

Has Medicaid expansion affected pregnancy outcomes among women with gestational diabetes?

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The Affordable Care Act (ACA) aims to broaden health care access, but its effect on maternal and newborn health among women with gestational diabetes—or diabetes that develops during pregnancy—across diverse



demographics is unclear.

In a <u>study</u> published in the *International Journal of Gynecology & Obstetrics*, researchers compared the impact of the implementation of the ACA on maternal and newborn health in Maryland (with ACA implementation) and Georgia (without ACA implementation) among 52,479 women.

The investigators found that after ACA implementation, Maryland showed improved newborn outcomes compared with Georgia. This included measures related to Agar scores, the need for assisted ventilation, and the need for <u>neonatal intensive care</u>. There were no significant differences in Cesarean section deliveries.

"It is plausible that Maryland's decision to adopt Medicaid expansion, coupled with the state's proclivity for inclusiveness and adaptability, could inherently drive better outcomes," said corresponding author Oluwasegun Akinyemi, MD, MPH, a senior research fellow at the Howard University College of Medicine and a Ph.D. student at the University of Maryland School of Public Health.

"This perspective aligns with the supposition that state-specific sociocultural dynamics, beyond mere policy adoption, profoundly influence health outcomes."

More information: Oluwasegun Akinyemi et al, Impact of Medicaid expansion on pregnancy outcomes among women with gestational diabetes, *International Journal of Gynecology & Obstetrics* (2024). DOI: 10.1002/ijgo.15439, onlinelibrary.wiley.com/doi/10.1002/ijgo.15439

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