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# **Medicaid Maternal Health Initiatives**

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# New York State Medicaid Perinatal Care Standards

- Overarching policy applicable to all Medicaid perinatal care providers, including medical care facilities or public or private not-for-profit agencies or organizations, physicians, licensed nurse practitioners, and licensed midwives practicing on an individual or group basis, and managed care plans that contract with these providers.
- Includes guiding principles which state that services must be delivered in a high-quality, person-centered, cohesive, and comprehensive manner and all providers must adopt a clinical practice philosophy that: is consistent with current standards of care; applies a health equity framework to eliminate racial and ethnic inequities, implicit bias, and racism; demonstrates cultural humility with and sensitivity; promotes timely access; promotes comprehensive biopsychosocial risk assessment; uses an integrated care model; commits to continuous quality improvement.
- [https://www.health.ny.gov/health\\_care/medicaid/standards/perinatal\\_care/](https://www.health.ny.gov/health_care/medicaid/standards/perinatal_care/)

# Postpartum Coverage Period Extension

- The postpartum Medicaid coverage period increased from 60 days to 12 months, effective 3/2023.
- All pregnant New York State Medicaid members receive the same length of coverage at the conclusion of a pregnancy, regardless of immigration status or how their pregnancy ends.
- The 12-month postpartum period begins on the last day of the pregnancy and ends on the last day of the 12th month after the end of the pregnancy.

# MEDICAID MATERNAL HEALTH ACTIONS

## STATE FISCAL YEARS 2022-2026

- Additional **lactation counselor** certifications covered by Medicaid (effective 6/2022)
- Increase in reimbursement rates for **midwifery services** (7/2022)
- Expansion of reimbursement of **Noninvasive Prenatal Screening** to include coverage for all pregnant Medicaid members (7/2022)
- Expansion of **remote patient monitoring service** coverage for pregnant/postpartum people (10/2022)
- Coverage of **Community Health Worker services** for pregnant/postpartum people (10/2023) and all children under age 21 (1/2024)
- Expansion of coverage for **Spinal Muscular Atrophy Carrier Screening** (10/2023)
- Coverage of **Medical Nutrition Therapy** provided by Registered Dietitians (1/1/2024)
- Statewide Coverage of **Doula Services** (3/2024)
- Planned:* Expansion/Redesign of lactation support services benefit (1/2026)

# SDP Hospital, Low-Risk Cesarean Delivery Reduction

In July 2023, CMS approved a preprint for a state directed payment designed to improve maternal health by reducing the number of low-risk Cesarean deliveries.

- **Payment Arrangement Dates:** 04/01/2023 to 03/31/2025.
- **Provider Class:** In-network hospitals providing labor and delivery services to MMC members with a minimum of 500 MMC deliveries in SFY22.
- **Payment Type:** Pay-for-performance (no risk).
- **Investment:** \$ 38 million for the 12-month period ending 03/31/2025.



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# PERFORMANCE MEASURE

## Low-Risk Cesarean Section Delivery

Pregnant Individuals with a first delivery at 37-weeks gestation or beyond, have a singleton pregnancy with a fetus in vertex presentation.

- **Denominator:** Nulliparous Medicaid Managed Care (MMC) members with deliveries that occurred during the measurement year resulting in a live singleton newborn in the vertex position.
- **Numerator:** MMC members in the denominator that had a Cesarean delivery.

Measure developed based on the Joint Commission NTSV measure.

- Exclusions based on Joint Commission and AHRQ criteria.
- Rate determined from Department data pull of encounter data from the Medicaid Data Warehouse (MDW).



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# PAYMENT DETAILS

- **Statewide Performance:** SFY22 baseline 21%; SFY25 goal 14%.
- **Measurement Year 1 (SFY24):** Improvement over SFY22 baseline.
  - For hospitals at or below the statewide goal of 14%, target performance is 14%.
  - For hospitals above the statewide goal of 14%, target performance is a 1% reduction from SFY22 baseline rate.
- **Measurement Year 2 (SFY25):** Improvement over SFY24 performance.
  - For hospitals at or below the statewide goal of 14%, target performance is 14%.
  - For hospitals above the statewide goal of 14%, target performance is a 10% improvement of the gap-to-goal (statewide goal of 14%).
- **Incentive Amount:** Annual hospital performance calculated at the close of each MY, following a 6-month runout period.
  - All hospitals that meet with individual target receive payment.
  - The total amount of the incentive pool is allocated among the hospitals based on a %-to-total of MMC deliveries.



# TIMELINE AND RESULTS

Date of Delivery	Claims Runout End Date	Analysis Completion Date	MCO Payments to Provider Date
<b>MY1</b> April 1, 2023 to March 31, 2024	09/30/24	12/31/24	03/31/25
<b>MY 1</b> Results	35 of the 61 hospitals eligible for the program (57%) met their performance targets and earned an incentive.		
<b>MY2</b> April 1, 2024 to March 31, 2025	09/30/25	12/31/25	03/31/26



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# MY2 PROGRESS & NEXT STEPS

- **Preliminary Data:** For MY2 through Q2 (for deliveries that occurred between April 1, 2024 and September 30, 2024) 28 of the 61 hospitals are on track to be within their performance targets.
- **Next Steps:** In October 2025 data will be available to complete the analysis for MY2.

Date of Delivery	Claims Runout End Date	Analysis Completion Date	MCO Payments to Provider Date
MY2 April 1, 2024 to March 31, 2025	09/30/25	12/31/25	03/31/26



# SDP Community, Comprehensive Postpartum Visit

In November 2024, CMS approved a preprint for a state directed payment designed to improve maternal health by increasing the number of timely comprehensive postpartum visits provided to members.

- **Payment Arrangement Dates:** 07/01/2024 to 03/31/2025.
- **Provider Class:** In-network primary care and specialty physician practices that provide perinatal services, including Ob/Gyn physicians, midwives, and family practice physicians.
- **Payment Type:** Add-on payment for postpartum visits identified by CPT code 59430 or Level 2 CPT code 0503F.
- **Investment:** \$ 5.9 million for the 9-month period ending 03/31/2025.



# EVALUATION MEASURE

## HEDIS Postpartum Care (PPC)

Postpartum (PP) rate, which is the percentage of deliveries that received postpartum care on or between seven (7) and 84 days after delivery.

- **Denominator:** Medicaid Managed Care (MMC) members that delivered a live birth during the measurement year.
- **Numerator:** MMC members in the denominator that had a postpartum care visit with an Ob/Gyn physician or midwife or family practice physician on or between seven (7) and 84 days after delivery.

**Statewide Performance:** SFY23 baseline 69.3%; SFY25 goal 72.3%.



# PAYMENT DETAILS

- **Incentive Amount:** Providers will receive an additional reimbursement of \$ 208.55 via a special payment term for providing a timely postpartum visit. This payment is in addition to any global/current billing practices around maternity services.
- **Coding:** Providers will submit a claim for a postpartum visit performed within 12-weeks of delivery, identified by CPT code 59430 or Level 2 CPT code 0503F.
- **Attestation:** When billing this service, the provider is attesting to meeting all *The American College of Obstetrics and Gynecology (ACOG)* and the *American Academy of Pediatrics (AAP)* postpartum visit recommendations, including a postpartum depression screening.
- **Multiple Encounters:** One comprehensive postpartum visit per member/delivery is eligible for incentive. If more than one encounter is received per member/delivery, the provider who performed the bulk of prenatal services for the member receives the incentive payment.



# TIMELINE

Date of Delivery	Comprehensive Postpartum Visit Period End Date	Claims Runout End Date	Analysis Completion Date	MCO Payments to Provider Date
July 1, 2024 to September 30, 2024	12/23/24	06/23/25	08/31/25	11/30/25
October 1, 2024 to December 31, 2024	03/25/25	09/25/25	11/30/25	02/28/26
January 1, 2025 to March 31, 2025	06/23/25	12/23/25	02/28/26	05/31/26

\*\*\* Data is not yet available to provide results \*\*\*



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# QUESTIONS?

## CONTACT US:

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