



# M E T A S T A R

Higher quality. Healthier lives.

# Obstetric Medical Home Best Practices Seminar

Record Review Process and Results

Jenny Klink

October 6, 2022

# Program History and Purpose

- Initiated in January, 2011
- Program Goals
  - Improve Birth Outcomes
  - Reduce Birth Disparities
- Comprehensive, coordinated prenatal and postpartum care to high risk SSI/BadgerCare+ members
- Services areas
  - Southeastern Wisconsin
  - Dane County
  - Rock County

# Eligibility Requirements

- Enroll in the OB Medical Home within the first 16 weeks of pregnancy.
- Meet one or more of the following criteria:
  - Be less than 18 years of age.
  - Be African American.
  - Be homeless
  - Have a chronic medical or behavioral health condition which will negatively impact the pregnancy.
  - Had a prior poor birth outcome, defined as one or more of the following:
    - Baby born at a low birth weight (less than 2,500 grams or 5.5 pounds).
    - Baby born preterm (gestational age less than 37 weeks).
    - Neonatal/early neonatal death (baby died within the first 28 days).
    - Stillbirth (fetal demise after 20 weeks gestation).

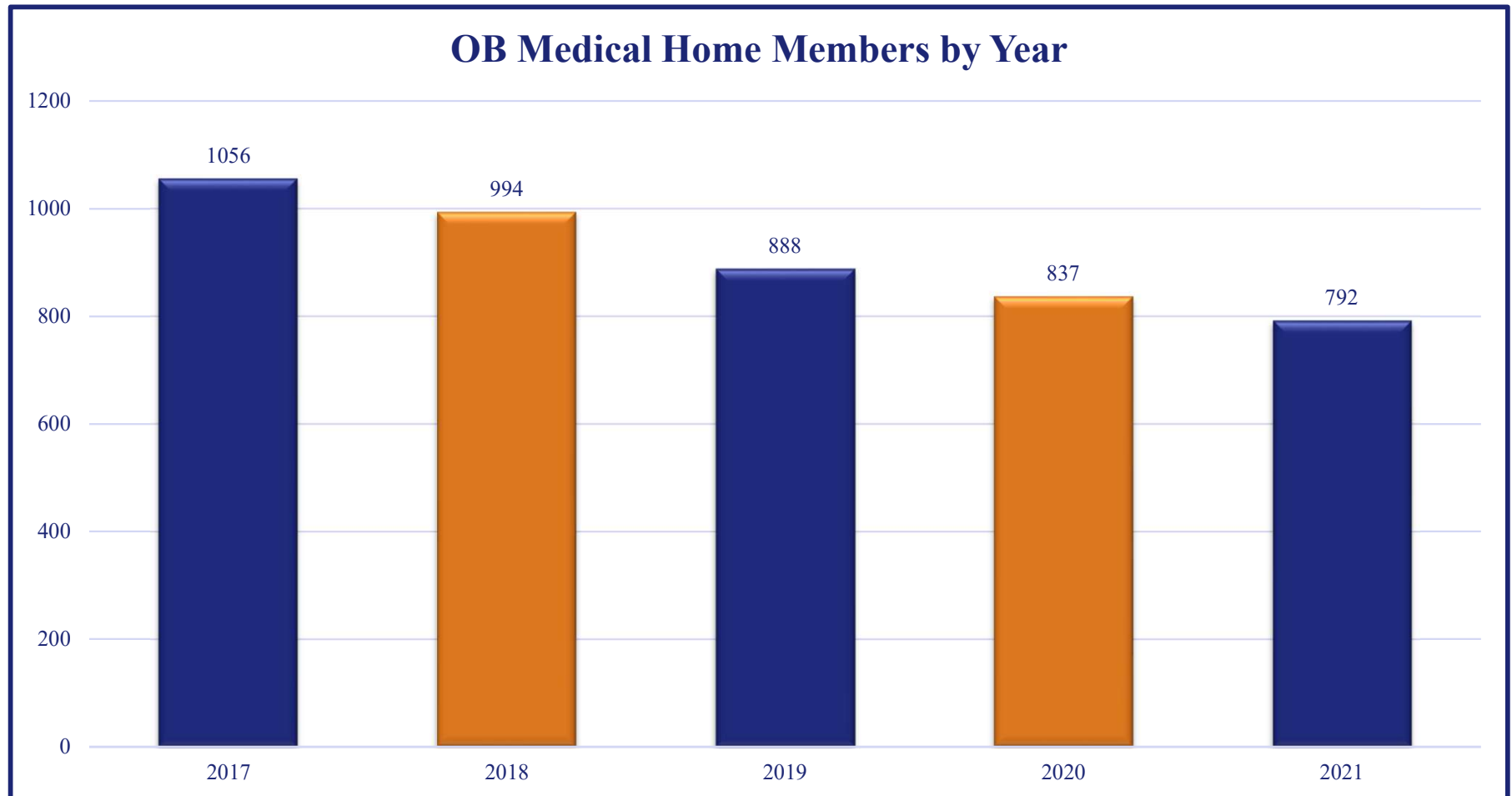
# Program Requirements and Resources

- The requirements of the OB Medical Home can be found in the *Contract for BadgerCare Plus and/or Medicaid SSI HMO Services*, January 1, 2022-December 31, 2023.

[Contracts \(wi.gov\)](#)

- OB Medical Home ForwardHealth Informational Page  
[Obstetric Medical Home Initiative \(wi.gov\)](#)

# Member Participation in OB Medical Home



# OB Registry

- The OB Registry is designed to collect, use and store information about women enrolled in the OBMH initiative.
- The registry is maintained by MetaStar
- Registry website location:  
<https://apps.metastar.com/apps40/commercial/OBMH/OBMH/Login.aspx>
- Administrator and User guides are available on the home page of the registry.

# MetaStar Quarterly Reviews

- 100% of OBMH member records are reviewed in the quarterly reviews except pregnancy loss prior to 20 weeks
- Purpose of the review:
  - Verify enrolled members meet the defined contract requirements;
  - Collect data to support potential future program refinements; and
  - Collect data to support program evaluation.



# Selection Process

- MetaStar sends a reminder to HMOs providing the date that selection will be pulled from Registry.
- MetaStar pulls all mothers from the registry meeting criteria.
- This list is sent to HMOs to confirm accuracy; rationale for cases removed from selection are provided.
- MetaStar reviews and finalizes the lists and sends to HMOs with request for record submission or direct access to electronic health record.

# Review Criteria

- Enrollment Verification
- Prenatal Visits
- Care Coordination
- Discharge Plan
- Chronic Condition Follow Up
- Birth outcome
- Smoking and Immunizations
- Completed Record Submission

# Review Results

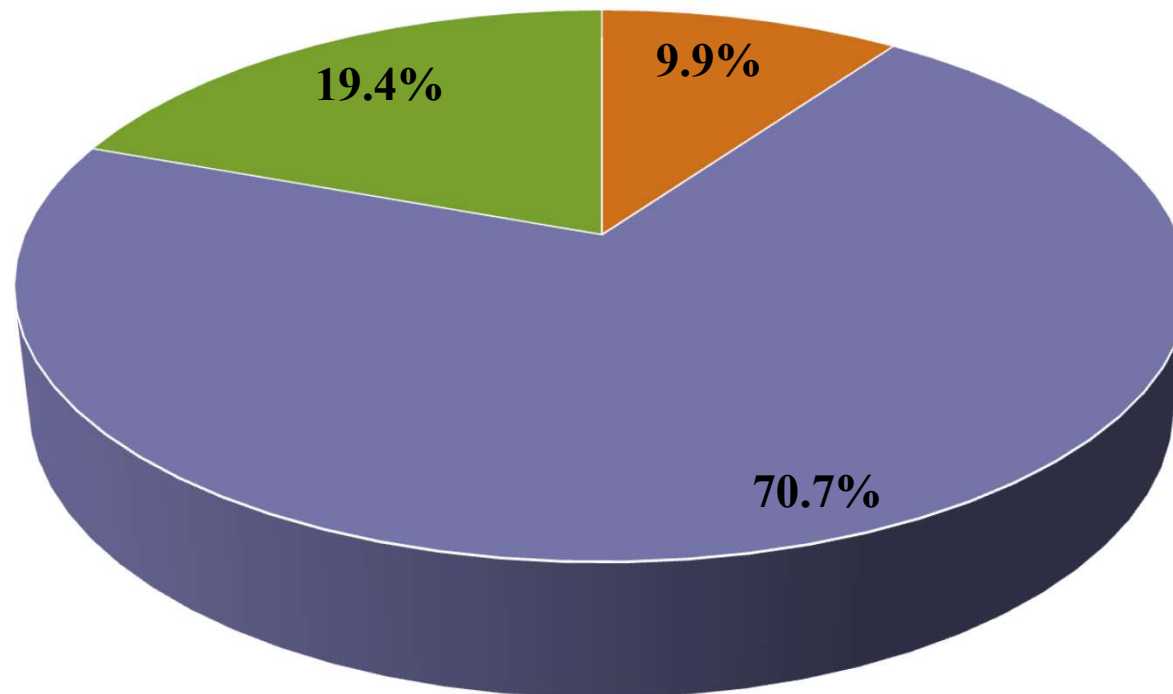
- Annual report
  - Year to Year Results
  - Results by Clinic and HMO
  - State Rates
- Submitted to DHS each year.
- Reports posted by DHS on ForwardHealth website.
- Reminder:
  - Home visit requirement suspended during the public health emergency (PHE).
  - Telehealth permitted for all prenatal and postpartum care during the PHE.

# Calendar Year (CY) 2021 Birth Results

- 12 HMOs and 15 clinics participated in the OBMH.
- MetaStar reviewed 792 enrollee records.
- 87.6% of records submitted were considered complete.
- A complete record includes:
  - Clinic prenatal/postpartum care;
  - PNCC documentation; and
  - Birth outcome information.

# Ethnicity

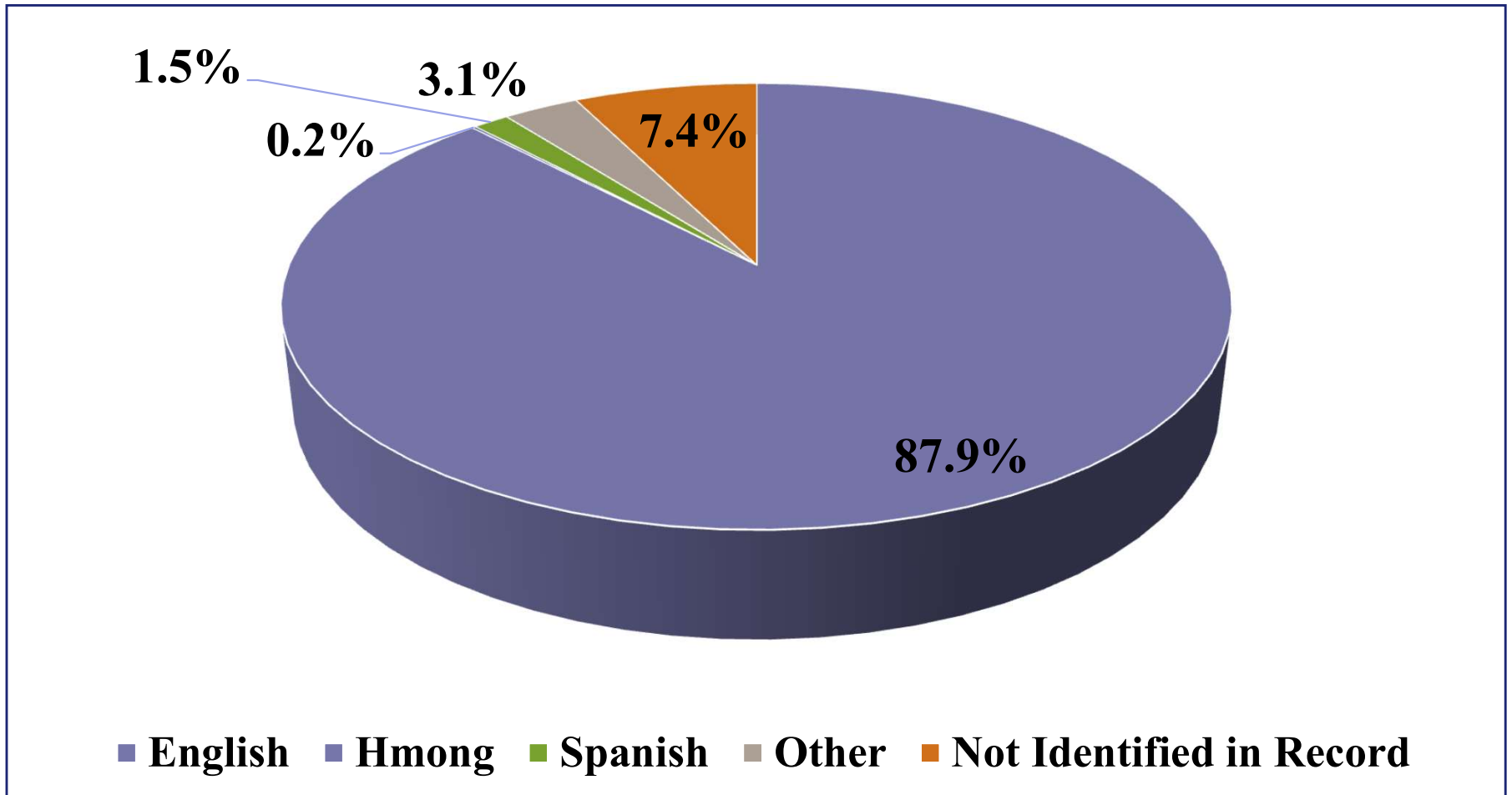
618/792 Records



■ **Hispanic/Latino**   ■ **Not Hispanic/Not Latino**   ■ **Not identified in record**

# Preferred Language

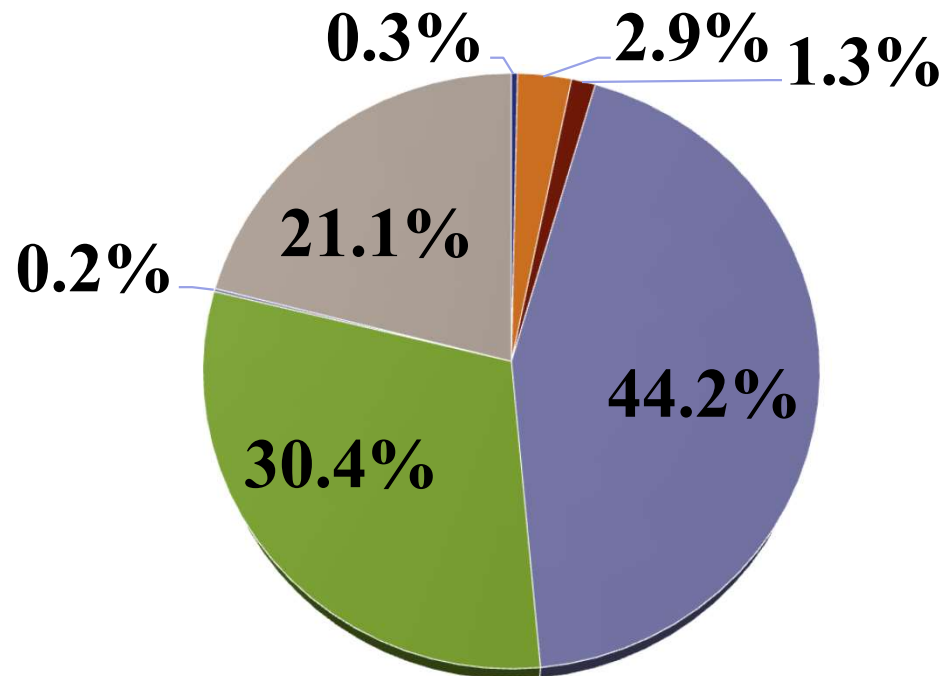
618/792 Records



# Race

618/792

AS5



- American Indian/Alaska Native
- Bi-Racial
- Not Identified in Record
- White
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander

**Slide 15**

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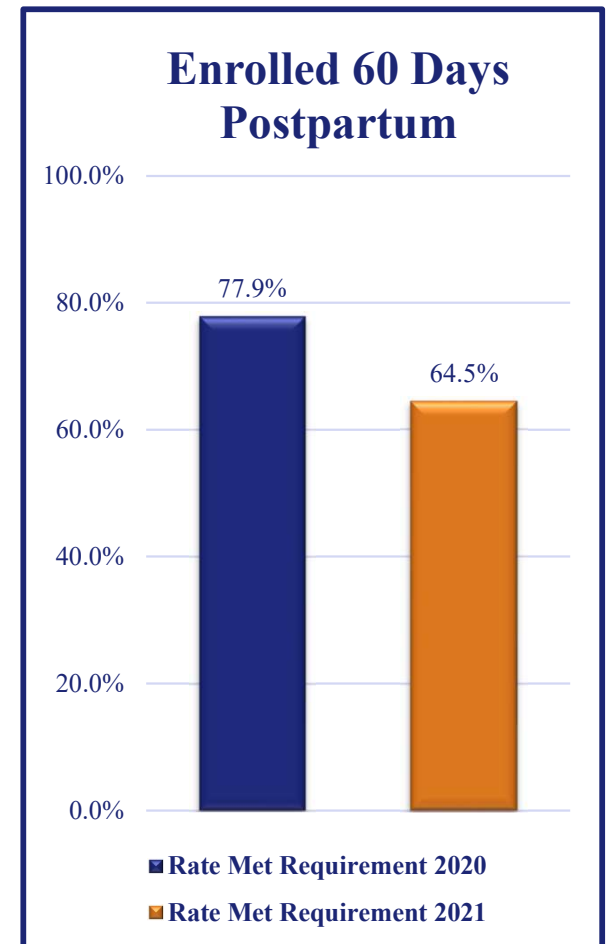
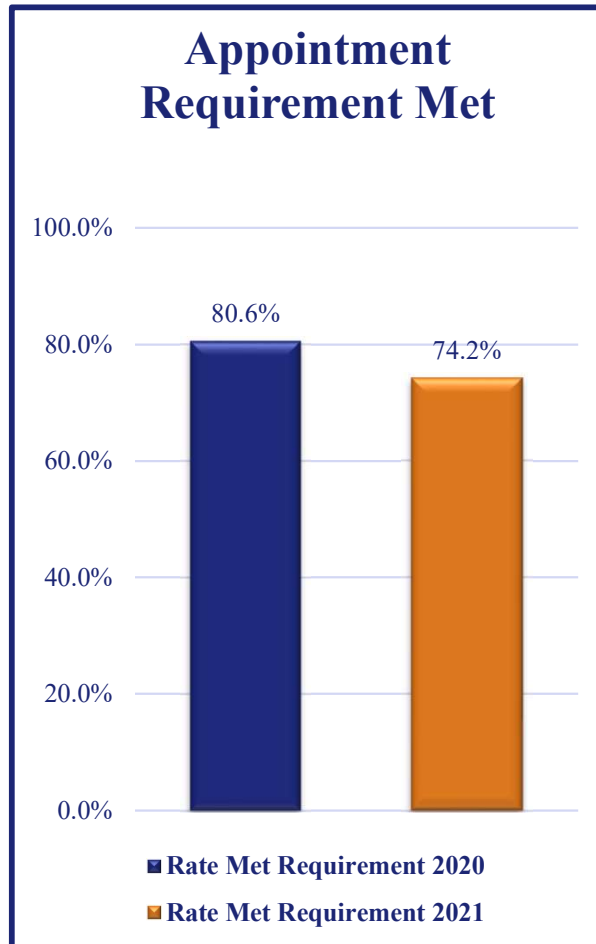
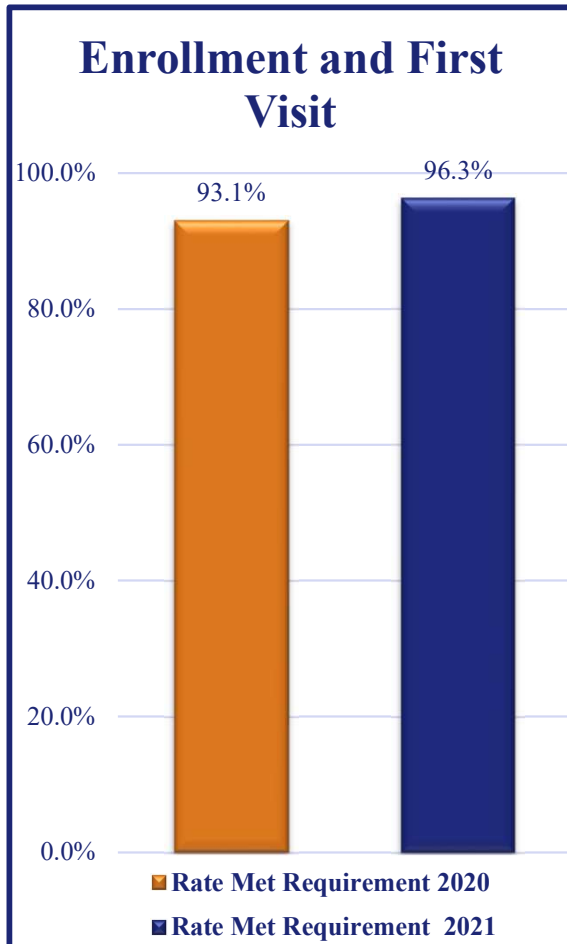
**AS5**

This pie chart looks different from the other two. The formatting is different. Maybe because it has more sections? Not a big deal, but caught my eye.

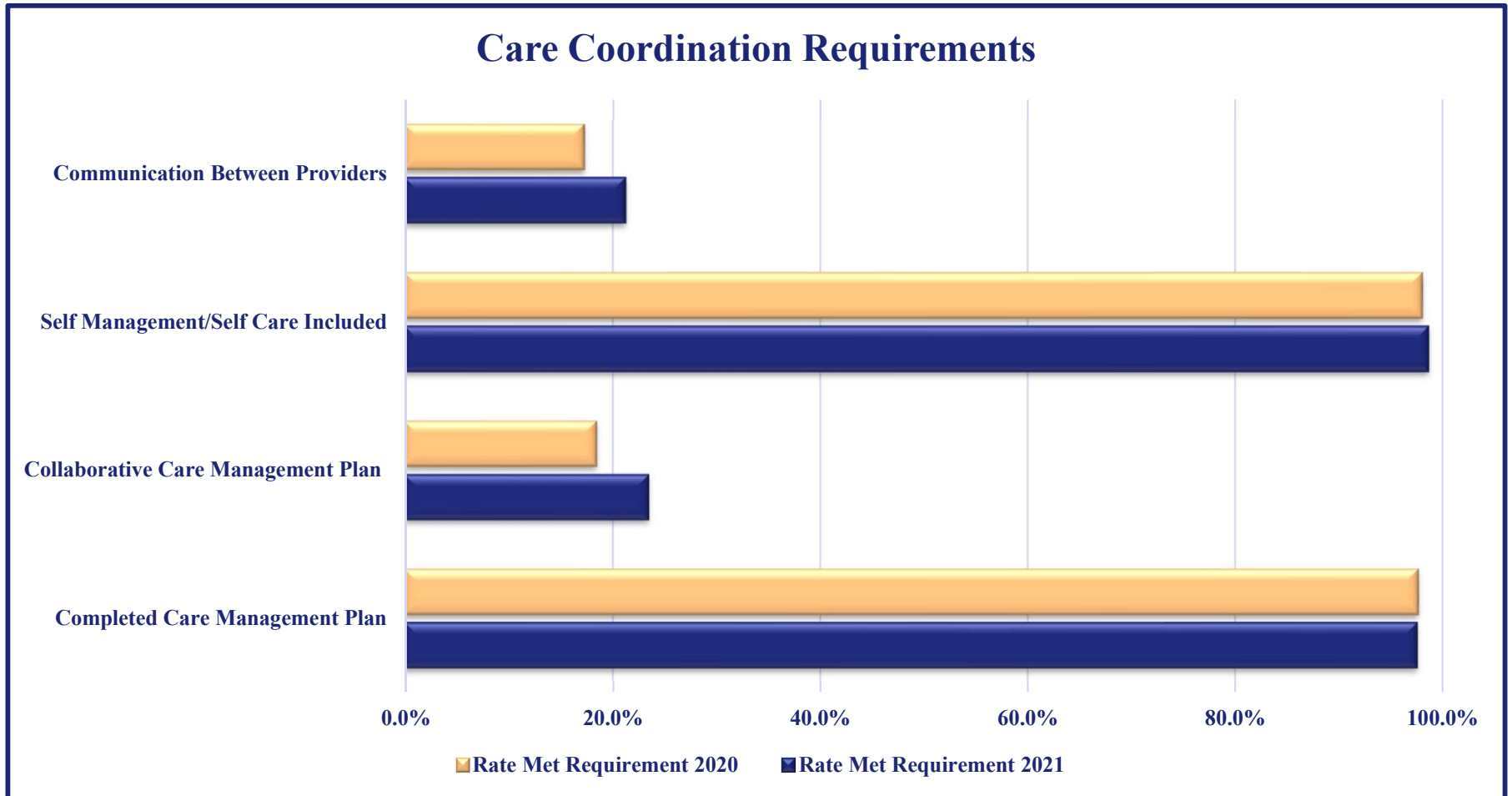
Alicia Stensberg, 10/5/2022



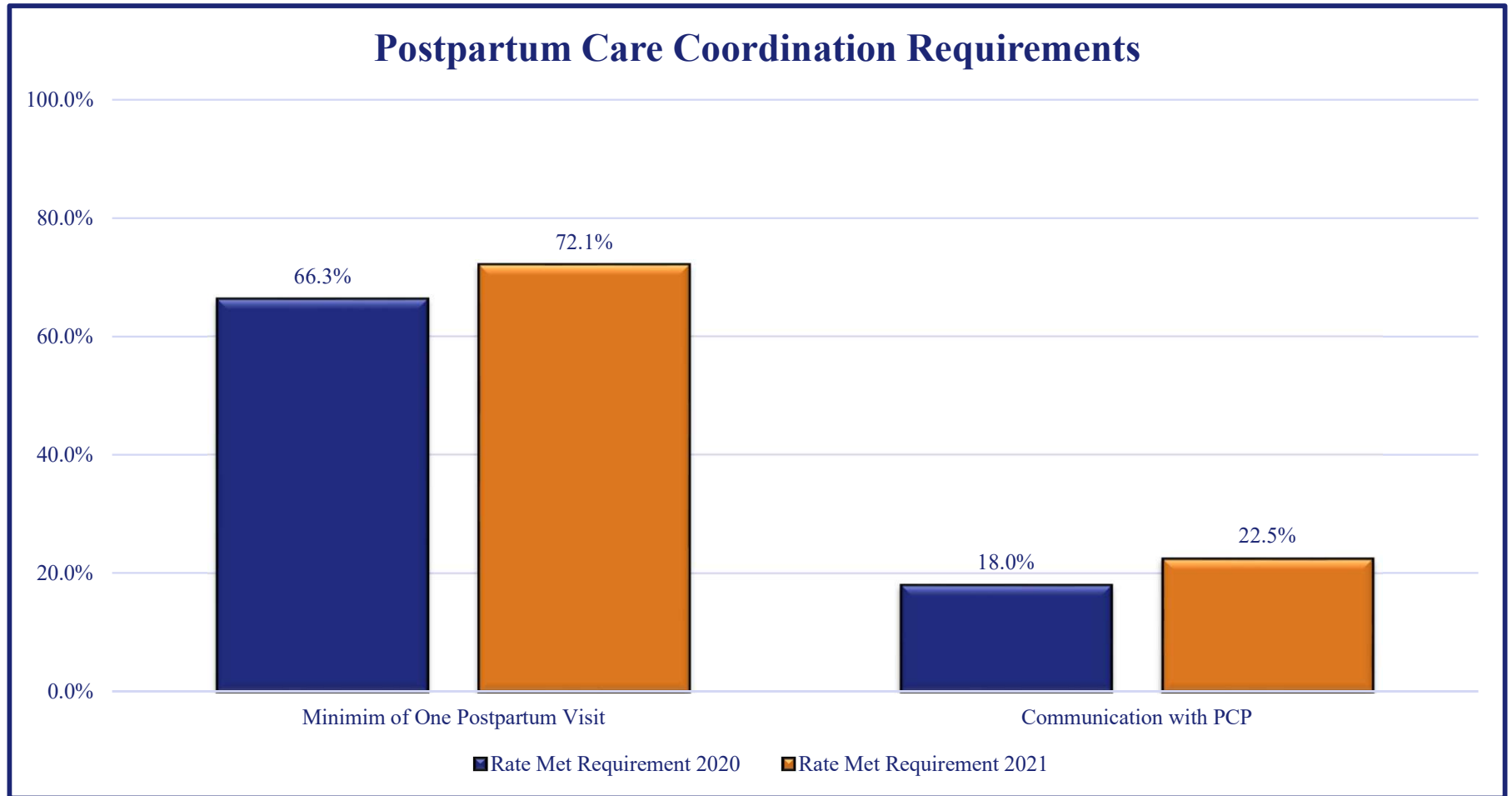
# CY 2021 Results



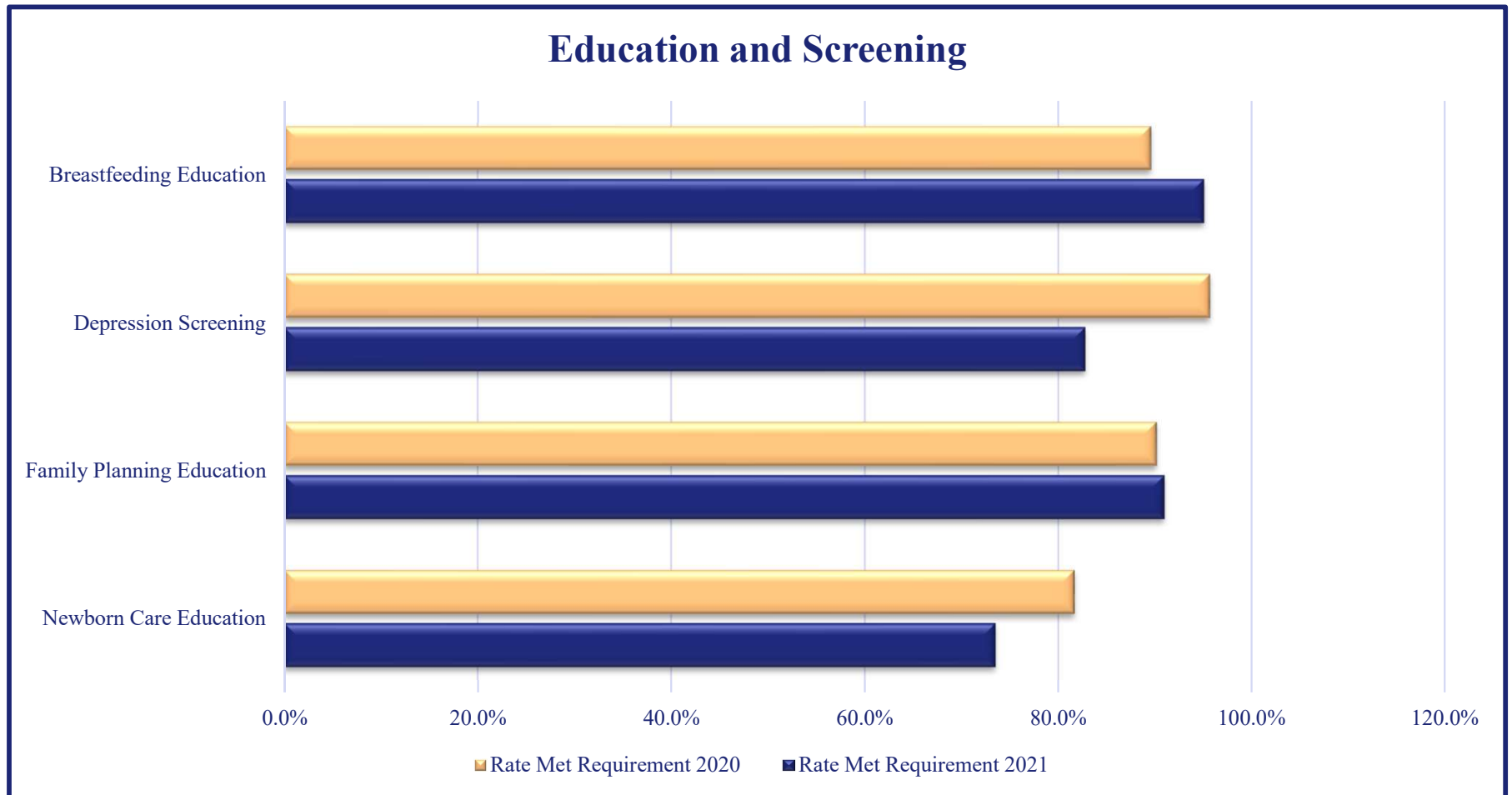
# CY 2021 Results



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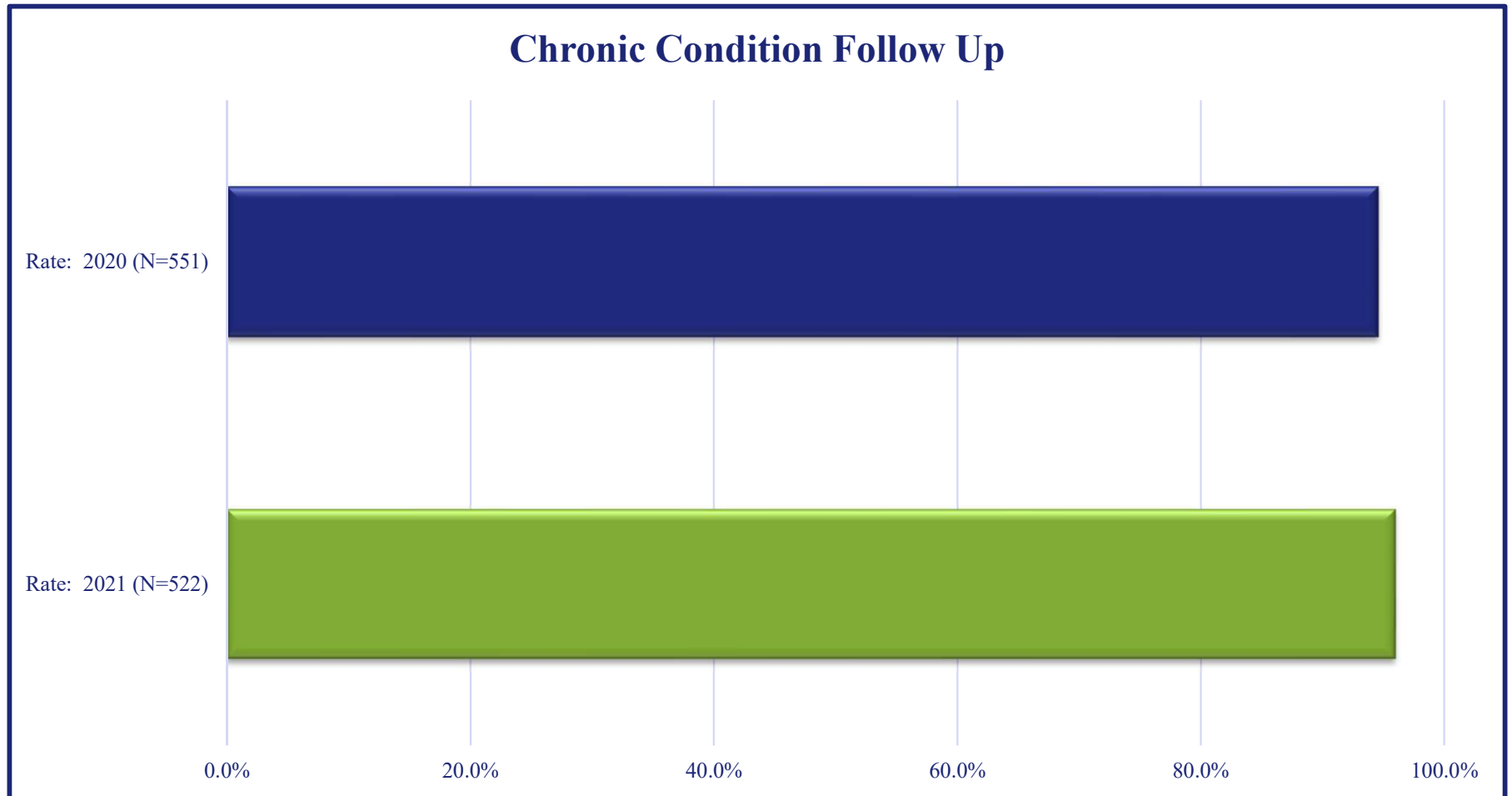


# CY 2021 Results

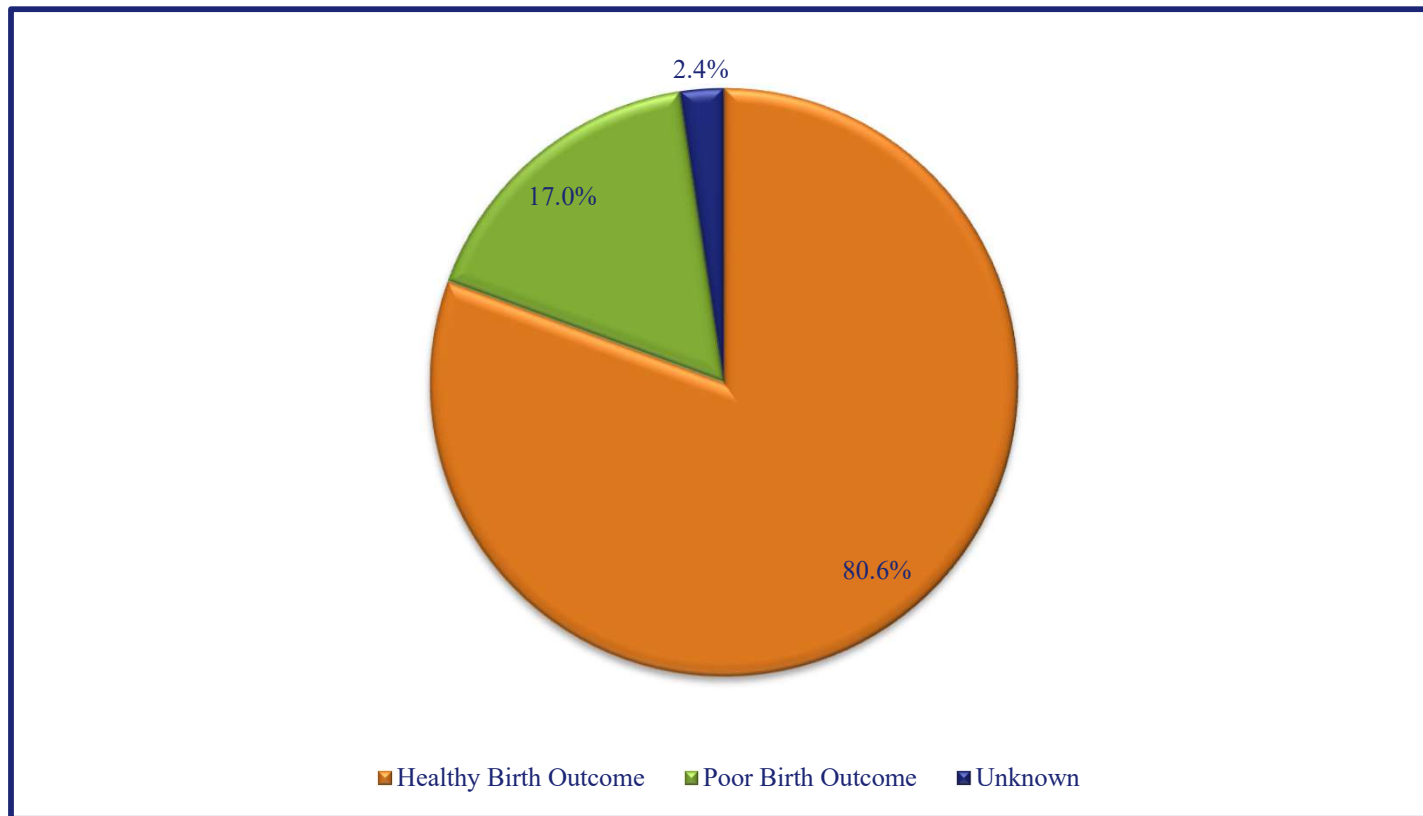
65.2% of women had a chronic condition. The most common chronic conditions included:

- Asthma;
- Cardiac disease;
- Diabetes mellitus;
- HIV/AIDS;
- Hypertension,
- Pulmonary disease;
- Behavioral health (including depression, smoking and substance abuse); and
- Morbid obesity.

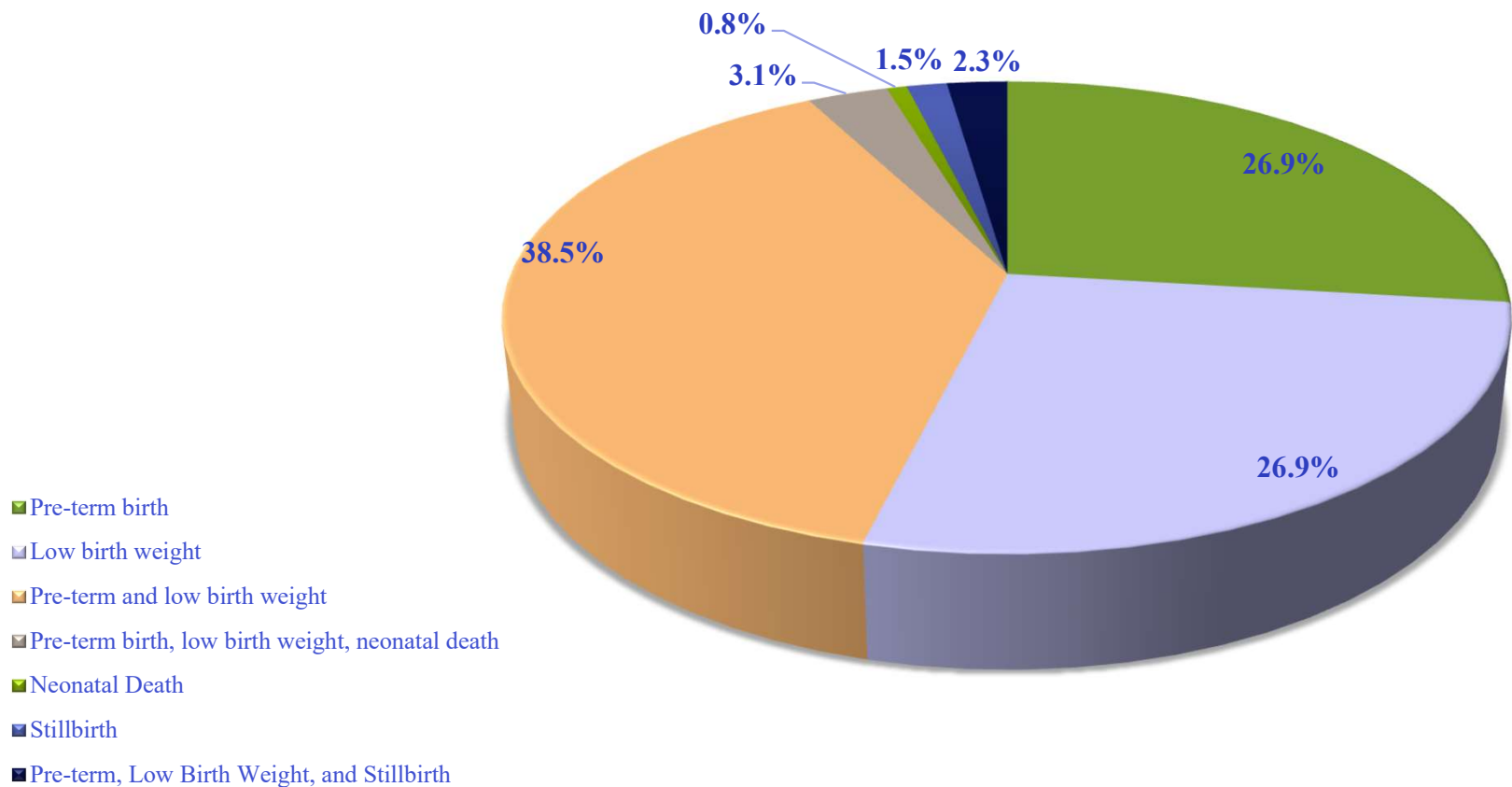
# CY 2021 Results



# CY 2021 Birth Outcomes



# CY 2021 Poor Birth Outcome Rationale





# CY 2021 Strengths

- Records demonstrate members are being enrolled within the first sixteen weeks of pregnancy.
- Prenatal care is encouraged and coordinated as demonstrated through prenatal visits which allowed a high level of follow up for chronic conditions.
- Clinics are conducting frequent assessments of depression and providing interventions to address throughout the prenatal and postpartum periods.

# CY 2021 Opportunities & Recommendations

- Conducting and documenting collaborative care plans. The care plans indicate collaboration when documentation includes evidence the care plan was created in conjunction with the care coordinator, the primary care provider (PCP), and the member.
- Increasing collaboration between the primary care provider and obstetric care team.
- Improving members' engagement in their postpartum care to increase the rate of postpartum visits.

# Questions?



# Contact Information:

MetaStar, Inc.

2909 Landmark Place

Madison, WI 53713

608-441-8216

[www.metastar.com](http://www.metastar.com)

[jklink@metastar.com](mailto:jklink@metastar.com)