

# Cost-Reducing Strategy: Anthem Blue Cross (Elevance)

Presented at the Health Care Affordability  
Board Meeting on January 24, 2024

# Anthem Blue Cross (Elevance) Cost-Reducing Strategy

Dr. Tiffany Ingliss, National Medical Director, Women & Children's Health

Mohit Ghose, State Affairs



# Improving Maternity quality, equity, and outcomes: *Health plan programs driving value*

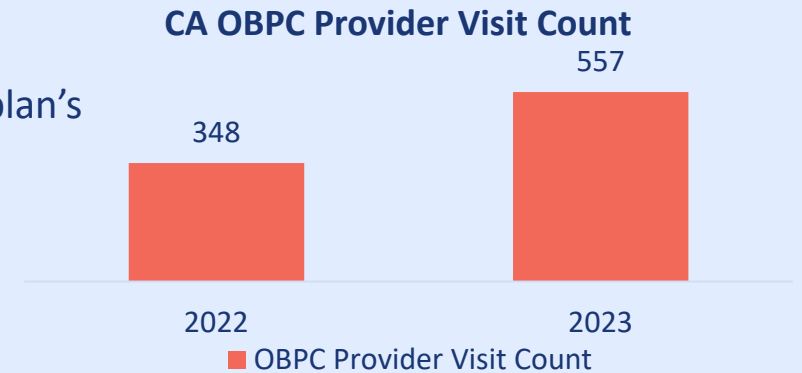
Dr. Tiffany Inglis, MD, FACOG  
January 23 & 24, 2024

# Executive Summary: California Value Enhancement Strategies

1

## OB Practice Consultants (OBPC):

- A trusted clinical liaison, facilitating engagement and alignment with the health plan's strategy
- CA has 3 OBPCs – hired in Q2 2022
- **95% Provider Satisfaction rate** since CA implementation



2

## CA Doula Pilot (supported by OBPCs) that included:

- Women with doula had lower prenatal and birth costs when compared to women not using a doula
- Women using a doula had significantly lower odds of postpartum depression or postpartum anxiety

\*Significant at alpha level < 0.05

3

## Postpartum Maternal Morbidity and Morbidity Initiative

supporting provider to educate members on next best steps for cardiovascular and behavioral health causes of M&M in post delivery time:

- Shared 82 times in 2023
- Increased value through improved outcomes

4

## Coming Soon

- **Digital solution** driven by predictive analytics to provide member with education and content at their fingertips 24/7 supported by high risk personalized nursing care
- **Value Based Care** solutions to support CA state needs

# Doulas at Anthem

Based on extensive research proving **Doulas contribute to better member outcomes**, Anthem has prioritized the integration of doulas into care teams.

**Doulas are non-clinical supports who provide person-centered care to pregnant and postpartum people** through information, education, physical, social, and emotional support.

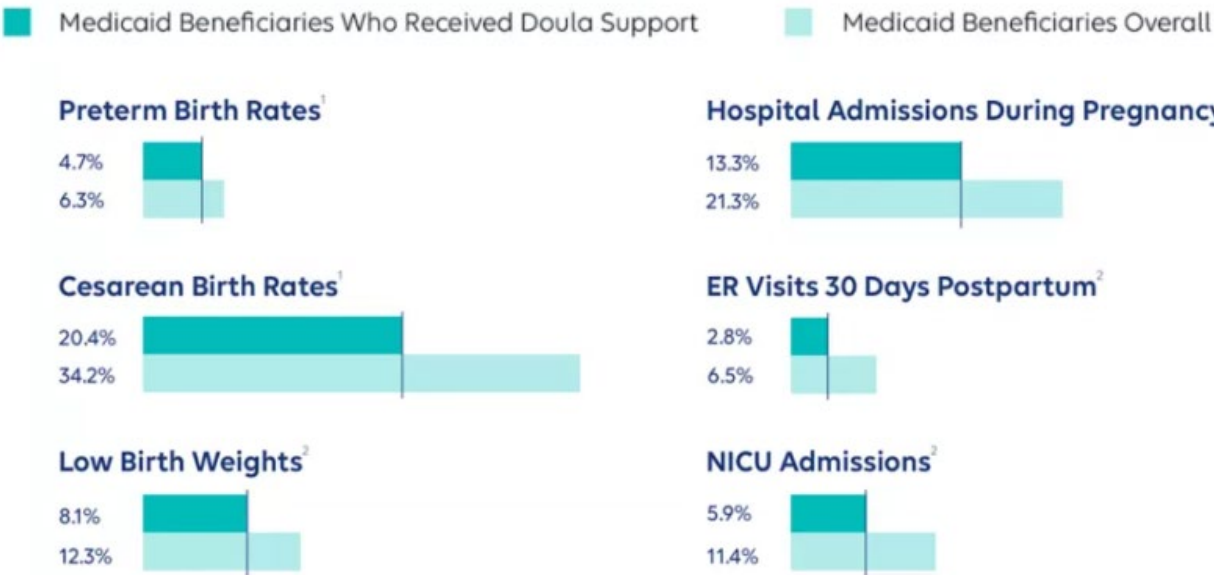
## The national Doula landscape is complex:

- Federal Bills for Medicaid coverage for Doula services have not advanced
- **State based coverage** for doula services have **not advanced in all states**
- Where coverage does exist, the **local landscape varies greatly by state**, including licensure, training requirements, scope, and coverage design

**This study, which included CA membership, helped drive policy change and increase Doula access across the enterprise.**

## The Doula Care Difference

Research has found that those with a Medicaid plan who use certified doulas during pregnancy and delivery have better health outcomes and visit the hospital less frequently.



# Public Policy Focus on Maternal and Child Healthcare

## Corporate Communications Maternal Health Landing Page

Home / Our Approach To Health / Maternal Health

### Maternal Health

Maternal-child health includes the entire pregnancy, pregnancy, delivery, and postpartum journey of a woman and child up to one year after birth.

### Maternal-Child Health

Healthy babies start with healthy pregnancies. The United States has a robust healthcare infrastructure, spending more per capita on healthcare than any other nation, but maternal health in this country has lagged behind that of other developed countries.



More than 60% of pregnancy-related deaths are preventable, and more than half (53%) happen up to one year after delivery.



More than 1,200 women died in 2020 in the United States as a result of pregnancy or delivery complications.



People who are pregnant once live more than 50 weeks from a healthy start to delivery, but more than 10% of pregnancies end in stillbirth or neonatal death.



23% of pregnancy-related deaths are due to mental health conditions (including deaths to suicide and overdose poisoning leading to substance use disorder).

### Factors Affecting Maternal Health

Supporting health holistically through the maternal-child health journey improves community health now and for generations to come. This may be the life stage in which a parent is most willing and likely to engage with the healthcare system.

“Maternal health is a core indicator of community health, and Elevance Health is working toward better maternal and child health outcomes.”

Aimee Dwyer  
National President

### Turning the Tide on Maternal Health

Healthy babies start with healthy pregnancies. The United States has a robust healthcare infrastructure, spending more per capita on healthcare than any other nation, but maternal health in this country has lagged behind that of other developed countries.

Learn More About Our New Maternal-Child Outcomes.



Q&A: How Does Where You Live Affect Maternal Health?

Maternal health starts before someone gets pregnant, so “lifelong health” is a key concept. Maternal health is not just about pregnancy and delivery, but also about the health of the person before and after pregnancy. Community health, social and population health, shared how geography can contribute to health outcomes.

## Maternal Mortality: Beating the Status Quo

Home / News / Health News / Improving Maternal Care in U.S.

### Maternal Mortality: Beating the Status Quo

A whole-health approach to helping pregnant women and infants requires closing gaps in care, boosting access and ensuring mental health resources.

By Elizabeth Choquet and Brenda Wilson | June 28, 2023, at 10:52 a.m.

Save

Comment

Facebook

Twitter

LinkedIn

Reddit



Roughly 1,200 people died during pregnancy or in the 42 days afterward from pregnancy-related causes in 2021, according to the Centers for Disease Control and Prevention. (© GETTY IMAGES)

Mothers in this country too often face unnecessary health risks. In fact, despite our unparalleled wealth and unmatched clinical health care expertise, the U.S. maternal mortality rate is double that of many developed nations.

Times to find supplemental reports on the availability of maternal care in all 50 states, plus Washington, D.C., and Puerto Rico.

Fortunately, we're seeing more organizations invest in maternal health and create tools to support women and infant health during pregnancy, birth and beyond. An Elevance Health Foundation partner, Creating Healthy Communities, is driving racially and culturally specific measures of stress in an effort to screen thousands of Black moms through community partnerships. The project aims to identify stressors and other health-related social needs affecting preterm births, and works with community-based organizations to provide appropriate interventions.

Too many families find their babies in the NICU due to preterm birth and other conditions and diagnoses. Since 2001, NICU Family Support has been a foundational program at March of Dimes, providing vital support and education to these families during this difficult time. NFI delivers family education, staff training on patient-centered care and an improved patient experience.

As business leaders and mothers, we care deeply about improving the health of pregnant women and their babies. We share this passion with many – policymakers, care providers and other key stakeholders – and it will take all of us working together to make meaningful improvements in maternal outcomes.

The status quo is not acceptable. We must come together now on actionable solutions to protect the health and well-being of our future moms and babies.

## Addressing Maternal Health Disparities: Doula Access in Medicaid

Elevance Health Public Policy Institute

### Addressing Maternal Health Disparities: Doula Access in Medicaid

September 2022

Doulas provide person-centered care to pregnant and postpartum women through information, education, and physical, social, and emotional support. They are one solution to improving birth outcomes while addressing health disparities.

#### Background

**Maternal mortality rate.** The overall maternal death rate in the U.S. rose from 17.4 deaths per 100,000 live births in 2018 to 22.8 deaths per 100,000 in 2020, with disparities continuing to increase among women identifying as Black.

- 27% total first-time mortality since 2018
- 26% among non-Hispanic White women
- 41% among non-Hispanic Black women
- 14% among Hispanic women

**Severe health complications.** In recent years the U.S. has seen a 200 percent increase in severe health complications (i.e., severe maternal morbidity) among during pregnancy and labor and delivery.

**Medicaid enrollment.** In 2020, Medicaid paid for 42 percent of all births in the U.S. and paid for a greater share of deliveries by Hispanic, Black, and American Indian and Alaska Native women compared to private insurance. The vast majority of Medicaid births were among members enrolled in one of Elevance Health's affiliated plans.

#### Maternal Mortality Rate 2018-2020

2018-2020  
Non-Hispanic White  
Non-Hispanic Black  
Hispanic  
Total

Deaths per 100,000 live births



| Year | Non-Hispanic White | Non-Hispanic Black | Hispanic | Total |
|------|--------------------|--------------------|----------|-------|
| 2018 | 17.4               | 27.1               | 14.0     | 17.4  |
| 2019 | 18.5               | 28.2               | 15.1     | 18.5  |
| 2020 | 22.8               | 31.5               | 16.2     | 22.8  |

#### Key Findings

- 34% of doula care was provided by non-certified doulas
- 16% of doula care was provided by certified doulas
- 17% of doula care was provided by non-certified doulas
- 23% of doula care was provided by certified doulas

#### Outcomes

- Women using doula care had significantly greater odds of having a term or post-term birth (as opposed to a preterm birth).
- Women receiving doula services had superior outcomes, including significantly less time in the hospital, less time in the NICU, and less time in the hospital.
- Women receiving doula services had superior outcomes, including significantly less time in the hospital, less time in the NICU, and less time in the hospital.

#### Disparities

- Higher prevalence of pregnancy complications in pregnant women using doula care was found in underserved communities in regions that lack access to the community-based doula programs that are making a real difference in the health of mothers and babies who need it most. Doula care is a key component of a comprehensive approach to improving maternal and child health outcomes.

#### Next Steps

- Doula care can be used to support doula care in underserved communities.
- Doula care can be used to support doula care in underserved communities.

## The Evidence Is There: Doulas Improve Maternal Health Outcomes

Elevance Health Public Policy Institute

### The Evidence Is There: Doulas Improve Maternal Health Outcomes

September 2022

Doulas provide person-centered care to pregnant and postpartum women through information, education, and physical, social, and emotional support. They are one solution to improving birth outcomes while addressing health disparities.

#### Background

**Maternal mortality rate.** The overall maternal death rate in the U.S. rose from 17.4 deaths per 100,000 live births in 2018 to 22.8 deaths per 100,000 in 2020, with disparities continuing to increase among women identifying as Black.

- 27% total first-time mortality since 2018
- 26% among non-Hispanic White women
- 41% among non-Hispanic Black women
- 14% among Hispanic women

**Severe health complications.** In recent years the U.S. has seen a 200 percent increase in severe health complications (i.e., severe maternal morbidity) among during pregnancy and labor and delivery.

**Medicaid enrollment.** In 2020, Medicaid paid for 42 percent of all births in the U.S. and paid for a greater share of deliveries by Hispanic, Black, and American Indian and Alaska Native women compared to private insurance. The vast majority of Medicaid births were among members enrolled in one of Elevance Health's affiliated plans.

#### Maternal Mortality Rate 2018-2020

2018-2020  
Non-Hispanic White  
Non-Hispanic Black  
Hispanic  
Total

Deaths per 100,000 live births



| Year | Non-Hispanic White | Non-Hispanic Black | Hispanic | Total |
|------|--------------------|--------------------|----------|-------|
| 2018 | 17.4               | 27.1               | 14.0     | 17.4  |
| 2019 | 18.5               | 28.2               | 15.1     | 18.5  |
| 2020 | 22.8               | 31.5               | 16.2     | 22.8  |

#### Key Findings

- 34% of doula care was provided by non-certified doulas
- 16% of doula care was provided by certified doulas
- 17% of doula care was provided by non-certified doulas
- 23% of doula care was provided by certified doulas

#### Outcomes

- Women using doula care had significantly greater odds of having a term or post-term birth (as opposed to a preterm birth).
- Women receiving doula services had superior outcomes, including significantly less time in the hospital, less time in the NICU, and less time in the hospital.
- Women receiving doula services had superior outcomes, including significantly less time in the hospital, less time in the NICU, and less time in the hospital.

#### Disparities

- Higher prevalence of pregnancy complications in pregnant women using doula care was found in underserved communities in regions that lack access to the community-based doula programs that are making a real difference in the health of mothers and babies who need it most. Doula care is a key component of a comprehensive approach to improving maternal and child health outcomes.

#### Next Steps

- Doula care can be used to support doula care in underserved communities.
- Doula care can be used to support doula care in underserved communities.

## Partnering with Providers to Improve Maternal Health

Elevance Health Public Policy Institute

### Partnering with Providers to Improve Maternal Health

May 2023

Doulas provide person-centered care to pregnant and postpartum women through information, education, and physical, social, and emotional support. They are one solution to improving birth outcomes while addressing health disparities.

#### Background

**Maternal mortality rate.** The overall maternal death rate in the U.S. rose from 17.4 deaths per 100,000 live births in 2018 to 22.8 deaths per 100,000 in 2020, with disparities continuing to increase among women identifying as Black.

- 27% total first-time mortality since 2018
- 26% among non-Hispanic White women
- 41% among non-Hispanic Black women
- 14% among Hispanic women

**Severe health complications.** In recent years the U.S. has seen a 200 percent increase in severe health complications (i.e., severe maternal morbidity) among during pregnancy and labor and delivery.

**Medicaid enrollment.** In 2020, Medicaid paid for 42 percent of all births in the U.S. and paid for a greater share of deliveries by Hispanic, Black, and American Indian and Alaska Native women compared to private insurance. The vast majority of Medicaid births were among members enrolled in one of Elevance Health's affiliated plans.

#### Maternal Mortality Rate 2018-2020

2018-2020  
Non-Hispanic White  
Non-Hispanic Black  
Hispanic  
Total

Deaths per 100,000 live births



| Year | Non-Hispanic White | Non-Hispanic Black | Hispanic | Total |
|------|--------------------|--------------------|----------|-------|
| 2018 | 17.4               | 27.1               | 14.0     | 17.4  |
| 2019 | 18.5               | 28.2               | 15.1     | 18.5  |
| 2020 | 22.8               | 31.5               | 16.2     | 22.8  |

#### Key Findings

- 34% of doula care was provided by non-certified doulas
- 16% of doula care was provided by certified doulas
- 17% of doula care was provided by non-certified doulas
- 23% of doula care was provided by certified doulas

#### Outcomes

- Women using doula care had significantly greater odds of having a term or post-term birth (as opposed to a preterm birth).
- Women receiving doula services had superior outcomes, including significantly less time in the hospital, less time in the NICU, and less time in the hospital.
- Women receiving doula services had superior outcomes, including significantly less time in the hospital, less time in the NICU, and less time in the hospital.

#### Disparities

- Higher prevalence of pregnancy complications in pregnant women using doula care was found in underserved communities in regions that lack access to the community-based doula programs that are making a real difference in the health of mothers and babies who need it most. Doula care is a key component of a comprehensive approach to improving maternal and child health outcomes.

#### Next Steps

- Doula care can be used to support doula care in underserved communities.
- Doula care can be used to support doula care in underserved communities.

6

# What does an OB Practice Consultant do?

## Provider

OBPCs visit network providers at least 16 times/month through virtual and in-person meetings to:

- Build consensus and commitment to change as a **trusted clinical liaison**, prioritizing high-quality, evidence-based care
- Facilitate enrollment and **engagement in OBQIP**
- Provide awareness of member and provider programs
- Share robust, **real-time data** with providers (*OBQIP scorecards, OBGYN KPI/Delivery Report data*)
- Coordinate **referrals to Case Management**

## OBPC



- ✓ Clinician with maternal child expertise
- ✓ Invested member of the health plan
- ✓ Aligned to enterprise strategic framework
- ✓ Engages with all OB providers in network

## Health Plan

OBPCs collaborate with health plan stakeholders and at the enterprise level to:

- Support the creation of a **high-performance network**
- Facilitate **referrals to Case Management** or other health plan services
- Participate in maternal health initiatives across the health plan to close gaps in care
- Increase **access to doula services** through collaboration with local CBOs (*Doula Grants*)
- Represent the health plan **in the community** (*Perinatal Quality Collaboratives, FIMR/MMRC meetings, health department*)

Have there been any changes in your practice as a result of discussions with your OBPC?

*"We have been more aware to **encourage smoking cessation, timeliness of prenatal & post partum care**. VBACs are encouraged and we do our best to avoid low risk c-sections."*

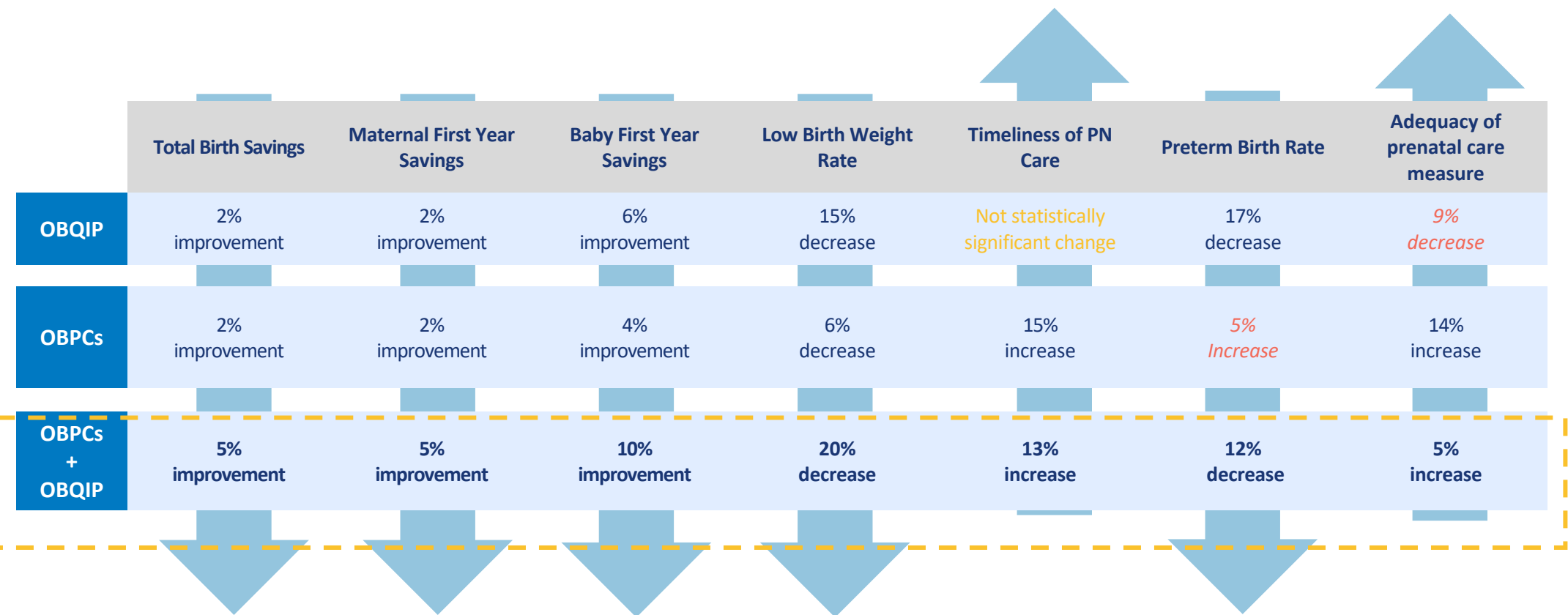
*"We are working on providing attestation within Availity for all new OB patients to help them **receive educational information** and additional benefits **during their care and after.**"*

*"**LARC process.** Attention to cesarean rates and high-risk deliveries."*

*"We are able to catch the patients that deliver and never schedule the next visit. Helps us a lot to keep up with **post partum care**"*

# Partnering OB Practice Consultants and VBS enhances quality of care

OBPCs drive birth outcomes and when combined with OBQIP deliver even greater savings and improved outcomes



Highlighting our success:

['The secret sauce': How Elevance Health uses obstetric liaisons and value-based incentives to boost maternal outcomes \(beckerspayer.com\)](#)

Advancing Health Equity:

2023 Health Equity measure included in OBQIP around hypertension

**Implicit Bias training:**

- Partnered with March of Dimes to train internal staff and in network 8 high-volume providers.

# Questions & Discussion

