

# Medicaid program improves maternal, infant care

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New research out of Michigan State University shows participation in a program aimed at Medicaid-eligible pregnant women improves maternal and infant care.

And with Medicaid covering 40 percent of all births nationwide – 45 percent in Michigan – lead researcher Cristian Meghea of MSU's College of Human Medicine said the study reveals strong evidence that such a program can improve health care during pregnancy and after birth, particularly for disadvantaged families.

Michigan's Maternal Infant Health Program, offered at no cost to Medicaid-eligible pregnant [women](#), provides [home visits](#), care coordination and referrals, transportation to doctor's offices and interventions based on individual care plans. The comprehensive approach involves nurses, social workers and other health professionals.

"The program provides support to promote healthy pregnancies, positive [birth outcomes](#) and healthy infants," said Meghea, an assistant professor with the College of Human Medicine. "Women on Medicaid already are at a higher risk as they are disproportionately exposed to stress, have fewer [economic resources](#), are more likely to engage in poor health behaviors and often have difficulty using health services.

"Now, for the first time, we have evidence women and infants enrolled in this program get more adequate pre- and postnatal care compared with women on Medicaid who do not participate in it."

As part of Meghea's study, women in MIHP were matched demographically and socially with women on Medicaid who were not enrolled in the program and then compared in terms of health care.

The research, recently published online, will appear in the October issue of the *American Journal of Preventive Medicine*. The study was part of a long-term [research collaboration](#) between MSU and the Michigan Department of Community Health led by Meghea and colleague Lee Anne Roman.

One of the starkest findings concerned post-natal visits; women in the MIHP program were about 25 percent more likely to have such an appointment.

"That appointment is an important opportunity to assess the physical and psychosocial well-being of the mother, advise her on infant care and family planning, and give referrals for chronic conditions such as diabetes, hypertension, or obesity," said Meghea, an assistant professor in the college's Institute for Health Policy as well as the Department of Obstetrics, Gynecology and Reproductive Biology.

The visit is critical because many women drop off Medicaid eight weeks after giving birth due to federal eligibility rules.

The study comes out amid debates nationwide, including in Michigan, about whether states should expand Medicaid as part of the federal Affordable Care Act, which calls for greater eligibility for the [health](#) insurance program.

The U.S. Supreme Court ruled in June 2012 that states have the option whether to expand their programs. A decision in Michigan is expected this fall.

Provided by Michigan State University

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