GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance

Maternal Health Advisory Group

Virtual Meeting via WebEx
Tuesday, May 20th 2025
Meeting Summary

Whole-Person Care & TMaH Model *See slides 3-11*	• Maternal whole-person care addresses the physical, mental health, and social needs to empower mothers to improve their health throughout their pregnancy, childbirth, and postpartum • TMaH aims to improve maternal health access, outcomes, and experience through care delivery and payment reforms that incentivize whole-person care • Best practices in whole-person care include: o Screening, resource connection and follow-up for health-related social needs and behavioral health services o Ensuring birth plans are customized to meet patient's needs o Leveraging managed care plans (MCPs) in providing whole-person care
Whole-Person Care at Mary's Center *See slides 12-20*	• Mary's Center, a Federally Qualified Health Center, offers perinatal services to support the overall wellbeing of patients o At first prenatal visit, every perinatal patient gets a family support worker assessment, which includes screening and referral for social needs like housing, nutrition, mental health, and domestic violence • Participants can receive on-going support services if needed, such as obstetric care coordination or a home visiting program: o **Healthy Start Initiative:** Participants are connected with family support workers, as well as services such as group education and doula services; available for participants living in ward 7 and 8 o **Nurse Family Partnership:** Participants are connected with nurse home visitors with health education during pregnancy • Challenges with scaling/expanding the program are due to limited workforce capacity, lack of available resources, geographical limitations in program inclusion criteria, and reimbursement to sustain social needs care
Breakout Discussions	**Group 1: Screening and Resource Connection** • Resources and workforce development are essential to successful screening and referrals, including training on when/how to ask screening questions. • All hospitals in the District are using standardized screening tools

Breakout Discussions (cont.)	• Barriers to early engagement with prenatal care discussed included:
	  ○ Lack of paid leave to attend visits
	  ○ Beneficiary concerns of data being shared with law enforcement (e.g., SUD reporting)
	• Family planning and preconception care needs to be community-rooted and culturally competent
	• Leveraging existing services, such as digital health tools like LinkU, will be instrumental in addressing social needs in a cost-effective way.
	
	Group 2: Creating Person-Specific, Culturally Sensitive Birth Plans
	• Creating a trusting relationship with the patient prior to delivery is impactful
	• Roles and responsibilities of the delivery team need to be clarified, particularly when integrating doulas into the care team as a patient advocate
	• Patients have preferences for their birth plans, but sometimes emergent health issues can require providers to change plans
	• Marginalized individuals are more likely to have negative experiences with the delivery team when emergent medical issues cause changes to the birth plan.
	• Patients may feel disrespected, frustrated and disempowered because of poor communication and feeling like their preferences are not prioritized.
	
	Group 3: Managed Care Strategies for Whole-Person Care
	• A major challenge to leveraging MCP benefits early is the delayed notification of pregnancy status to MPCs
	• Solutions suggested included:
	  ○ Implementing a "No wrong door" policy around affirming pregnancy
	  ○ Making the first visit more valuable to pregnant individuals
	  ○ Leveraging the HIE for early identification
	  ○ Using primary care to identify individuals who are less likely to engage
	  ○ Streamlining a process for providers to notify MCPs in a timely manner

Next Steps	• Next meeting is on **Tuesday, June 17th** from **11am-12pm**
	  ○ Topic: *Data Infrastructure & Digital Health in Maternal Health Care*
	• Community Opportunities:
	  ○ Grant opportunity for nonprofits addressing structural factors impacting infant and maternal health
	  ○ Grant opportunity for nonprofits addressing opioid/substance use disorders in pregnant and parenting women
	• Contact dhcf.maternalhealth@dc.gov with questions; meeting materials are posted on https://dhcf.dc.gov/page/transforming-maternal-health