

Differences in Maternal Care of Women under Medicaid vs. Private Insurance in Connecticut

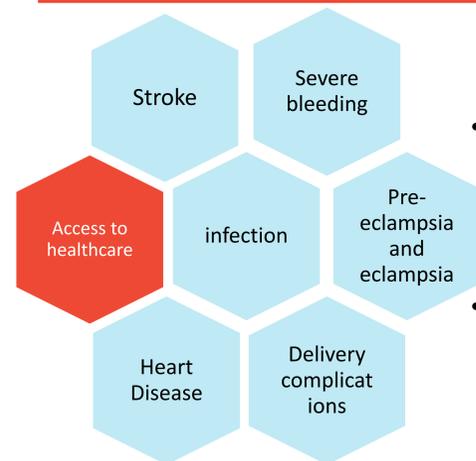
BACKGROUND

- The United States has the highest rate of maternal mortality compared to other developed countries; 700 women die from pregnancy-related complications yearly
- According to Centers for Disease Control, approximately 60% of those deaths could have been prevented with access to better medical care
- Health insurance status affects the care received by women and their newborns
- The YWCA, my community partner was interested in assessing discrepancies in maternal care of women with different types of insurance coverage

CT PLAN TO ADDRESS MATERNAL MORTALITY

- In 1965, Medicaid provided coverage for pregnant women at 47% of poverty level
- In 2010, the Affordable Care Act created opportunity for expansion to cover pregnant women at 133% of poverty level
- Still, women with Medicaid coverage are more likely to have preterm births and low birth-weight infants compared to privately insured women

TOP CAUSES OF PREGNANCY-RELATED DEATHS

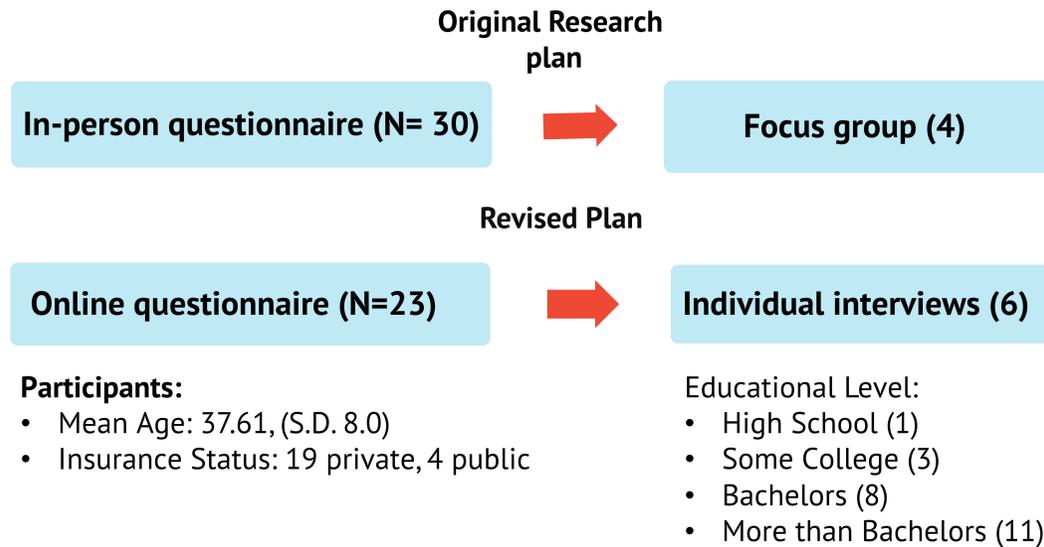


- Black women are 3x more likely to die of pregnancy-related cause than white women
- Individuals ages 35-44 are at higher risk of pregnancy-related deaths CDC.gov

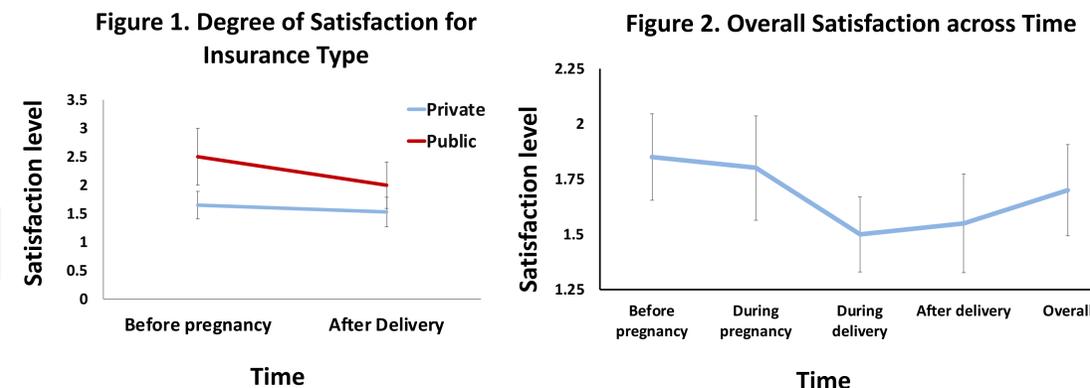
RESEARCH QUESTION

Are the gaps in maternal care of women covered by Medicaid versus women covered by private insurance in Connecticut?

METHODOLOGY



RESULTS



Finding 1: No significant difference in satisfaction between public & private insurance ($p=.60$)

Finding 2: No significant difference in satisfaction regardless of insurance type over time ($p=.34$)

Table 1. Conditions before Pregnancy

	Frequency	%
None	9	39.1
Only physical conditions	5	21.7
Only mental health conditions	5	21.7
Both conditions	4	17.4

Note. Mental health= depression and anxiety, Physical = Type 1 or Type 2 diabetes, high blood pressure, Asthma, Thyroid problems, PCOS (Polycystic Ovarian Syndrome)

Finding 3: Fourteen participants reported having physical and/or mental conditions before pregnancy

KEY INTERVIEW THEMES

Importance of postpartum visits before 6-week period

More breastfeeding/lactation services

Benefits of Midwife/Doula services during and after pregnancy

DISCUSSION

- One reason satisfaction levels did not change over time, might be that most participants had private insurance. And a subset had access to Doula/Midwife or both.
- While no significant difference was found in satisfaction between private and public insurance, the small sample size may have masked any potential differences.
- Given that 14 women reported physical, mental or both types of problems before pregnancy, more attention needs to be given to these issues.
- According to interviews with participants, improvements in maternal care could include earlier postpartum wellness visits and more breastfeeding and doula/midwife services.

LIMITATIONS

- The sample was skewed to participants who were more likely to have private insurance. The COVID-19, made it difficult to interview women who had public insurance.
- Given that the interviews were conducted by phone rather than in person, that may have limited information women were willing to reveal.

ACKNOWLEDGEMENTS

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