

October 26-28, 2020

Maternal & Infant Health in the Digital World:

Patient-Centered Care During COVID and Beyond

VIRTUAL CONFERENCE

hmhbga.org/event/beyondcovid2020

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Case Study of California's MotherToBaby Affiliate:

Increasing Access and Addressing Inclusion in Our Telehealth Service



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Learning Objectives

- 1. Learn how collaborative efforts increased the use of telehealth via routine referral process and insurance enrollment
- 2. Learn how partnerships increased utilization and knowledge of services. *For example*, Black Infant Health (BIH), Healthy Start, Women, Infant and Children (WIC) & more community programs
- 3. Learn how funder goals are addressed (i.e. collecting demographics and maternal characteristics and how we expanded our ability to improve access while discussing barriers)



What is MotherToBaby?

- ☐ FREE service providing evidence-based pregnancy and breastfeeding health information
 - MotherToBaby App * (866) 626-OTIS * Online chat * Email * Text (855) 999-3525
 - RESOURCE ~ not a hotline
 - Provides education ~ key component of prenatal care
 - No insurance or appointment necessary
- MotherToBaby (MTB) has state affiliates; Organization of Teratology Information Specialist (OTIS)
- MTB CA established over 40 years ago at UC San Diego School Of Medicine; funded by CA State Dept of Education.
- MTB GA is based at the Center for Maternal Substance Abuse and Child Development, Emory University School of Medicine; Funded by DBHDD at the state level
- MTB affiliates receive some federal funding from Health Resources and Services Administration (HRSA) Cooperative – through OTIS National Office



Prenatal Appointments May Be Delayed...

- After positive pregnancy test (before 1st prenatal visit), searching for ANSWERS:
 - Unintended/unplanned pregnancies 50%
 - Clinic/OB appointment end of 1st trimester
 - Social Media: Dr. Google, Facebook, Twitter
- Pregnancy health is important: "EXPOSURE CHECK-UP"
 - Pregnant women can be exposed early in pregnancy to medications, chemicals, a cold or flu, second-hand smoke, and a variety of possible TERATOGENS
 - Health Education, Nutrition, psycho-social issues
- Culturally Sensitive
 - Birth customs/beliefs



What type of questions do we answer?

- □ Prescription and Over-the-counter Medications
- Vaccines, Medical Conditions, Infections, and Fever
- Alcohol, Tobacco, Illicit Drugs
- Chemical or Occupational Exposures

Frequently Asked Questions?

- ✓ When is it safe to a drink wine, after 1st trimester?
- What analgesics can I take for migraines?
- ✓ Planning to get pregnant can I get an flu vaccine, should I wait?
- ✓ Do I have to quit taking my antidepressant, or switch to a safer drug?
- Diagnosed with Gestational Diabetes, will my medications cause problems?









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How do we interact with callers/contacts?

- Reflective Listening/Build Rapport
 - Counselors trained to listen/ask questions
 - Provide evidence based, non-directive, non-judgmental information
- Discuss/Provide Information: Principles of Teratology
 - Time of Exposure When was it taken?
 - **Dose-Response Relationship** How much was taken?
 - **Bioavailabilty of Agents** *How much gets to the fetus matters?*
 - **Mechanism/Pathogenesis** How does it affect the development
 - Range of Outcomes How severe are the effects?



Who are our partners?

- Health Resource and Services Administration (HRSA)
 Federally Qualified Health Centers (FQHCs)

 - Healthy Start Programs
 - Poison Control Systems
 - P.E.S.H.U
- Office of Women's Health, Food and Drug Administration (FDA),
- Centers for Disease Control (CDC)
- American Congress of OB/GYN (ACOG)
- Society for Maternal Fetal Medicine
- Society for Birth Defects Research and Prevention
- March of Dimes
- Planned Parenthood
- Kaiser Permanente

California Department of **Public Health**

- WIC
- Black Infant Health
- California Breastfeeding Coalitions
- California Diabetes and **Pregnancy Program**
- Comprehensive Perinatal Services Programs
- **Nurse-Family Partnership**
- Regional Perinatal Programs of California





Focus on MTB CA

Partnership with Black Infant Health



Partnership with BIH

- Memorandum of Understanding
- Cross-referrals
 - Demographics
 - ✓ H.R.S.A questions
- MotherToBaby California participant interaction/contact
 - ✓ Provide information/education
 - Reduce anxiety
 - Clarify misconceptions
- Encourage family health advocate interaction
- Promote healthy behavioral choices
- Support physician care plan



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Multiple Levels to Referral Relationships

Insurer

MediCal (medicaid) relationship

WIC

MTB CA educates women & encourages them to return to WIC. Mandated to make referrals?

State

Working w/ state programs funded by HHSA, MCAH, etc





Key Drivers of this Collaboration

Relationship Building

Localized and beyond

Trust

Other agencies, but also birthing people we serve

Clear Expectations

Who we are, what we can offer



MTB Georgia

Housed by

Center for Maternal Substance Abuse and Child Development (MSACD) in School of Medicine at Emory University

Funded by

HRSA

Department of Developmental Disabilities

MTB National

Staffed by

1 Program Coordinator

MSACD Staff will support at events when necessary/possible

Community

Healthy Start CANs, CBWW, Home Visiting Institute, Adoption Agencies, Therapeutic Caregivers, university students, nonprofits

Needs

Provider relationships – physician/medical and insurers, consider how to work across cultures/languages

Future

Improve solidified referral relationships and community partnerships



Funding

Expectations

Demographics

Utilization of Service

Performance

Partnerships

Challenges

Confidentiaity

Tracking Usage

Numbers Increase

Ability to measure direct output



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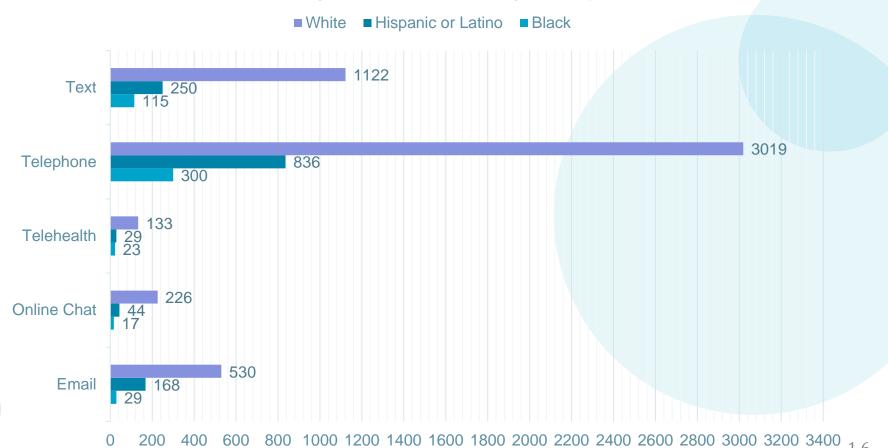
HRSA Data for 3 years from MTB National

	YR 4	YR 5	YR 6**
Black	395	475	321
Hispanic	1,340	1,235	792
Native American	61	55	59

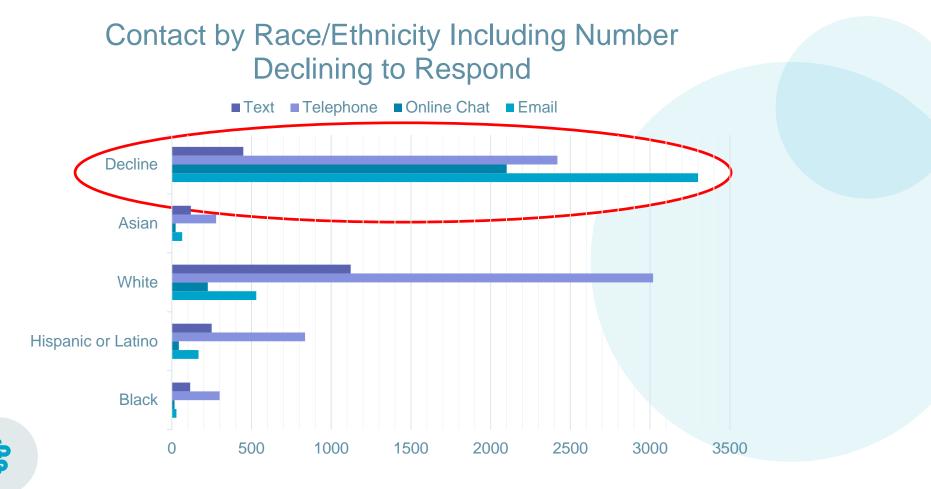


*YR 6 ongoing

Contact by Race/Ethnicity Response







Data Issues

- ☐ Many defintions of "decline"
- ☐ Each affiliate uses own system to record contacts
- □ Confidentiality
- ☐ Insurance status



Getting to Know Who We Serve

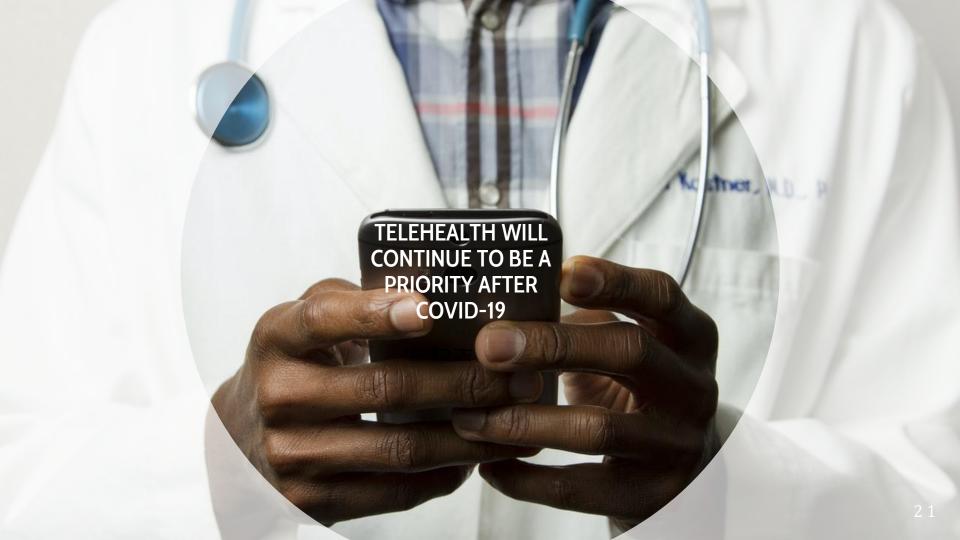
- □ Race/Ethnicity
- ☐ State and Zip Code
- Insurance Status
- ☐ Income Level
- How people heard about us



Closing Thoughts

- ☐ Being an Ally
- ☐ Increasing Access AND Trust
- Reality of what access looks like for communities and how to achieve equity
- Improving data collection is not a cure-all
- ☐ Ability to mimic efforts in CA
- ☐ Health literacy





THANKS! Any questions?

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