IN Medicaid Infant Mortality 2014 Claims Data Review
Medicaid pays for 50% all births in IN

- Recognize socioeconomic factors
  - impact a woman’s health and ability to have a healthy baby.
- Indiana Medicaid can have a huge impact statewide in having healthier babies and families.
2014 Medicaid Statistics

• 45,612 children received Medicaid coverage in the month they were born

• 363 died before their first birthday

• 7.958/1000
  – Infant mortality among Medicaid members
    • Note: Of 363, not all children’s mothers were on Medicaid during pregnancy.
Mother’s Diagnoses During Pregnancy in Instances of Infant Mortality
Notes On Numbers

• **67 Children** - Could not make a systematic link to birth mother from newborn
  – Potential reasons were varied from mothers not having Medicaid coverage at all; getting coverage after the fact; or other

• **On 296** was able to make link
  – 46 Women - *no* complications from claims information were found
Mother’s Diagnoses

- Tobacco Use - 111 (37.5%)
  - Tobacco Use - 85
  - Excessive Smoking - 43
- Anemia - 81 (27.4%)
- Excessive Vomiting - 59 (19.9%)
- HTN/Preeclampsia - 40 (13.5%)
- Obesity - 40 (13.5%)
- Diabetes - 33 (11.1%)
- Multiples - 33 (11.1%)
- Substance Use Disorder - 23 (7.8%)
Mother’s diagnoses, cont’d

- Cardiac or Pulmonary Disease - 7 (2.4%)
- Current Malignancy or Leukemia - 7 (2.4%)
- Respiratory - 7 (2.4%)
- Epilepsy - 5 (1.7%)
- Prior Pregnancy Resulting in Anomaly or Complication to Infant - 2 (1.0%)
- Coagulation Defects - 0
- Myelofibrosis - 0
- Potential Housing Issue - 0
High Risk Diagnoses, cont’d

– Preterm Complications, historical or current (80)*
– Preterm Labor, current or historical (88)*
– Potential Structural Complications (80)*

* only 3 of 4 quarters included these diagnoses
& not broken out from historical or current

– Going forward for 2015 - will break out claims showing historical from those with current complications or preterm labor
Racial Demographics

• 2014
  – White (184) - 51%
  – Black (85) - 23%
  – Hispanic (23) - 6%
  – Asian (4) - 1%

• Quarter 1 of 2015
  – White 33 (47%)
    • 63% of all Medicaid births
  – Black 27 (38%)
    • 20% of all Medicaid births
  – Hispanic 8 (11%)
    • 13% of all Medicaid births
  – Asian 1 (1%)
    • 2% of all Medicaid births
  – Other 3 (3%)
    • 2% of all Medicaid births
Maternal Age

• Average 25.8 years of age

• 4 women were under 18 years of age

• 2 women were over 40 years of age
Gender

- Male (208) - 57%
- Female (155) - 43%
Age at death in days

- Date of birth (95) - 26.17%
- 1 to 3 days (47) - 12.95%
- 4 to 7 days (12) - 3.31%
- 8 to 30 days (50) - 13.77%
  - Total Less than 30 days - 56.2%
- 31 to 60 days (32) - 8.82%
- 61 to 90 days (29) - 7.99%
- 91 to 180 days (63) - 17.36%
- Over 180 days (35) - 9.64%
Mothers Months of Eligibility
Prior & Up to Birth
Months of Coverage

- 9 months (180) - 60.4%
- 8 months (32) - 10.7%
- 7 months (19) - 6.4%
- 6 months (26) - 8.7%
- 5 months or less (38) - 12.8%

- Total months of eligibility
  - not months from date of authorization;
    - Can be 3 months of retroactive eligibility from date of application, if pregnant during those months
    - But would include any women received Presumptive Eligibility
  - not necessarily number months of mother being pregnant
Months of coverage and preterm complications

- **Less than 9 months**
  - 50 women had either current or historical Preterm Complications or current or historical Preterm Labor or both - 23.6%
  - 39 women had either current or historical Preterm Labor - 18.4%
    - 26 had 6 months of coverage or less - 12.3%
  - 36 women had either current or historical Preterm Complications - 17.0%
    - 19 had 6 months of coverage or less - 9.0%
  - 34 women did not have a claim for current or historical Preterm Complications or Preterm Labor - 16.2%
    - 21 had 6 months of coverage or less - 10.0%
IN Medicaid Policy Changes

- Earlier enrollment for women
  - No longer have to verify pregnancy with a doctor’s note as of January 2014
  - HIP 2.0
    - Since 2/1/15 more women covered prior to being pregnant
  - Earlier managed care enrollment
    - No longer have mandatory 14 day waiting period
    - Will eliminate batch process running on 1st and 15th days of month for auto-enrollment
- IN Medicaid no longer pays for Early Elective Delivery prior to 39 weeks
- Enhanced reimbursement for LARC to increase space between births
OMPP Contract Incentives for MCEs

• Capitation Withholds based on HEDIS Measures for Frequency of Ongoing Prenatal Care
  – Number of pregnant members attend at least 81% of expected number of prenatal visits
    • Above 90% of NCQA Medicaid = 100% this withhold
    • Above 75% of NCQA Medicaid = 50% this withhold
      – In 2014, all 3 achieved above 75$^{th}$ percentile

• Bonuses for Referrals to Quitline in HHW
  – 2015: 27,483 live births, 208 referrals
Hoosier Healthwise Successes

• 2015 HEDIS Measures
  – Frequency of Ongoing Prenatal Care
    • Anthem - 80%
    • MDwise - 79%
    • MHS - 77%
  – Timeliness of Prenatal care
    • Anthem - 91%
    • MDwise - 91%
    • MHS - 89%

• Extensive outreach and education
  • importance of prenatal visits,
  • well-child visits for after baby is born
  • safe sleep
  • Smoking cessation
Q1 2015 Update

• 71 deaths of 11,239 babies under 1 year of age
  – Rate is 6.32/1,000
• Anemia decreased for IM cases - 10 (14.5%)
• Smoking - 19 (28.8%)
  – Average number of diagnoses considered high risk for women who smoked was 6.8
    » Overall average was 3.88 high risk diagnoses
    » Average for non-smokers was 2.62 high risk diagnoses
• 5 (7.8%) had less than 6 months of coverage and did not have any current preterm labor or complication