Michigan Families Medicaid Project:

REDESIGNING STATE MEDICAID POLICY AND PROGRAMS TO SUPPORT IMPROVEMENT IN PREGNANCY OUTCOMES

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Background

- Medicaid insures almost 40% of births in the US
- State and federal dollars support enhanced prenatal services (EPS) in 80% states for Medicaid insured women
- Despite investments, disparities persist
- Can EPS programs be improved?

Purpose

To present:

- A state-wide evaluation of participation in Michigan (MI) EPS program by risk factors
- The development of a two-tiered risk screening and assessment tool
- Preliminary findings of EPS participants using the new tool
- Policy implications for EPS program redesign efforts

Methods

Evaluation study

- All women with Medicaid for at least one prenatal month linked to infant with at least one month (N=54,583) in 2005 (fiscal year)
- Linked vital record, WIC, Medicaid data

Risk screener study

 Convenience sample of women enrolled in EPS services in rural and urban counties (N=2,203)

EPS Evaluation Study

FY 2005 Single Risk Characteristics by EPS Enrollment			
	Total	No	Yes
	N (%)	EPS	EPS
		Enrollment	Enrollment
		%	%
Total	54,583	73.98	26.02
<12 th grade education	14, 777 (27.07)	67.47	32.53
Black	15,294 (28.24)	73.90	26.10
<100% FPL	11,664 (21.37)	68.82	31.18
Smoke	18,568 (34.02)	71.66	28.34
Alcohol use	7,345 (13.46)	70.47	29.53
Diagnosed Depression	3,453 (6.33)	58.73	41.27

EPS Evaluation

FY 2005 Multiple Risk Characteristics by EPS Enrollment N=54,583				
	Total N (%)	No EPS Enrollment	Yes EPS Enrollment	P-value
		%	%	
0 risks	3,857 (7.07)	83.10	16.90	
1-2 risks	27,900 (51.11)	76.54	23.46	<.01
3-4 risks	19,402 (35.55)	70.43	29.57	
≥ 5 risks	3,424 (6.27)	62.88	37.12	

Risk characteristics include: age, education, race/ethnicity, SES, marital status, smoking, alcohol use, drug use, diagnosed depression, history of chronic disease, and rapid repeat pregnancy less than 18 months (birth-to-conception).

EPS Redesign Strategies

- A process for rapidly identifying high risk women
- Engaging them in specific, evidence based interventions
- Service intensity matched to risk level
- Facilitating broader based health education and referral services for those presenting at lower levels of risk.

Risk Screening and Assessment Tool

- Hybrid initial screening and assessment for those with positive screen on selected risk factors
- 2 question PHQ for depression; Edinburgh for + screens
- Smoke now, past, amount (Mullen); Fagerstrom nicotine dependence for + screens; readiness to quit

The screener may be found on the web (form number MSA 1200): http://michigan.gov/mdch/0,1607,7-132-2945_5100-43782--,00.html

Screener study (N=2,203)

- Contraception results
- Tobacco use
- Depression
- Stress
- Basic needs

Screener study (N=2,203): Contraception

Pregnancy Want Time by Using Birth Control			
	No BC	Yes BC	
	N (%)	N (%)	
Wanted sooner/now	550 (93.90)	41 (6.94)	
Wanted later	686 (73.29)	250 (26.71)	
Not wanted now or ever	209 (71.33)	84 (28.67)	

Screener study (N=2,203): Tobacco Use

	N (%)
TOTAL	N=2,203
SMOKING	n=2,159
Not smoking	1226 (56.79)
Currently smoking during pregnancy	566 (26.22)
Quit when found out pregnant	367 (17.00)

Screener study (N=2,203): Tobacco Use

Of those who currently smoke:	N (%)
	n=561
Smoke <1 pack per day	513 (91.44)
Smoke >1 pack per day	48 (8.56)
	n=455
Fagerstrom <5 (low dependence)	338 (74.29)
Fagerstrom >5 (med-to-high dependence)	117 (25.71)
	n=550
Seriously thought about quitting during pregnancy	489 (88.91)
	n=541
Tried to quit in last 30 days	282 (52.13)

Screener study (N=2,203): Tobacco Use

Of those who quit smoking:	N (%)
	n=248
Smoke <1 pack per day	209 (84.28)
Smoke >1 pack per day	39 (15.72)
	n=98
Fagerstrom <5 (low dependence)	78 (79.59)
Fagerstrom >5 (med-to-high dependence)	20 (20.41)

Screener study (N=2,203): Depression

	N (%)
TOTAL	N=2,203
DEPRESSION	n=2,115
Negative PHQ-2 score for depression	988 (46.71)
Positive PHQ-2 score for depression	1,127 (53.29)
Of those with positive PHQ-2:	n=1010
EPDS ≥13 (moderate-severe)	341 (33.76)
EPDS 9-12 (mild)	258 (25.54)
EPDS <9 (not depressed)	411 (40.70)
Of those with negative PHQ-2:	n=401
EPDS ≥13 (moderate-severe)	12 (2.99)
EPDS 9-12 (mild)	31 (7.73)
EPDS <9 (not depressed)	358 (89.28)

Screener study (N=2,203): Stress

	N (%)
TOTAL	N=2203
STRESS	n=2045
Perceived Stress Scale-4: 0-4	950 (46.45)
Perceived Stress Scale-4: 5-8	714 (34.91)
Perceived Stress Scale-4: 9-12	313 (15.31)
Perceived Stress Scale-4: 13-16	68 (3.33)

Screener study (N=2,203): Basic Needs

	N (%)
	n=2,159
In last 12 months, cut the size of meals or skip meals because of not enough money for food	481 (21.83)
Thous because of flot chagnification by for food	
Number of times moved in past 12 months:	n=2,102
0	863 (39.17)
1	627 (28.46)
2	301 (13.66)
3	167 (7.58)
4	109 (4.95)

Screener study (N=2,203): Basic Needs

	N (%)
	n= 2,128
Housing concerns or worries	653 (29.64)
Access to a telephone to make and receive calls:	n=2,148
Never	43 (1.95)
Sometimes	145 (6.58)
Always	1995 (88.74)

Screener study (N=2,203): Multiple Risk Characteristics

Multiple Risk Characteris	tics
	N (%)
TOTAL	n=1314
0 risks	53 (4.03)
1-2 risks	412 (31.35)
3-4 risks	525 (39.95)
≥ 5 risks	324 (24.66)

Risk characteristics include: age, education, race/ethnicity, marital status, smoking, alcohol use, drug use, depression (EPDS \geq 9), history of chronic disease, and stress (PSS4 \geq 5).

Policy Implications

- Screener is a requirement for EPS services
- Reimbursement for screener completion
- Pilot integration of screener with WIC assessment
- Move to web-based screener
- Evaluation of screener performance
- Coordination with other EPS type programs (Healthy Start, Early HS)

For Further Information

Copy of the screener (form number MSA 1200):

http://michigan.gov/mdch/0,1607,7-132-2945_5100-43782--,00.html

Michigan Families Medicaid Project Reports and Other Information:

http://www.ihcs.msu.edu/MichiganFamiliesMedicaidProjectdefault.htm

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