

Effects of Medicaid Managed Care and Medicaid Managed Care Penetration On Potentially Avoidable Maternity Complications

The effects of Medicaid Managed Care on pregnancy-related complications affecting mothers during their delivery hospitalizations were examined using the Potentially Avoidable Maternity Complications (PAMCs) indicator. PAMCs are a set of pregnancy-related complications believed to be avoidable with timely access to primary and prenatal health care. PAMCs range from patient behaviors that providers should identify and attempt to change, such as drug, alcohol or tobacco use, to medical conditions that should be detected and treated, such as urinary tract infections leading to pyelonephritis. Hospital discharge information from California, Florida, Maryland, New York, and South Carolina were used for the study, focusing on delivery PAMCs.

Key Findings

- There were no PAMC risk differences between residents of rural and urban areas.
- Participation in Medicaid Managed care did not appear to increase risks for pregnant women. In two of the five states studied, mothers in Medicaid managed care (MMC) had lower PAMC risks than those in Medicaid fee-for-service (MFFS). In the three other states, risks did not differ between those in MMC and MFFS.
- Greater MMC penetration was associated with reduced PAMC risks for mothers in MMC. For each increase of 1% in the proportion of mothers enrolled in Medicaid managed care in a mother's county of residence, PAMC risks were reduced: by 0.83% in Maryland, and by 1.07% in New York.
- Risks differed across race/ethnicity groups:
 - For African Americans, adjusted PAMC risks were higher than for whites in four of the five states.
 - For Hispanics, adjusted PAMC risks were lower than for whites in three states:
 - For Asians, adjusted PAMC risks were substantially lower than for whites in the four states with a sufficient number of Asian mothers to be studied.

Method Notes

- The analysis used multi-level logistic analysis, controlling for individual, area, and hospital characteristics.
- With hospital discharge data, it cannot be determined whether women in MMC were in better health early in their pregnancies than those in MFFS.
- The full report can be obtained from the South Carolina Rural Health Research Center.