.



Alliance for Innovation on Maternal Health (AIM): Combating Maternal Mortality



- 26 states participating
- 1,300+ birthing hospitals
- ~2 million births annually

Women's Preventive Services Initiative (WPSI)

Purpose

- To develop and disseminate recommendations for women's preventive health care services that address needs and fill gaps in existing guidelines.

Goals/Objectives

- Develop recommendations for asymptomatic women, to increase access to preventive services.
- Develop resources to support the update HRSA-supported recommendations.



Other Efforts Within MCHB



Screening and Treatment for Maternal Depression and Related Behavioral Disorders Program (FY19 \$5M)

- Address critical and growing mental/behavioral health issues with limited funding



Bright Futures™

prevention and health promotion for infants, children, adolescents, and their families™

Bright Futures

- Provides blueprint for well-child care/health supervision from birth through adolescence and young adulthood

Other Efforts Within MCHB



Remote Pregnancy Monitoring

MCHB Remote Pregnancy Monitoring Challenge

- Supports the development of tech-based innovations to improve the ability of prenatal care providers to monitor pregnant women's health remotely, as well as empower women to make informed decisions about their own care



Addressing Opioid Use Disorder in Pregnant Women and New Moms

MCHB Opioid Use Disorder Challenge

- Supports the development of tech-based innovations to improve access to quality health care for pregnant women and new mothers struggling with opioid use disorder (OUD)

Combatting Maternal Mortality: Convening Global Experts



HRSA Maternal Mortality Summit (June 2018)

- Experts from US, 6 countries, and WHO
- Highlighted innovative strategies in reducing maternal mortality

Maternal Mortality Summit Key Findings



ACCESS

Improve access to patient-centered, comprehensive care for women before, during, and after pregnancy



QUALITY

Improve quality of maternity services through efforts such as the utilization of safety protocols in all birthing facilities, such as Alliance for Innovation on Maternal Health (AIM) safety bundles



WORKFORCE

Provide continuity of care before, during and between pregnancies by increasing the types and distribution of health care providers



LIFE COURSE APPROACH

Provide continuous team-based support and use a life course model of care for women before, during and between pregnancies



DATA

Improve the quality and availability of national surveillance and survey data, research, and common terminology and definitions



REVIEW COMMITTEES

Improve quality and consistency of maternal mortality review committees through collaborations and technical assistance with U.S. states



COLLABORATIONS

Engage in opportunities for productive collaborations with multiple Summit participants and others to decrease the rate of maternal mortality and severe maternal morbidity

Title V MCH Services Block Grant: SPRANS

NEW State Maternal Health Innovation Grants = \$23M



State focused demonstrations addressing:

- Access to care
- Workforce
- Telehealth
- Data Collection
- Payment

AIM

NEW Expansion Funds = \$3M



AIM 2.0

- Bring AIM to all 50 states, D.C., territories, and tribal communities
- **NEW Funding Opportunity**
AIM Community Care (HRSA-19-109)
 - Expand safety bundles beyond the hospital care setting
 - 1 Award
 - \$1.8M

Healthy Start

NEW Clinical Provider Funds = \$12M

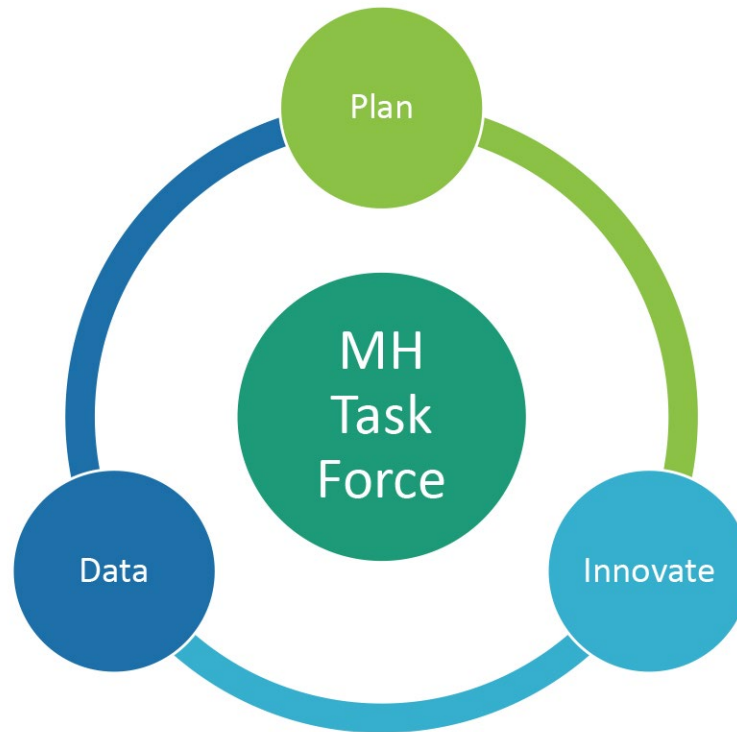


Support hiring of advanced practice health professional staff at Healthy Start sites nationwide to provide:

- Well woman care
- Maternity care services

State Maternal Health Innovation Program

- HRSA-19-107
- Cooperative Agreement to States
- 9 Awards
- \$18.5M



Supporting Maternal Health Innovation Program

- HRSA-19-106
- Cooperative Agreement 1 Award
- \$2.6M



Rural Maternity and Obstetrics Management Strategies Program (RMOMS)

- Federal Office of Rural Health Policy: HRSA-19-094
- Purpose: To improve access to and continuity of maternal and obstetrics care in rural communities.
 - develop a sustainable network approach to coordinate maternal and obstetrics care within a rural region;
 - increase the delivery and access of preconception, pregnancy, labor and delivery, and postpartum services;
 - develop sustainable financing models for the provision of maternal and obstetrics care; and
 - improve maternal and neonatal outcomes.
- Cooperative Agreement to States
- 3 Awards at \$1.8 M



Contact Information

Lee Wilson

Senior Advisor, Division of Healthy Start and Perinatal Services

Maternal and Child Health Bureau (MCHB)

Health Resources and Services Administration (HRSA)

Phone: 301.443.0940

Email: LWilson@hrsa.gov

Web: www.mchb.hrsa.gov

Twitter: [Twitter.com/HRSAgov](https://twitter.com/HRSAgov)

Facebook: [Facebook.com/HHS.HRSA](https://www.facebook.com/HHS.HRSA)





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