KMMC
KANCARE MEANINGFUL MEASURES COLLABORATIVE

ISSUE BRIEF

PREGNANCY OUTCOMES: MEANINGFUL MEASURES IN KANCARE
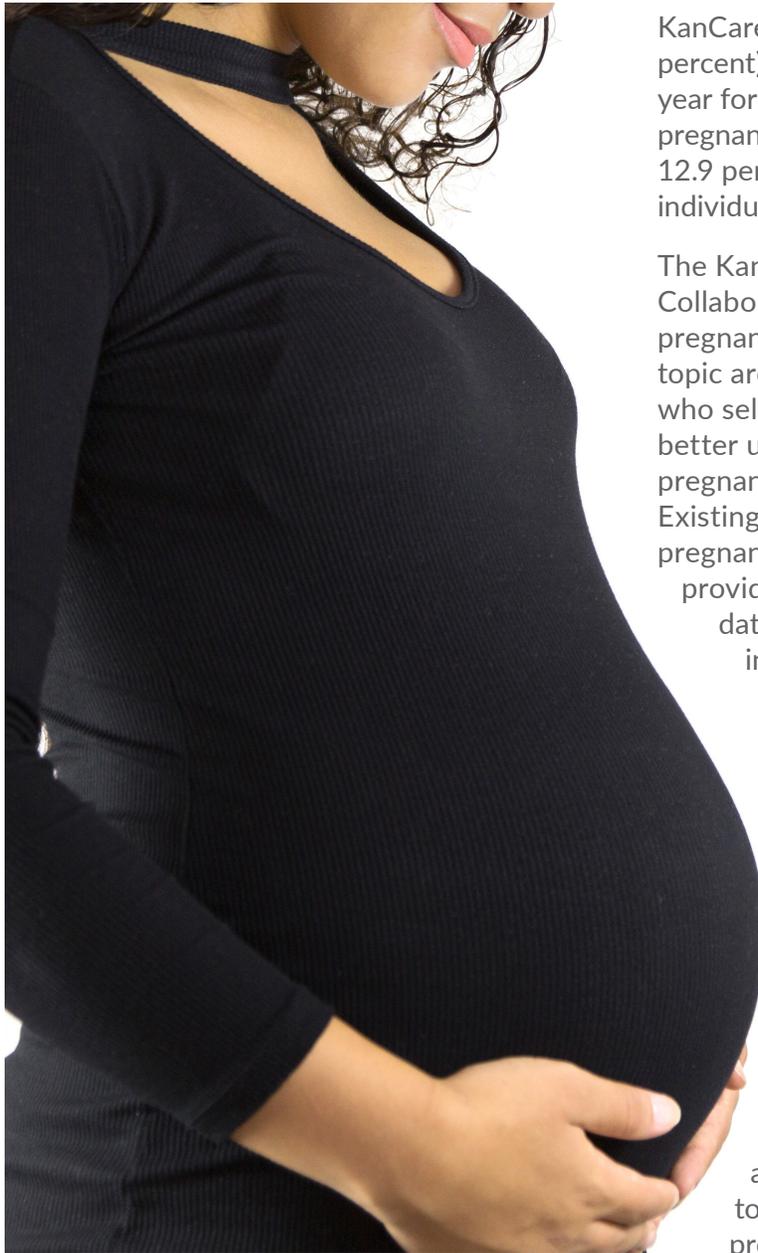
KanCare covered nearly four in ten (39 percent) births in Kansas in 2018, the latest year for which data were available, and pregnant women and other parents comprised 12.9 percent of the more than 400,000 individuals enrolled in KanCare each month.

The KanCare Meaningful Measures Collaborative (KMMC) has identified pregnancy outcomes as one of its priority topic areas. In particular, stakeholders who selected the topic were interested to better understand how KanCare impacts pregnancy outcomes. This brief highlights Existing Meaningful Measures reported on pregnancies covered under KanCare and provides information on other available data that could address gaps in the information currently reported on pregnancy outcomes.

The data are reported as _examples_ of the information currently available; therefore, this brief does not seek to interpret the data or to address the programmatic implications of the findings.

Instead, it focuses on opportunities to improve the quality of information available on the topic with the assumption that meaningful data collection and analysis are foundational to all work to improve outcomes for those whose pregnancies are covered by KanCare.

Figure 1. **Examples of Meaningful Measures for Pregnancy Outcomes**

Existing Meaningful Measures	New Meaningful Measures	Other Recommendations
• Timeliness of prenatal care. • Postpartum care.	• Birth weight. • Gestational age. • Infant mortality.	• Identify if disparities exist in measures. • Explore use of the Pregnancy Risk Assessment Monitoring System (PRAMS) data.

Note: Check out the full set of recommendation for pregnancy outcomes here: https://bit.ly/2Diax7B.

Figure 2. **Definitions of Existing Meaningful Measures for Pregnancy Outcomes**

Timeliness of Prenatal Care
The percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester, on the enrollment start date or within 42 days of enrollment in the organization.

Postpartum Care
The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.

Source: National Committee for Quality Assurance

Meaningful Measures for Pregnancy Outcomes

Meaningful Measures identified by KMMC address questions posed by KanCare stakeholders. For pregnancy outcomes, the Meaningful Measures include existing process measures that are already reported and a new set of clinical outcomes measures that could be derived from claims data (*Figure 1*).

Two existing process measures that were identified as critical to understanding pregnancy outcomes in KanCare were timeliness of prenatal care and postpartum care. Prenatal care is care received prior to giving birth, while postpartum care refers to health care visits after giving birth. Receiving prenatal and postpartum care can impact health outcomes for new mothers and infants.

## Understanding the Existing Meaningful Measures

The Existing Meaningful Measures are from the Healthcare Effectiveness Data and Information Set (HEDIS) developed by the National Committee for Quality Assurance (NCQA) and are Centers for Medicare and Medicaid Services (CMS) core quality measures. The definitions of timeliness of prenatal care and postpartum care according to NCQA are outlined in *Figure 2*.

The latest available data on the performance of the KanCare managed care organizations (MCOs) on both measures has been aggregated and is provided in *Figures 3 and 4*. For comparison, the average performance of Medicaid plans across the U.S. also is provided.

Timeliness of Prenatal Care

In 2018, 75.5 percent of deliveries in KanCare received timely prenatal care, compared to the average rate of 81.5 percent for Medicaid plans nationwide (*Figure 3*, page 3). Between 2013 and 2017, KanCare was consistently below the national average by 10.5-13.3 percentage points. In 2018, however, the difference

Figure 3. Percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester, on the enrollment start date or within 42 days of enrollment in the organization

KanCare: 71.4% (2013), 70.4% (2014), 67.4% (2015), 68.4% (2016), 69.3% (2017), 75.5% (2018)

Average for Medicaid Plans Nationwide: 81.9% (2013), 82.4% (2014), 80.0% (2015), 81.7% (2016), 81.1% (2017), 81.5% (2018)
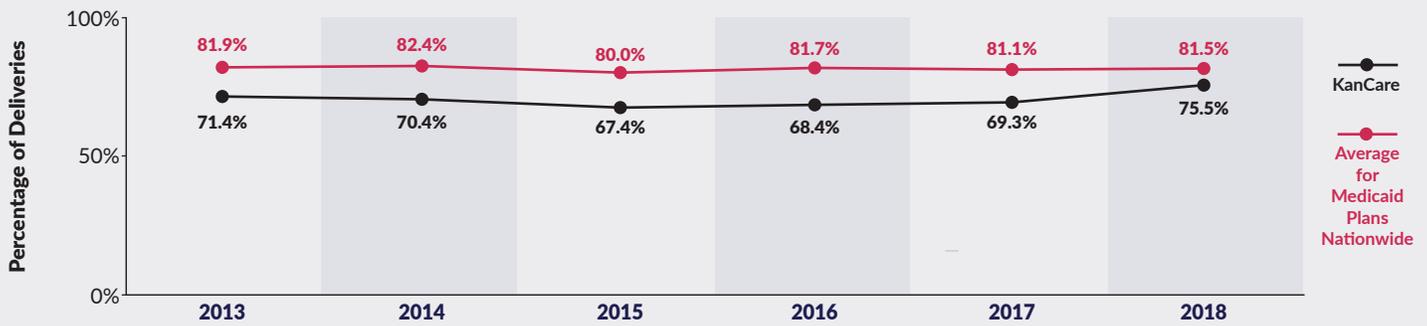
Source: KanCare data for 2013-2017 was reported by the Kansas Foundation for Medical Care and is available in Table 2 (page 109) in the 2018 KanCare evaluation report, available here: https://bit.ly/2XCDGB4. The 2018 KanCare data was reported by the Kansas Foundation for Medical Care and is available in Table B2 (page 112) in the KanCare Program Annual External Quality Review Technical Report, available here: https://bit.ly/2Ec07Xl. The Medicaid plan data was calculated by NCQA and is available here: https://bit.ly/31k4Opu.

Figure 4. Percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery

KanCare: 58.5% (2013), 55.8% (2014), 57.5% (2015), 58.0% (2016), 61.1% (2017), 58.2% (2018)

Average for Medicaid Plans Nationwide: 61.3% (2013), 61.8% (2014), 60.9% (2015), 63.7% (2016), 64.4% (2017), 63.6% (2018)
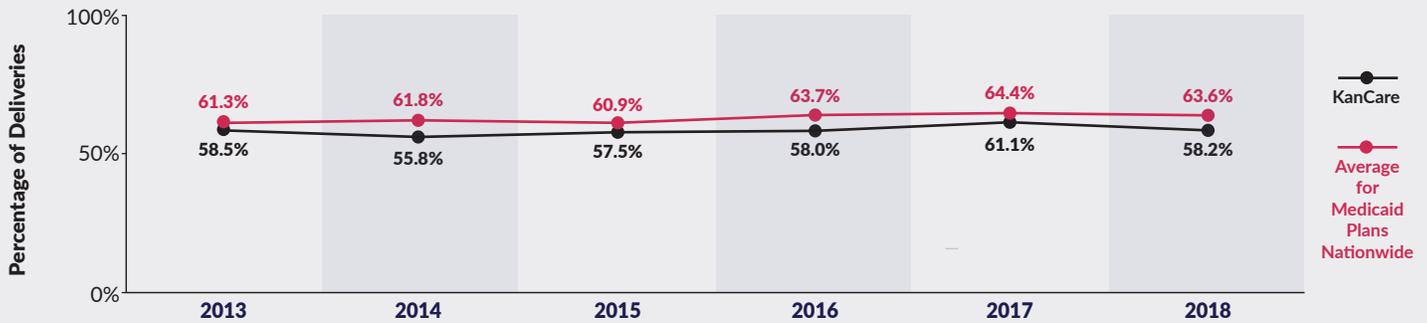
Source: KanCare data was calculated by the Kansas Foundation for Medical Care and is available in Table 2 (page 109) in the 2018 KanCare evaulation report, available here: https://bit.ly/2XCDGB4. The 2018 KanCare data was reported by the Kansas Foundation for Medical Care and is available in Table B1 (page 108) in the KanCare Program Annual External Quality Review Technical Report, available here: https://bit.ly/2Ec07Xl. The Medicaid plan data was calculated by NCQA and is available here: https://bit.ly/31k4Opu.

between KanCare and Medicaid plans nationwide was only 6.0 percentage points.

Postpartum Care

In 2018, 58.2 percent of deliveries in KanCare received a postpartum visit, compared to the average rate of 63.6 percent for Medicaid plans nationwide (*Figure 4*). Between 2013 and 2018, the difference between KanCare and Medicaid plans across the U.S. remained stable.

Considerations

Timeliness of prenatal care and postpartum care are key Meaningful Measures to understand how KanCare is performing for nearly 40 percent of all births in Kansas. Of note, between 2017 and 2018, the percentage of deliveries in KanCare with a timely prenatal visit increased by 6.2 percentage points.

While these measures are essential, they may not be sufficient to provide a comprehensive picture, as they do not describe the outcomes of KanCare pregnancies. Outcome measures related to pregnancy are key to knowing not just how care was delivered but how that care impacted the health of the mother and baby. Meaningful outcome measures identified by KMMC members include birth weight, infant mortality and gestational age, among others. Although these outcome measures are not currently available to the public, they can be derived from health insurance claims data. Reporting and further analyzing these meaningful process and outcome measures would help providers, health plans, KanCare and policymakers identify at risk populations and areas, as well as approaches to improving health care delivery and outcomes related to pregnancy.