Obstetric Medical Home: DHS Updates

May 10, 2017

Wisconsin Department of Health Services

Agenda

- DHS Updates
  - Infant mortality data
  - Obstetric Medical Home (OBMH) updates
  - Benefits policy

Infant Mortality Data

Disparities in Infant Mortality Rate by Maternal Age Wisconsin, 2007-2015				
Maternal Age (Grouped)	Mother's Race/Ethnicity			
	All race/ethnicity	White (Non-Hispanic)	Black/African American (Non-Hispanic)	B/W Disparity
Under 20 years	10.4	9.3	14.1	1.5
20-29 years	6.2	5.1	13.4	2.6
30-39 years	5.0	4.3	15.5	3.6
40+ years	8.0	7.5	16.1	2.1

Infant Mortality Data

Disparities in Infant Mortality Rate by Maternal Age Wisconsin, 2007-2015				
Maternal Education	Mother's Race/Ethnicity			
	All race/ethnicity	White (Non-Hispanic)	Black/African American (Non-Hispanic)	B/W Disparity
Less than High School	9.3	9.3	14.6	1.6
High School Graduate	7.2	6.4	11.9	1.9
More than High School	4.7	4.0	14.3	3.6

OBMH Updates

- Updated OBMH Guide
    - Issue new guide in Summer 2017
- Contract language updates for 2018-2019
- Standardized Annual Report (Due first business Monday of June)

OBMH Updates

- Enhanced payment clarifications for $1,000 or $2,000. For clinics to receive the initial $1,000 the pregnant woman must:
  - Meet defined eligibility criteria, **and**
  - Meet the criteria for the delivery of services.
- MetaStar chart review reminders
  - MetaStar will review only those records specified on the OBMH record request list (remote and paper).
  - No chart review/no payment.

OBMH Data

Calendar Year	*Enrolled in OBMH	Eligible for Enhanced Payment	Percentage of patients enrolled in OBMH eligible for enhanced payment to clinic
2012	774	626	81%
2013	660	609	92%
2014	546	494	90%
Total	**1,981**	**1,729**	**87%**

*Numbers include women enrolled in the OBMH <u>and</u> invoiced by the clinic.

OBMH Data

Calendar Year	Healthy Birth Outcome	Poor Birth Outcome	Total Dollar Spend
2012	570	56	$1,196,000
2013	554	55	$1,163,000
2014	453	41	$947,000
Total	**1,577**	**152**	**$3,306,000**

Benefits Policy Updates

- Effective January 1, 2017, the DHS updated it's inpatient hospital payment policy for long-acting reversible contraception (LARC) for both fee-for-service claims and managed care encounters to ensure the services are reimbursed appropriately. LARCs include intrauterine devices (IUDs) and contraceptive implants.

- Under the updated reimbursement policy, an additional payment will be made to a hospital when a LARC is provided immediately postpartum in the inpatient setting.

- Hospitals are aware of this change in reimbursement policy.

Benefits Policy Updates

- Under the authority of the 2015-16 Biennial State Budget (2015 Wisconsin Act 55), Wisconsin Medicaid now covers maternity and newborn care provided by Medicaid-enrolled licensed midwives.
  - Maternity care includes antepartum care, delivery and postpartum care.
  - Newborn care is covered up to 6 weeks after delivery.
- Midwives must be licensed under Wis. Stat. §440.982, to qualify for Medicaid enrollment.

Benefits Policy Updates

- This change went into effect on January 1, 2017.

- DHS disseminated this information in a Provider Update (Update #2016-51).

- To-date, twenty-eight midwives have enrolled in Wisconsin Medicaid.

- There are 4 licensed midwives enrolled in Dane County, 3 in Milwaukee County and 1 in Rock County.

	COUNTY	CITY	PROVIDERS
	ASHLAND	Ashland	2
	BROWN	Green Bay	2
	CRAWFORD	Wauzeka	2
	DANE	Cambridge	1
	DANE	Madison	2
	DANE	Middleton	1
	DUNN	Knapp	1
	EAU CLAIRE	Eau Claire	1
	GRANT	Lancaster	1
	LAFAYETTE	Mineral Point	1
	MILWAUKEE	Milwaukee	1
	MILWAUKEE	Wauwatosa	2
	OUTAGAMIE	Appleton	4
	ROCK	Janesville	1
	ST. CROIX	River Falls	1
	VERNON	Viroqua	2
	WASHBURN	Springbrook	1
	WAUPACA	Iola	1
	MICHIGAN	Wakefield	1
Unique Count	**16**	**19**	**28**

Benefits Policy Updates

- Licensed midwives provide services to members with routine prenatal care needs.
  - The midwives scope of practice dictates prohibited practices, as well as consultation and referral requirements.
- Licensed midwives must be in the HMO's network to provide services to members enrolled in the particular HMO.

13

Questions?

Q&A