Vital Records in CMS Innovation Center Evaluations

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Strong Start for Mothers and Newborns

• Goal: lower incidence of preterm birth, lowbirthweight, and maternity and newborn care costs among Medicaid/CHIP beneficiaries through psychosocial supports

• Care enhancements in maternity care homes, group prenatal care (CenteringPregnancy), birth centers

• 27 awardees with sites in 30+ states

• Served ~50,000 women 2013-2017
Vital Records for Strong Start Evaluation

• Goal: determine outcomes and costs among Strong Start participants vs. similar women not enrolled in Strong Start through an analysis of birth certificates (linked to Medicaid data as possible).

• Advantages:
  • No awardee burden for data collection
  • Consistent source across states
  • High reliability on gestational age and birthweight

• Issues:
  • Identified data difficult to obtain (time consuming and costly; process different for every state)
  • Medical chart review comparisons reveal varying data quality (some variables show high concordance, others moderate or low)
  • Medicaid participants not always identified (hard to construct comparison group)
  • Data quality in other fields
Potential Evaluation Uses

• Communities of Health for Children and Youth (CHCY):
  • Examine impacts of birth outcomes and other factors on subsequent child health, well-being, and cost

• Bundled Maternity Payment Model (BuMP)
  • opioids in pregnancy and neonatal abstinence syndrome (NAS)

• Examine impacts of opiate abuse treatment for pregnant women on pregnancy outcomes
Priorities for CMMI

• Ease of obtaining beneficiary-identified vital records
• Reliability of Medicaid field to identify births covered by CMS
• Reliability of demographic data
• Reliability of health and outcomes data
• Accurate identification of birth attendant