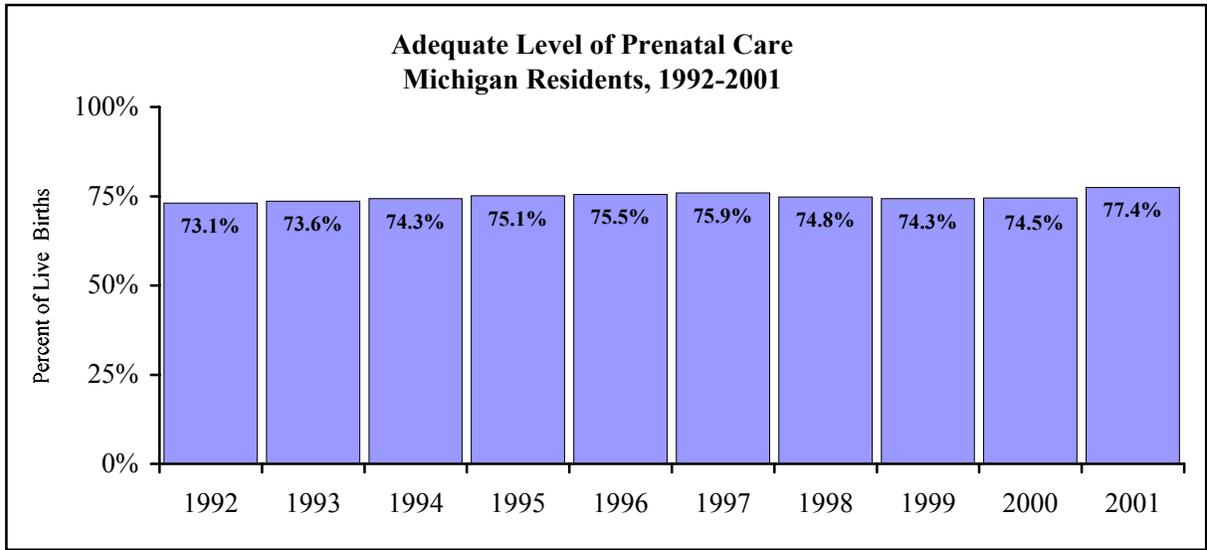


**Focused Indicators**  
**Preventive Health Care**  
*Adequacy of Prenatal Care*



*Source:* Division for Vital Records and Health Statistics, MDCH

***How are we doing?***

Adequate prenatal care, including initiating care in the first trimester and receiving regular care until delivery, can be an indicator of access to care and may result in fewer birth complications and healthier babies. The effect of early prenatal care is strongest for high-risk groups such as teens and low-income women.

The Kessner Index is a standard measure of prenatal care based on information obtained from birth certificates. It combines information on the month prenatal care began, the gestational age at birth, and the number of prenatal visits.

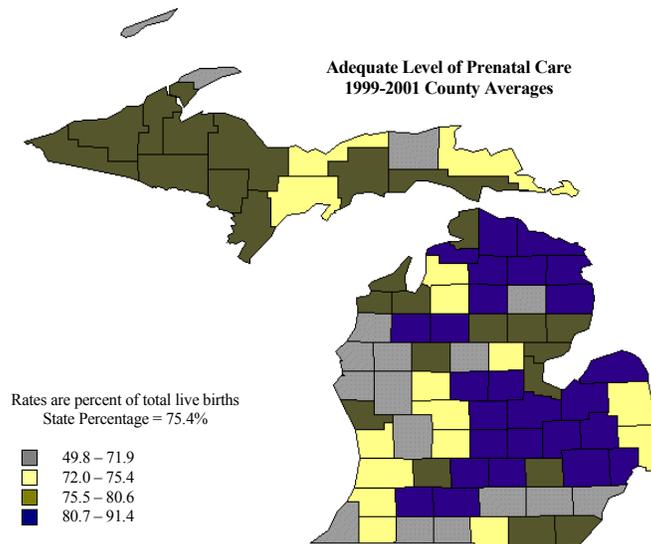
In 2001, 77.4% of live births in Michigan were to mothers with an adequate level of prenatal care, 15.0% were to mothers with an intermediate level of care, and 7.3% were to mothers with an inadequate level of care. The percent of mothers with adequate levels of prenatal care has gradually increased over the past 10 years from 73.1% in 1992 to 77.4% in 2001.

***How does Michigan compare with the U.S.?***

The percent of live births to mothers with an adequate level of prenatal care in Michigan is similar to the U.S. data. In 1995, the most recent year for which national figures are available using the Kessner Index, 74.3% of mothers received adequate levels of prenatal care in the U.S.

## ***How are different populations affected?***

Women age 30-39 years are most likely to receive adequate levels of prenatal care while women under age 20 are least likely to receive adequate levels of prenatal care. African-American women are least likely to receive adequate levels of care (61.6%) compared to whites and other races (81.0% and 77.1%, respectively). Lower income Michigan women enrolled in WIC reported adequate care for 72.4% vs. 74.9% for women enrolled in WIC nationwide.



## ***What is the Department of Community Health doing to affect this indicator?***

The department is actively working to improve the quantity and quality of prenatal care. Maternal Support Services (MSS) are provided to pregnant Medicaid beneficiaries identified as needing assistance to assure adequate and appropriate medical care and support services. Transportation to medical appointments and services is a prominent and frequently used service of the MSS program.

The Prenatal Care Clinic program is a demonstration project designed to facilitate healthy pregnancy outcomes in a high-risk community. The project addresses unique community needs to assure access to prenatal care for the low-income population. The current project is addressing transportation to care issues for pregnant women, infants, and children in Oakland County.

Medicaid managed care contracts require continuity of care for pregnant women. If a pregnant woman is enrolled in a Medicaid managed care plan, she is guaranteed access to her current prenatal care provider until delivery even if the provider is not participating in the health plan in which she is enrolled.

The WIC program actively refers pregnant women to healthcare and social services during pregnancy. The WIC division's Project FRESH provides access to Michigan-grown fruits and vegetables and nutrition education for low-income pregnant women. This promotes a healthy diet and weight for both the mother and child.

The department provides prenatal and perinatal testing services that aid in the diagnosis of life threatening maternally transmitted infectious diseases. Appropriate treatment can be rendered through testing and accurate diagnosis.

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