Appendix G: Support Services

Gestational parents, their babies and families may require supportive services to align personcentered mother-baby care with their social and physical needs, goals, values, capacities and preferences. This section focuses primarily on support services for Apple Health moms and babies. To support the mother's choices and goals, support services should be integrated into the birth plan and clinical care plan.

Commercial health plans may provide support services using maternity case management, lactation consulting, breastfeeding support, or other services during the maternity and newborn episode. Gestational parents may also self-pay for support services, such as doulas, that follow their birth plan and pregnancy and delivery goals. Clinicians and their teams can learn more about support services for mothers and babies with commercial health plan coverage by contacting the woman's health plan.

Apple Health Member Support Services

First Steps Maternity Support Services (MSS): Any pregnant or up to 60 days postpartum Medicaid enrollee is eligible for MSS. MSS is an optional, enhanced service which is reimbursed fee for service. The services provided may take place in an office setting, the client's home or an alternate location. The purpose of MSS is to improve and promote healthy birth outcomes using an interdisciplinary team consisting of a registered nurse, behavioral health specialist, and registered dietitian. Some MSS providers also have community health workers as part of the team. MSS helps clients access prenatal care as early as possible and obtain health care for eligible infants. MSS covered services consist of in-person screening for risk factors, interventions for identified risk factors, brief counseling, education related to pregnancy and infant health, basic health messages, breastfeeding support, referrals to community resources, case management, and care coordination.

For more information and to find an MSS provider in your area, check the MSS Provider Directory, click <u>here</u> or call the Help Me Grow Washington Hotline at 1-800-322-2588.

First Steps Childbirth Education (CBE): Any pregnant client covered by Washington Medicaid is eligible for at least six hours of education provided by a Health Care Authority-approved CBE educator who accepts Apple Health. Education must include topics related to pregnancy, labor and birth, and newborn care.

For more information and to find a HCA-approved CBE educators, click <u>here</u> or call the Help Me Grow Washington Hotline at 1-800-322-2588.

Doula: The goal of doula services is to reduce disparities in birth outcomes among racial, ethnic, and geographic populations; improve birth outcomes by reducing preterm birth, low birth rate, cesarean sections; shorten labor time; reduce the need for pain medications; reduce

consequences associated with morbidities such as severe lacerations and hemorrhage; and improve rates of breastfeeding and length of time babies are breastfed. Recent legislation requires the Health Care Authority to implement doula services through the First Steps Maternity Support Services (MSS) program. HCA is collaborating with partner agencies, doula advocates, and MSS providers to determine cost savings and how best to implement. HCA is also working with the Centers for Medicare and Medicaid Services (CMS) to add doulas as an allowable provider in the Medicaid State Plan in order to reimburse for services.

Please sign up for HCA's GovDelivery messages to stay informed as HCA works to implement doula services.

Parent-Child Assistance Program (PCAP): PCAP is an evidence-based home visitation casemanagement model for mothers who abuse alcohol or drugs during pregnancy. Its goals are to help mothers build healthy families and prevent future births of children exposed prenatally to alcohol and drugs. A client who is pregnant or postpartum, self-reports heavy substance use during the current or recent pregnancy, and has not successfully accessed community resources for substance use treatment and long-term recovery is eligible for PCAP.

More information about the PCAP program can be found here.

Additional Support Services

Home Visiting for Families (DCYF): This program provides voluntary services in the home to expecting parents and families with infants and young children. Visits focus on linking families to health care and other community resources, promoting strong parent-child attachment, and coaching parents on learning activities to help their child's development. Visits also include regular screenings to help parents identify possible health and developmental issues.

Find a local home visiting program by calling the Help Me Grow Washington Hotline at 1-800-322-2588.

Partnership Access Line (PAL) for Moms: University of Washington (UW) Partnership Access Line for Moms (PAL for Moms) is a free telephone consultation service for health care providers caring for patients with mental health problems who are pregnant, postpartum, or planning pregnancy. Any health care provider in Washington State can receive consultation, recommendations, and referrals to community resources from a UW psychiatrist with expertise in perinatal mental health.

Psychiatrists provide consultation on any mental health-related question for patients who are pregnant, in the first year postpartum, who are planning pregnancy, or who have pregnancy-related complications (e.g. pregnancy loss, infertility). Topics may include depression, anxiety, or other psychiatric disorders; adjustment to pregnancy loss, complications, or difficult life events; risks of psychiatric medications; non-medication treatments; and consulting about women on psychotropic medications who are wanting to or thinking about getting pregnant.

Perinatal psychiatrists are also available to help any practice thinking about instituting routine screening for depression. They can come to a clinic and provide a broad overview of best practices for depression screening and follow-up in the perinatal period.

The phone line 877-725-4666 (PAL4MOM), is staffed weekdays from 9 AM to 5 PM. Providers can call at any time and receive a call back within one working day. Providers can also e-mail with any questions or to set up a consultation at <u>ppcl@uw.edu</u>.

211: 2-1-1 is an easy-to-remember phone number for people to call for health and human service information and referrals and other assistance to meet their needs. Pregnant and postpartum patients can call 2-1-1 (or 1-877-211-9274) to get connected with mental health providers within their area.

Click <u>here</u> for more information.

WithinReach: A not-for-profit organization that provides multiple ways for people to access support in-person, over the phone and online in order to find resources in their community. WithinReach is a leader and coalition builder for programs such as Basic Food education, Medicaid outreach and immunization action in Washington State. WithinReach's <u>ParentHelp123</u> website assists pregnant patients and families in finding resources like food banks, play and learn groups, free or low-cost health clinics by entering their zip code.

Patients can also call WithinReach's Help Me Grow Hotline at 1-800-322-2588 to apply for Medicaid online or be referred to other resources.

Crisis Line: For patients thinking of suicide or are in crisis can call 1-866-427-4747.

Team-Based Care

Team-based care supports success in implementing bundled episode care delivery and payment. The World Health Organization defines team-based care as "the provision of comprehensive health services to individuals, families, and/or their communities by at least two health professionals who work collaboratively along with patients, family caregivers, and community service providers on shared goals within and across settings to achieve care that is safe, effective, patient-centered, timely, efficient, and equitable."ⁱ

Team-based care engages the primary obstetric or midwifery clinicians and their office-based team (including nurses, medical assistants, and other staff) in a model to manage a specific panel of patients with a focus on person-centered care. Care teams explore opportunities to improve and optimize efficient, high quality, person-centered care delivery. The team develops clinical workflow, processes and competencies to assure all members are engaged in delivering and coordinating patient care at the right time, using the right team member to support person-centered care in partnership with moms and families and other clinical and community-based organizations. This may mean some team members take on new roles in performing screening,

interventions or education, and coordinating care to support clinicians in focusing on clinical care planning and leading their team.

ⁱ Naylor MD, Coburn KD, Kurtzman ET, et al. Team-Based Primary Care for Chronically III Adults: State of the Science. Advancing Team-Based Care. Philadelphia, PA: American Board of Internal Medicine Foundation; 2010