

# CenteringPregnancy Pilot Project (Focused Clinical Study)

December 20, 2018

## **Purpose and Agenda**

- Purpose:
  - To provide an introductory overview of the CenteringPregnancy Pilot Project.
- Agenda items to be discussed:
  - CenteringPregnancy Pilot Project -
    - Background
    - Goals & Objectives
    - Methodology
    - Outcome Measures
    - Clinic Participation Requirements
    - Projected Timeline
    - Questions



# Background: What is the CenteringPregnancy care model?

- A structured, well-established, model of prenatal care delivery that is an alternative option to the traditional model of prenatal care.
- In the CenteringPregnancy care model, traditional 1-on-1 prenatal care visits with obstetric clinicians are replaced by clinic facilitated group visits of 8–10 women who are due at approximately the same time, in addition to 1-on-1 visits with an obstetric clinician.
  - A CenteringPregnancy prenatal visit typically lasts about 2-hours. At each visit, a clinician examines each patient individually, and the rest of the time is spent in facilitated group sessions using a structured curriculum that addresses key relevant topics that help pregnant women attain a healthy pregnancy course, a successful delivery, and a healthy baby.
- The CenteringPregnancy care model is developed and administered by the Centering Healthcare Institute (CHI).
  - CHI licenses and accredits clinics that provide the CenteringPregnancy model of care.
  - CHI provides obstetric clinics with the education and training needed to implement the CenteringPregnancy care model.



## Background: Reasons Behind the CenteringPregnancy Pilot Project

- Maternal mortality and maternal-child health are high-priority public health issues to New York State (NYS).
- CenteringPregnancy is one of the 10 high-priority action items of the New York State's First 1,000 Days on Medicaid Initiative which aims to improve the health and welfare of children in their first 1,000 days of life.
  - First 1,000 Days on Medicaid Initiative Proposal # 4: Requests that the NYS Medicaid program implement a 2-year CenteringPregnancy pilot project to evaluate the impact of expanding access to the CenteringPregnancy care model in areas that are known to have poor birth outcomes.



# **Goal and Objectives**

- <u>Goal</u>:
  - To evaluate the impact of expanding access to the CenteringPregnancy model of prenatal care in the areas of poorest birth outcomes in NYS by looking at 2 key outcome measures:
    - Rates of low birth weight
    - Rates of preterm birth
- Objectives:
  - Assist obstetric practices, that are located in geographic areas of poorest birth outcomes in NYS, with one of the following:
    - 1-Start a CenteringPregnancy care model at their practices, or
    - 2-Expand their currently existing CenteringPregnancy care model at their practices.
  - Perform an observational cohort focused clinical study to evaluate the impact of expanding the CenteringPregnancy care model on birth outcomes in areas known to have poor birth outcomes in NYS.



# Methodology

- Target areas:
  - Areas known to have poor birth outcomes in NYS.
    - Include the 5 NYC boroughs and the following counties: Erie, Niagara, Monroe, Onondaga, Oneida, Albany, Rockland, Nassau, Suffolk, and Westchester.
- Target population:
  - Pregnant Medicaid members living in areas known to have poor birth outcomes in NYS.
  - N = 4000 (2000 in the CenteringPregnancy care model + 2000 in the traditional care model).
- Participant clinics:
  - A select number of obstetric clinics that are located in areas known to have poor birth outcomes in NYS, and that serve a large number of Medicaid members.
  - Include clinics that want to expand their currently established CenteringPregnancy care model, and clinics that want to newly establish the CenteringPregnancy care model in their practices.



# Methodology

#### • <u>Design</u>:

- Training will be provided by CHI, as needed, to help participant clinics deliver the CenteringPregnancy care model at their practices.
- Participant clinics will provide their pregnant Medicaid patients with the option and freedom to choose which prenatal care model they would like to receive, the CenteringPregnancy care model or the traditional prenatal care model.
- Participant clinics will be provided with an Excel data file that lists a number of variables that
  participant clinics need to report to NYS DOH on (on a quarterly basis). This includes data on
  members in the CenteringPregnancy care model and a matching number of members in the
  traditional model of care.
  - In addition, NYS DOH will supply each of the participating clinics with surveys that are to be administered by the clinics to all their CenteringPregnancy members at the start and the end of their prenatal visits.
- NYS DOH will use the data that is submitted by the participating clinics to calculate the outcome quality measures for this project.



# **Outcome Measures**

• Main outcome measures of the study:

- Rate of preterm birth (before 37 weeks)
- Rate of low birth weight (<2500 grams)
- Other outcome measures:
  - Rate of tobacco smoking screening and abstinence
  - Rate of depression screening and follow-up
  - Rate of 17-hydroxyprogesterone administration
  - Rate of postpartum contraceptive care
  - Rate of breastfeeding
  - Frequency of visits (prenatal and postnatal)
  - Maternal risk assessment (partner violence, drug use, alcohol)
- Other rates that might not be impacted by CenteringPregnancy, but will be tracked by the project:
  - Rate of gestational diabetes
  - Rate of gestational hypertension



### **Clinic Participation Requirements**

- Indicate to the NYS DOH project team an interest in participating in the study.
- Complete a questionnaire about practice characteristics and submit it to NYS DOH.
- Agree to provide the highest quality of care to all patients, in both the CenteringPregnancy and the traditional prenatal care models.
- Willingness and readiness to collect and report member-level data to NYS DOH in a timely manner as prescribed by the NYS DOH project team.
- Be located in one of the areas identified by the NYS DOH project team as having high rates of poor birth outcomes.
- Be a clinic that provides perinatal care services to a large number of NYS Medicaid members.
  - Clinics that serve the largest number of Medicaid members have the highest chance of being selected to participate in this pilot project.
- Meet the Centering Healthcare Institute's basic readiness guidelines for starting CenteringPregnancy.



### **Clinic Participation Requirements**

- Centering Healthcare Institute's basic readiness guidelines for starting CenteringPregnancy:
  - Support from Practice Leadership Commitment to significant process change; sustaining support for Centering budgets and staffing needs.
  - Support from Practice Providers Majority of OB providers at the practice are interested in learning how to provide care this way.
  - Having an Adequate Group Space in the Practice Having a space in the clinic that is adequate for up to 26 chairs around an open circle, includes an exam area (within the space), station for checking vitals, and snack table (usually 25" x 25"). Centering has priority use of the space.
  - New OB Volume Capability Can support starting one or more groups a month.



# Projected Timeline (tentative)

- November 30, 2018 to January 1, 2019:
  - Complete outreach efforts to clinics and Medicaid managed care health plans interested in participating in the project.
  - Clinic and Medicaid managed care health plan project participants are selected and finalized by the NYS DOH project team.
- January 1, 2019 to March 1, 2019:
  - Selected clinic and Medicaid managed care health plan project participants prepare for the pilot project.
- March 1, 2019 to March 1, 2021:
  - Participating clinics begin collecting study data and submitting it to NYS DOH.
  - CHI provides participating clinics with education and training needed to implement or expand the CenteringPregnancy model of care at their practices.



### Questions

 Please submit any questions you may have regarding the CenteringPregnancy Focused Clinical Study to: <u>khalil.alshaer@health.ny.gov</u>



# **Thank You**

