### CLINICAL OVERVIEW

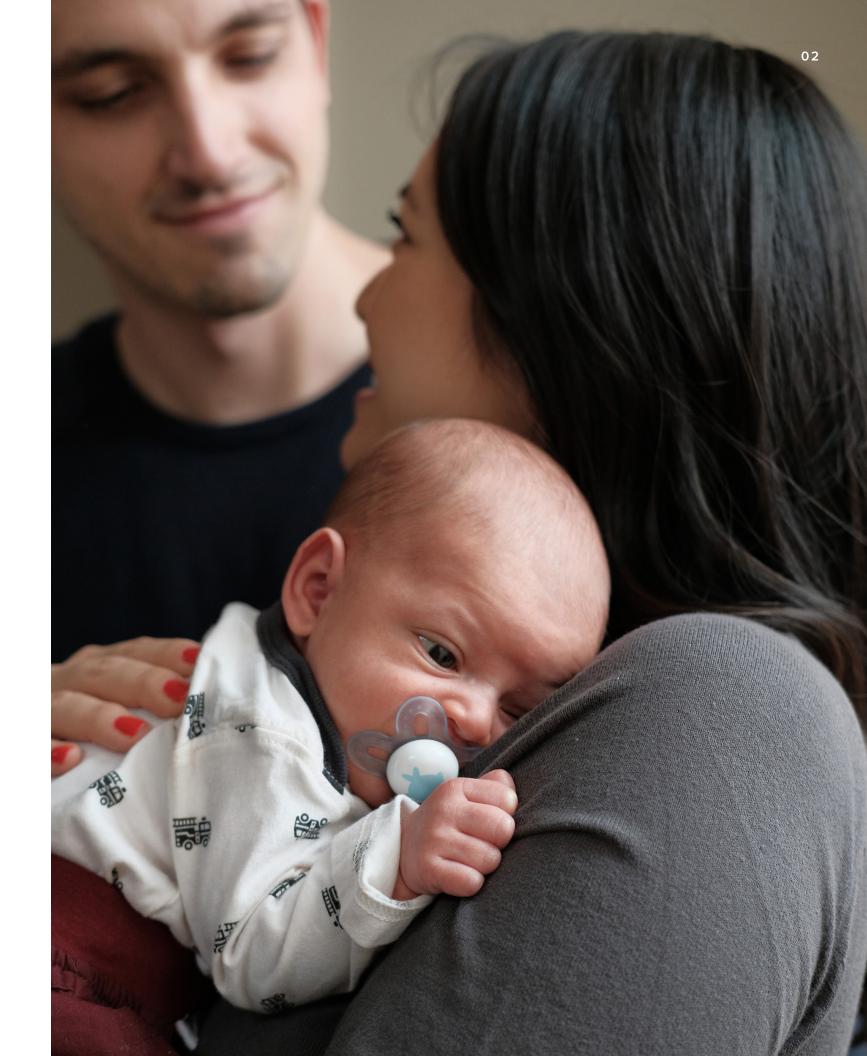
Equitable maternity care for all: Supporting Medicaid beneficiaries through pregnancy with digital solutions



## CC MAVEN

Digital health solutions like Maven support the unique needs of the Medicaid population along their pregnancy journey, driving improved outcomes for beneficiaries and value for Managed Care Organizations (MCOs).

The U.S. faces a severe maternal health crisis that has devastating impacts on the health and wellbeing of our entire population. Among high-income countries, women in the United States are <u>more likely</u> to die from complications related to pregnancy or childbirth. A driving factor behind the high mortality rate is the disproportionate number of <u>Black and Indigenous women</u> who experience pregnancy-related complications and death. What's more, the CDC estimates that <u>84%</u> of maternal deaths in the U.S. are preventable.



## Understanding factors that influence maternal health outcomes

There are many factors that lead to the high rates of mortality and morbidity in the U.S., including a lack of access to health insurance coverage. There is no comprehensive public health system in the U.S., and there are significant <u>coverage</u> <u>gaps</u> in the programs that do exist, like Medicaid. These gaps in coverage means that many pregnant people are unable to access timely prenatal and postpartum care, driving <u>negative health outcomes</u>. Additionally, those who do qualify for Medicaid often experience worse outcomes than their counterparts. <u>Studies show</u> that women at lower income levels (below the 25th percentile of incomes) have a higher risk of death up to one year after giving birth when compared to those with higher incomes.

There are additional structural factors that also drive the disparities we see in maternal health outcomes. Systemic racism and discrimination result in adverse <u>social determinants of health</u> and greater exposure to social risk factors for traditionally underserved communities. For example, Black women are <u>three times</u> <u>more likely to die</u> from pregnancy and childbirth complications compared to white women, but they are also more likely than white women to:

- Work in low-wage positions that often don't provide <u>healthcare benefits</u>
- Live in states where they're affected by coverage gaps
- Rely on Medicaid for insurance when giving birth



To improve maternal health outcomes, improving the quality of care across insurance types should be a clear area of focus. Medicaid pays for <u>42% of all births nationally</u>, and an even <u>larger proportion of births</u> for uninsured and underinsured groups. To better serve the Medicaid population, MCOs are looking to digital family health solutions to fill <u>many of the</u> <u>gaps in care</u> that exacerbate the maternal mortality crisis.





### What are digital family health solutions?

'Digital family health solutions" refer to apps and online platforms that support members when starting and raising families, complementing the in-person care benefits offered by health plans. These benefits could include fertility support, adoption and surrogacy support, referrals to inperson fertility clinics and OB-GYNs, 24/7 virtual access to specialty care providers, pre- and postpartum resources, parenting support, pediatric resources, and more.

## 72%

of Medicaid users wanted to use an app with live coaching to manage their nutrition, exercise, sleep, and stress 85%

of people are comfortable sharing their social needs

with their care team digitally

## 50%

of pregnant people currently use apps to support their pregancy

## Why Medicaid beneficiaries need digital health

Medicaid beneficiaries face additional barriers to receiving quality maternity care when compared to privately-insured members. Access can be more limited: <u>women with</u> <u>Medicaid are less likely</u> to begin prenatal care in the first trimester and less likely to receive adequate prenatal care when compared to privately-insured pregnant people. Additionally, Medicaid beneficiaries are often <u>more distrusting of the medical system</u> due to provider bias and historical mistreatment by the medical community.

However, despite these barriers, Medicaid beneficiaries want opportunities to engage with their care team, and many hope to do so digitally. They're looking for technologyenabled, user-friendly solutions to better manage their health and wellness. <u>Studies</u> <u>show</u> the Medicaid population uses smartphones and tablets at the same rate as the general population, and they are just as likely as commercially-insured members to use technology for health purposes. <u>72% wanted to use an app</u> with live coaching to manage their nutrition, exercise, sleep, and stress, and <u>50% of pregnant people</u> currently use apps to support their pregnancy. Maven research also found that over <u>85% of people</u> are comfortable sharing their social needs with their care team digitally, regardless of the team's ability to address those needs.

To better meet the needs of the Medicaid population on their family journey, beneficiaries should have access to connected, comprehensive, and accessible digital health platforms. MCOs have the opportunity to introduce digital solutions into their ecosystem to better meet patient expectations while providing continuous support and directing to in-person care when necessary. When done well, digital family health platforms can improve access and engagement, address unmet mental health and social needs that affect maternal health outcomes and increase the number of members who receive routine care.



5 ways digital health supports Medicaid populations on their maternity journey, through the lens of health equity



Medicaid beneficiaries face increased barriers to accessing care when compared to the commercially-insured. March of Dimes estimates that 2.2 million people live in maternity care deserts, meaning they have no local access to a hospital offering obstetric care, no birth center, and no obstetric provider. The lack of access to specialty providers isn't limited to OB-GYNs, either—only six states reimburse for doula services under Medicaid, despite their proven ability to improve outcomes in maternity care.

Black Medicaid beneficiaries face even more obstacles when accessing family care. Due to implicit bias, healthcare providers on the whole spend less time with Black patients and are more likely to rely on stereotypes like the belief that Black patients won't adhere to prescribed treatment plans. Black women also often give birth in lowerquality hospitals than white people, contributing to the disparities in maternal mortality.

## 32%

of Maven's healthcare experts identify as Latine, Black/African American, Asian, Middle Eastern, or multi-racial

### Provide care irrespective of geography or office hours

they live.

## Offer care matching to reduce disparities

Members can meet with providers who share the same background and cultural experiences, enabling more equitable care. Maven can offer care matching to Medicaid beneficiaries who are people of color, as 32% of our healthcare experts identify as Latine, Black/ African American, Asian, Middle Eastern, or multi-racial.

## Access high-quality care, regardless of insurance status

Maven offers a highly-vetted, best-in-class healthcare expert network to all members. Medicaid beneficiaries access the same care ecosystem as commercially-insured members on our platform, which allows members to receive the best virtual care possible throughout their family journey.



## 2.2 million

people live in maternity care deserts, meaning they have no local access to a hospital offering obstetric care, no birth center, and no obstetric provider

### HOW DIGITAL SOLUTIONS LIKE MAVEN CAN HELP

Using digital family health solutions like Maven, Medicaid beneficiaries can access virtual appointments with a wide range of healthcare experts and Care Advocates 24/7/365, no matter where

## 2. Engage early and often

Engaging beneficiaries early and often throughout pregnancy improves outcomes for birthing parents and babies. However, many aren't eligible for Medicaid until they become pregnant (due to higher income cutoffs for Medicaid pregnancy coverage). Once they become pregnant, determining Medicaid eligibility can take up to 90 days. The resulting delay means that many birthing parents may not receive essential prenatal care until their second trimester.

Even when individuals are enrolled in Medicaid, many still don't meaningfully engage with in-person care through their plan, making it more likely that they enter into pregnancy with undiagnosed or untreated conditions. Even among members enrolled in commercial plans, over one-third didn't engage with their health plan in the past year. When mere engagement with care can make a difference between a healthy pregnancy and a high-risk one, Medicaid plans need better ways to ensure beneficiaries get the care they need.

HOW DIGITAL SOLUTIONS LIKE MAVEN CAN HELP

### Support Medicaid enrollment and engagement

Digital family health solutions can help identify and engage members who may be eligible for Medicaid enrollment and support members while they navigate the enrollment process. Targeted marketing and partnerships with community organizations allow Maven to engage members early in their pregnancies, driving improved outcomes. Currently, over 70% of Maven Medicaid beneficiaries enroll in their first or second trimester.

### Keep members engaged through clinically-validated care models

Maven keeps members engaged throughout pregnancy and beyond by providing trusted, empathetic support backed by our clinical care model. Members access personalized content and education through high-risk care programs to ensure they receive information that is relevant for their unique needs. On average, members have 24 touchpoints per month with Maven's platform.

### Enrolling members into exchange plans after pregnancy

As their Medicaid pregnancy coverage nears its end, Maven supports members as they transition to other coverage options like exchange plans.

OVER

70%

of Maven Medicaid beneficiaries enroll in their first or second trimester

### **ON AVERAGE**



Members have 24 touchpoints per month with Maven's platform

### **ON AVERAGE**



Members have an average 4.9/5 postappointment rating



## 3. Assess and address unmet social needs

### HOW DIGITAL SOLUTIONS LIKE MAVEN CAN HELP

## Complete robust screening upon enrollment

Maven can directly close gaps related to social isolation by providing members with on-demand access to specialists and social support. For example, members can meet with a nutritionist or read articles to better understand how to eat healthy on a budget.



## **Close gaps through** care and education

Over 90% of members that join Maven complete our short onboarding risk assessment, allowing us to identify and address social needs. We also collect race data from two-thirds of our members, enabling us to take a nuanced approach to health equity in our clinical model.



When Maven identifies members' social needs, they can connect them with community-based organizations and other local social support to further address their needs.



Social determinants of health (SDOH)—like housing, education, and systemic racism—play an outsized role in pregnancy outcomes. According to the World Health Organization, these social needs account for **30-55% of health outcomes**. And among the Medicaid population, social needs tend to be higher. Recent research by Maven found that 89% of pregnant people with public insurance have at least one unmet social need, compared to 66% of those with private insurance.

However, many social needs often go unmet because they're not screened for during healthcare visits. As mentioned above, 85% of people are comfortable sharing their social needs with their care team digitally, regardless of the team's ability to address those needs. Unfortunately, many simply aren't given the opportunity—a JAMA study shows that only 24% of hospitals currently screen for SDOH.

## Connect members with external resources to support social needs



## 4. Offer mental health support

Medicaid beneficiaries struggle with depression and anxiety at higher rates than other groups. Maven research shows that 32% of members with a household income of less than \$35k report symptoms of anxiety, and 27% report symptoms of depression (compared to 24% and 14% among those with higher incomes). For Black and Hispanic members in particular, a lack of culturally sensitive screening tools and structural barriers may mean that they're routinely underdiagnosed for mental health issues and, as a result, don't receive necessary treatment.

Untreated mental health needs during pregnancy can have severe effects on birthing parents and their babies. Children of parents with untreated mental health conditions have a higher risk of being born preterm, not being breastfed, dying of sudden infant death syndrome, or having physical health issues. Despite these risks, mental health treatment is low during pregnancy, and access is even more limited for Medicaid beneficiaries.



## 33%

of all Maven members reported that Maven helped them manage their depression or anxiety during pregnancy

Members who had an appointment with a Maven Mental Health provider are 6x more likely to report help managing their mental health

HOW DIGITAL SOLUTIONS LIKE MAVEN CAN HELP

### Screen for mental health needs

Maven screens members for mental health conditions using clinically-validated screeners including PHQ-2 and EPDS. These assessments help Care Advocates connect members with appropriate care to address their mental health needs and ensure the members are enrolled in mental health care programs on Maven.

### Provide on-demand access to mental health providers

Mental health providers are available on Maven 24/7/365 to support members. 33% of all Maven members reported that Maven helped them manage their depression or anxiety during pregnancy. Members who had an appointment with a Maven Mental Health Provider are 6x more likely to report that Maven helped them manage their mental health compares to members who did not.

### Connect members with virtual support communities

Through digital family health solutions like Maven, members can access clinically-vetted mental health content and connect with support groups of peers experiencing similar challenges.



## 5. Increase the number of beneficiaries receiving routine pre- and postpartum care

The American College of Obstetricians and Gynecologists (ACOG) recently updated its standards for pre- and postnatal care. The <u>redesigned model</u> includes a tailored prenatal care plan, telemedicine support, and support for SDOH. However, many providers and health systems are lagging behind recommendations. <u>One study</u> <u>found</u> that only half of pregnant people received the recommended urinalysis, and less than three-quarters had a timely obstetric lab panel.

After giving birth, Medicaid beneficiaries also struggle with insufficient postpartum care. Despite the fact that a third of deaths occur **43 days or more postpartum**, many beneficiaries lose Medicaid eligibility **60 days after giving birth**. Other states <u>limit the number of covered in-person postpartum visits</u> to one or two. As a result, birthing parents are often left with inadequate—or no—support as they navigate the often-challenging postpartum period.



## Complement in-person care with digital support

Maven fills the gaps between in-person care appointments, providing members a convenient and accessible way to regularly communicate with specialists.



## Leverage education to help members adhere to routine pre- and postpartum care

By engaging members early and often, Maven provides ongoing education to help members understand the importance of routine pre- and postpartum care needed to meet HEDIS and other quality metrics. Maven's clinical model is designed to empower members to take control of their health, allowing them to advocate for themselves to get the care they need.



## Understand unmet social needs that prevent routine care adherence

Maven's enrollment screeners flag unmet social needs—like a lack of reliable transportation—that may prevent members from receiving necessary routine care. Care Advocates work with members to connect them to community resources to help fill these social need gaps, such as transportation to get to their in-person visits.



# Supporting Medicaid populations with Maven

As the leading digital maternity solution, Maven is well-positioned to support MCOs looking to better care for their Medicaid populations. Our comprehensive digital family health platform provides members with unlimited access to equitable care for all their reproductive health needs. To learn more about how Maven drives outcomes for Medicaid beneficiaries, <u>contact us today.</u>



