Vital Records in CMS Innovation Center Evaluations

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Strong Start for Mothers and Newborns

- Goal: lower incidence of preterm birth, lowbirthweight, and maternity and newborn care costs among Medicaid/CHIP beneficiaries through psychosocial supports

- Care enhancements in maternity care homes, group prenatal care (CenteringPregnancy), birth centers

- 27 awardees with sites in 30+ states

- Served ~50,000 women 2013-2017

Vital Records for Strong Start Evaluation

- Goal: determine outcomes and costs among Strong Start participants vs. similar women not enrolled in Strong Start through an analysis of birth certificates (linked to Medicaid data as possible).
- Advantages:
  - No awardee burden for data collection
  - Consistent source across states
  - High reliability on gestational age and birthweight
- Issues:
  - Identified data difficult to obtain (time consuming and costly; process different for every state)
  - Medical chart review comparisons reveal varying data quality (some variables show high concordance, others moderate or low)
  - Medicaid participants not always identified (hard to construct comparison group)
  - Data quality in other fields

Potential Evaluation Uses

- Communities of Health for Children and Youth (CHCY):

- Examine impacts of birth outcomes and other factors on subsequent child health, well-being, and cost

- Bundled Maternity Payment Model (BuMP)
  - opioids in pregnancy and neonatal abstinence syndrome (NAS)

- Examine impacts of opiate abuse treatment for pregnant women on pregnancy outcomes

Priorities for CMMI

- Ease of obtaining beneficiary-identified vital records
- Reliability of Medicaid field to identify births covered by CMS
- Reliability of demographic data
- Reliability of health and outcomes data
- Accurate identification of birth attendant