

MICHIGAN INFANT MORTALITY REDUCTION PLAN STATEWIDE STATUS REPORT

Activity	Target Audience	Program Agency	Responsible Person	Status
Improve women's health before, during and between pregnancies.				
<p>MLPP released two reports: "Medicaid Expansion Could Benefit Michigan Babies" to influence discussion between legislators and "Right State in Michigan and Its Great Start Collaboratives 2013: Trends in Maternal and Infant Well Being, Executive Summary"</p> <p>http://www.mlpp.org/kids-count/michigan-2/right-start-in-michigan-2013</p>	Legislators	Michigan League for Public Policy	Jane Zehnder-Merrell	May 8, 2013
<p>MPCA to survey all clinics to determine which of these practices (clinical expertise) they participate in and begin discussions on infant mortality. Goal is to create standardized , across all plans; safe sleep messages and non-smoking during pregnancy messages.</p>	OB providers	Michigan Primary Care Association	Doug Paterson	2014
<p>MCH Programs and Vital Records were awarded supplemental funding for states participating in the COIIN to reduce IM as part of the state systems development initiative. The grant is to get real time data for the birth records and infant mortality data to provide on time or as near time data on infant mortality.</p>	MCH Programs	MDCH/DFCH	Patricia McKane	2014
<p>MOD has invested in a program on consumer education around PED's and assessing shared decision models to implement. Awarded grass root local community grants on home visiting programs with community liaisons and also centering pregnancy on prenatal care. The Child Birth Connection is going to release a survey "Listening to Mothers 3" on preconception/ interconception care with a payer and race/ ethnicity category.</p>	Michigan residents, pregnant women	March of Dimes	Kara Hamilton-McGraw	
<p>Lobbying for the Medicaid Reform Expansion (Healthy Michigan Plan).</p>	Legislators	MAHP	Cheryl Bupp	

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
Adult Quality Measures Grant: 2 year grant with CMS for a quality improvement project-focus on early elective delivery. Focus groups will be conducted with members on reasoning behind early delivery. The Medicaid Health Equity Project, in third year of data collection provides 2012 HEDIS post-partum care measure broken down by race then ethnicity. Data analysis ongoing and will have new information from the HEDIS plans for 2013. For the post-partum measure, two years of trending in the post-partum care exists.	MA enrolled pregnant women	MSA	Monica Kwasnik	
Lobbying for Healthy Michigan Plan. Adult quality measure plan – early elective delivery to assess reasons behind EED’s. Trending in 6 weeks postpartum care includes: a. Depression; b. Care of mom; c. Care of infant; and d. Contraception’s. Working on getting infant mental health home visit as a standard of care for the first three years of life.	Legislators	ACOG/MSMS	Cheryl Gibson-Fountain	
Working on passing legislation for physicians to write a prescription for the partner of a patient presented with gonorrhea or chlamydia. Working with ACOG on no-elective deliveries prior to 39 weeks, progesterone therapy, and unintended/unwanted pregnancies.	Legislators and Physicians	MSMS	Andy Schepers	
New initiative at Hurley, Hopeful Hearts, is impacting social determinants of health and substance abusing mothers on what expectations during delivery, what will happen to her baby, and looking for a progressive life together with woman and baby drug free. Working on a diabetes program with the March of Dimes.	Pregnant women	Hurley Hospital	Renay Gagleard	
MDCH and MOD will be hosting the 75th Year Anniversary celebration at U of M focusing on the polio vaccine in the morning and Infant Mortality Summit in the afternoon.	IM stakeholders	MOD/MDCH	Kara Hamilton McGraw/ Alethia Carr	November 7, 2013

Activity	Target Audience	Program Agency	Responsible Person	Status
<p>MCMCH distributed two sign-on letters.</p> <ol style="list-style-type: none"> 1. Director Haveman in response to the Medicaid provider policy concerning breast pumps with the need for broader coverage and how inadequate the currently policy is. 2. Bill Rustem championing the Governor's message for infant mortality; will require money. 	Legislators	MCMCH	Amy Zaagman	May 2013
Review 4 x 4 Plan to identify program areas that have or can incorporate the strategies into their program activities.	Maternal and child health programs	MDCH/DFCH	Brenda Fink	2013
CMS Strong Start CMS grant award for a four-year initiative to test and evaluate enhanced prenatal care interventions for women enrolled in Medicaid or CHIP who are at risk for having a preterm birth.	Mothers and their infants with high risk indicators	<p>St. John Community Health awarded, implemented in Detroit (St. John Medical Center) & Southfield (Providence)</p> <p>Meridian Health Plan implemented in Jackson at (Allegiance Health)</p>		2017
Implement a pilot project with 5 MIHP providers to provide oral health education to pregnant women and mothers and to apply fluoride varnish to infants.	Women of child-bearing age	MDCH/ Oral Health	Chris Farrell	
Update Michigan Model for Health curriculum with the latest evidence-based approaches and encourage expanded use.	Children and adolescents in school	MDCH/Adolescent & School Health	Sophia Hines	Completed

Activity	Target Audience	Program Agency	Responsible Person	Status
Working to get women enrolled on WIC in their first trimester	WIC eligible women	MI WIC	Stan Bien	
Using a 2 year grant from CMS to address prenatal & post- partum care to: 1. Track data on prenatal and post- partum metrics; 2. Promote post-partum care follow-up visits between 21-56 days after delivery; 3. Promote elective delivery after 39 weeks and; 4. Conduct policy work on payment for elective delivery before 39 weeks	MA enrolled pregnant women	MI Medicaid	Monica Kwasnik	2015
Healthy Start enrolling women while in the hospital	Pregnant/post-partum women	Hurley Medical Center	Renay Gagleard	Ongoing
Working to add a voice on the expansion of Medicaid as a way to access preconception and interconception care for low income women. Examining the access to care issue for mental health and substance abuse needs of women, prenatal and post-partum and their children. Promoting breastfeeding as it relates to IM reduction and obesity.	Low income women.	MI Council of MCH	Amy Zaagman	
Conducted a robust community health assessment and found tobacco use high in pregnant women. Establishing a FIMR group to cover the 23+ county area. Examining access to mental health and substance abuse services for post-partum women. Addressing access to care for pregnant women recognizing the risks assoc. with traveling long distances for care.	Northern Michigan residents and perinatal providers	Northwest MI Community Health Agency	Pat Fralick	
Working with HFHS on the Sew up the Safety Net Project. Discussing with national peer agencies effective activities to reduce infant mortality.	Greater Detroit area residents and perinatal providers	Greater Detroit Area Health Council	Kate Kohn Parrott	Ongoing

Activity	Target Audience	Program Agency	Responsible Person	Status
Reduce unintended pregnancies				
Develop and implement Adolescent Health Risk Behavior Assessment with the MI Quality Improvement Consortium	Adolescents	MDCH/Adolescent & School Health	Carrie Tarry	Completed 2013
Work with highest risk communities to use evidence-based teen pregnancy prevention programming. Funding for Teen Pregnancy Prevention Initiative (TPPI) and Abstinence Program received. TPPI funds support 4 community agencies in high risk areas to provide evidence-based comprehensive sex education to 10-18 year olds and their parents. The Abstinence Program supports 9 community agencies to promote abstinence from sexual activity and related risky behaviors and abstinence-only education.	Teens in high risk communities	MDCH/Adolescent & School Health	Kara Anderson, Robyn Corey	Ongoing
Counseling adolescents on unintended pregnancies during office visits. Identifying gaps and correcting them.	Adolescents	AAP	Denise Sloan	Ongoing
Partnering with OB colleagues that the same message used with adolescents about unintended pregnancies should be given to Ob/Gyn clients.	Medical Providers	AAP/ACOG	Denise Sloan	
Promoting Medicaid expansion as a way to help adult uninsured women get insured before becoming pregnant.	Policy makers	MI Primary Care Assoc. (MPCA)	Douglas Paterson	
Discussing pregnancy intendedness with women who present for clinic visits.	Primary Care Clinic Providers working with low income women.	MPCA	Douglas Paterson	
Working with school health coordinators/nurses/centers to improve access to care in school settings, including through the Michigan Model.	School age youth and school health providers.	MI Council of Maternal and Child Health	Amy Zaagman	

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
Expand home visiting programs that provide support to pregnant women and parents of infants.				
MOD has invested in a program on consumer education around PED's and assessing shared decision models to implement. Awarded grass root local community grants on home visiting programs with community liaisons and also centering pregnancy on prenatal care. The Child Birth Connection is going to release a survey "Listening to Mothers 3" on preconception/ interconception care with a payer and race/ ethnicity category.	Michigan residents, pregnant women	March of Dimes	Kara Hamilton-McGraw	
Expand use of evidence-based home visiting programs for high risk families with ACA grant funds. Implemented in first tier counties: Berrien, Calhoun, Genesee, Ingham, Kalamazoo, Kent, Muskegon, Saginaw, St. Clair and Wayne. Planning for expansion to other high-risk communities such as Detroit, Flint, Pontiac	First time mothers and their infants	MDCH/Perinatal Health	Brenda Fink/Nancy Peeler	Detroit NFP began serving clients in August 2012 Ongoing
Beginning a NFP and Healthy Start initiative.	Ingham County women of reproductive age.	Ingham Co. Health Dept.	Renee Canady	
Promoted legislation insuring that state funding is spent on evidence based and promising models of home visiting programs.	High risk women of reproductive age, and home visiting providers.	Michigan Council for Maternal & Child Health	Amy Zaagman	
Conducting a quasi-experimental study of MIHP. Working with the MDCH MIHP staff to create a fidelity assessment model to insure MIHP interventions are delivered uniformly across the state by all providers.	MDCH MIHP staff and state MIHP providers	Institute for Health Policy -MSU	Stacey Jackson/Deb Darling	Completed

Activity	Target Audience	Program Agency	Responsible Person	Status
NFP has been added to Saginaw, Genesee, Ingham counties and city of Detroit. Detroit Wayne County Health Authority will host a NFP conference on March 8th	High risk first time pregnant women.	Acuitas	Lauren Bridenbaugh/Sara Hubbard	
Promote safe sleep practices to prevent accidental suffocation.				
Report released on focus groups conducted on infant safe sleep practices engaging African American and Native American mothers as catalyst for change.	Perinatal providers	Tomorrow's Child	Sarah Scranton	Completed 2013
MPCA plans to survey all clinics to determine which of these practices (clinical expertise) they participate in and begin discussions on infant mortality. Goal is to create standardized , across all plans; safe sleep messages and non-smoking during pregnancy messages.	OB providers	Michigan Primary Care Association	Doug Paterson	2014
Redesign safe sleep materials	Parents and grandparents of infants, expectant parents, general public	MDCH/ Infant Health	Jeff Spitzley	Completed 2013
Partner with DHS to produce and market a new PSA video with families speaking about their experiences. First Lady Snyder completed an Op-Ed piece and publicly promoted PSA video.	Parents and grandparents of infants, expectant parents	DHS & MDCH/Infant Health MPHI Child Death Review	Colin Parks/Jeff Spitzley DHS/DCH Offices of Communication	Completed January 2013
CPS to require workers to talk to parents about safe sleep, to view sleeping arrangements for children under 12 months and to assist in acquiring a safe sleep environment for the infant.	Families interacting with CPS that also have children under 12 months.	DHS	Colin Parks	March, 2013
Conducted focus groups with African American and Native American groups to gain feedback on effective messages	African American and Native American groups	Tomorrow's Child	Sarah Scranton	September , 2013

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
Conducting "Secret Shopper" events to see how retailers are addressing safe sleep practices.	Retailers	Tomorrow's Child with Kent Co. H. Dept.	Nursing students	
Working on an on-line bereavement training tool for providers use when talking to parents with a loss.	Providers who interact with parents that have experienced an infant death.	Tomorrow's Child	Sarah Scranton	
Create Infant Safety Nets through WIC and Medicaid	WIC and Medicaid clients	MDCH/Infant Health	Stan Bien	September 2013
Promote safe sleep practices in WIC Clinics	WIC participants	Michigan WIC	Stan Bien	
Maintain, update and promote the use of the Safe Sleep on-line training. Updated online course to renew nursing CEU's and added Social Work CEU's.	Health and child care providers	MDCH/Infant Health	Paulette Dunbar	Ongoing
Develop and implement a regional FIMR team in northern portion of Lower Peninsula	Families that have experienced loss of child in northern portion of Lower Peninsula	MDCH/Infant Health	Paulette Dunbar	
Participate in NGA Learning Network on Improving Birth Outcomes	Low-income childbearing age women, women with previous poor pregnancy outcome	MDCH/Bureau of Family Maternal & Child Health	Nick Lyon/Alethia Carr	August, 2013
Keeping stats on infant deaths that are reviewed with the child death review teams.	Multidisciplinary providers/agents working with	MPHI	Heidi Hilliard	

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
	families			
Doing death scene investigations training to improve standardization for death scene reviews and reports.	Multidisciplinary providers/agents working with families	MPHI	Heidi Hilliard	
Provide support to local agencies for preventing unsafe sleep deaths.	Local agencies working with families of infants/young children	MPHI	Heidi Hilliard	
Amended safety policy to include not allowing children to be put to sleep in a car seat. SW Director walks the hospital on a regular basis to audit policy practice.	Hospital staff working with infants.	Children's Hospital of MI	Shirley Gray	
Asked staff to become ambassadors to promote safe sleep, and incorporated it into the family support groups.	Hospital staff working with infants.	Children's Hospital of MI	Shirley Gray	
Having a session on safe sleep, purple crying and CPR to celebrate Valentine's Day for NICU families. Using the NICU practices as a model for parents to follow – crib positioning, infant wear, etc.	Families of infants.	Children's Hospital of MI	Shirley Gray	
Implement statewide perinatal system to ensure appropriate care for high risk mothers				
Implement MI Perinatal Level of Care Guidelines	MI birthing hospitals	MDCH/Perinatal Health	Brenda Fink	Ongoing
Update the MI guidelines in accordance with the new AAP/ACOG Perinatal Guidelines	MI birthing hospitals	MDCH/Perinatal Health	Rosemary Asman/Trudy Esch	Completed
Develop authoritative process for designation/certification of NICU levels	MI birthing hospitals	MDCH/Perinatal Health	Rosemary Asman/T. Esch	Ongoing

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
Collaborate with EMS, Stroke and STEMI to establish coordinated system of care	MI birthing hospitals	MDCH/Perinatal Health	Rosemary Asman/Trudy Esch	Ongoing
Implement NICU follow-up pilot program in Kent, Ottawa and Muskegon counties. Completed infant assessment protocol in NICU and at discharge.	NICU infants and their families in the 3 counties	MDCH/Perinatal Health	Rosemary Asman/Trudy Esch	
Work with stakeholder group in Northern MI on a pilot regional perinatal system	NICU infants and their families in 21 counties in Northern MI	MDCH/Perinatal Health	Rosemary Asman/Trudy Esch	
Facilitate telemedicine initiative that connects at-risk pregnant women in isolated rural northern Lower Peninsula of MI with obstetric specialist	At-risk pregnant women in 21 counties of the northern portion of the Lower Peninsula	MDCH/Perinatal Health	Paulette Dunbar	December 2013
Work with stakeholder group in Southeast MI to develop a pilot regional perinatal system. Grant received from MOD.	NICU infants and their families in Southeast MI	MDCH/Perinatal Health	Brenda Fink	December 2013
Implement Medicaid policy to allow reimbursement for pre-discharge home visit within the Maternal Infant Health Program	Medicaid-eligible infants in NICU	MDCH/Perinatal Health	Brenda Fink	
Participate in Vermont Oxford Network quality improvement initiatives for CLABSI, breast milk promotion in the NICU, and NAS	MI birthing hospitals	MDCH/Perinatal Health	Padmani Karna, MD	CLABSI – Ongoing Breast Milk in NICU – Dec. 2013 NAS -
Participate in NGA Learning Network on Improving Birth Outcomes	MI birthing hospitals, high risk pregnant women and infants	MDCH/Bureau of Family Maternal & Child Health Hurley Medical Center	Nick Lyon/Alethia Carr	December, 2013

Activity	Target Audience	Program Agency	Responsible Person	Status
Supporting the role of CSCHC to monitor preemies moving to Medicaid Health Plans.	Premature infants, their families, and health providers.	MI Council for MCH	Amy Zaagman	
Providing support to MDCH for the Perinatal Admin. Regionalization team, with a comprehensive work plan. Updating the Perinatal Guidelines with the newly released ones. Developing an evaluation plan that captures short term and long term outcomes.	MDCH	Institute for Health Policy-MSU	Stacey Jackson/Debra Darling	
Promote statewide adoption of policies to eliminate medically unnecessary deliveries before 39 weeks.				
Participate in March of Dimes/ASHTO campaign to reduce early deliveries by 8% by 2014.	Pregnant women and women of childbearing age; providers of care	MDCH	Nick Lyon / Alethia Carr	January 2014
Collaborate with MI Health and Hospital Association to distribute MOD <i>Healthy Babies are Worth the Wait</i> materials to hospitals, physicians, local health departments, FQHC sites, and Maternal Infant Health Program providers.	Pregnant women and women of childbearing age; providers of care	MI Health and Hospital Association MDCH/Bureau of Family maternal & Child Health	MHA – Ron Hubble Alethia Carr	Sept. 2013
Implement Medicaid policy to require birthing hospitals to use evidence-based guidelines for elective delivery before 39 weeks. MSA studying possible policy to deny reimbursement for any elective delivery before 39 weeks without a medical reason	Medicaid providers	MI Medicaid	Dr. Deb Eggleston	Completed January 2013
Awarded March of Dimes grant for 39 week delivery campaign.	Pregnant women interested in early elective delivery and their providers	Hurley Medical Center	Renay Gagleard	
Promote the statewide adoption of reducing medically induced pregnancies at less than 39 week delivery. Information shared at the annual <i>Snow Meeting</i> ; BCBSM	Medical Providers	MSMS/ACOG	Dr. Cheryl Gibson-Fountain	

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
offered a 20% increased fee to physicians meeting the measure.				
Medicaid health plans are promoting the Medicaid policy on elective deliveries prior to 39 weeks, and not reimbursing physicians unless there is a medical condition/necessity attached to the early delivery.	Medical providers in Medicaid Health Plans	MI Assoc. of Health Plans	Cheryl Bupp	
Encourage statewide adoption of progesterone treatment protocol for women at high risk of preterm deliveries.				
Progesterone therapy is covered by all health plans for all diagnoses. However, no plan covers Makena. Methods for prior authorizations vary by plan, creates access to care issue for patients.	OB providers, pharmacies	MAHP/ MSA	Cheryl Bupp/ Monica Kwasnik	
Working on improving access (tool box approach) so that clinicians and physicians can access information related to infant mortality. Discussed hosting annual conference for clinicians to network and learn new findings in person. MOD will co-host. -Continue to do ultrasounds on an in-patient basis. -The PRB contract was renewed for 10 years.	OB providers	WSU	Doug Skrzyniarz	2014
OB statewide workshop will be held at WSU to present findings on progesterone protocols. MOD will co-sponsor and Alethia will present on perinatal regionalization and infant mortality reduction plan.	OB providers	Michigan Health and Hospital Association	Ron Hubble	May, 2013
Provide information and mentoring to OB providers on the treatment protocol. Progesterone protocol implemented at Hutzel Hospital and at United Healthcare Insurance.	OB providers	Wayne State University/Detroit Medical Center	Douglas Skrzynairz	
Establish Medicaid benefit coverage for universal screening and progesterone administration. Medicaid approval on a case by case basis for women with short cervix or history of a preterm birth	Medicaid-eligible women at high risk for preterm birth	Medical Services Administration	Medicaid MDs – OMA Dr. Deb Eggleston	

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
Approved use of progesterone therapy for prevention of preterm birth.	High risk pregnant women	Hurley Medical Center	Dr. Ivana Vettraino	
Medicaid Health Plans are promoting and processing the progesterone protocol.	Medical providers in Medicaid Health Plans	MI Assoc. of Health Plans	Cheryl Bupp	Ongoing
Weave social determinants of health in all targeted strategies to promote reduction of racial and ethnic disparities in infant mortality.				
Completed PRIME Health Equity Learning Labs 1, 2, & 3 trainings to develop plans on incorporating equity into daily work. Three topics: 1) providing fruits and vegetables to areas that are food desert area; 2) data linkage between WIC/Vital Records birth and death registry and the child death review file to examine the infant's death and WIC status. To identify criteria and guidelines to prevent these deaths; and 3) promoting breastfeeding.	WIC clients, MCH programs	MDCH WIC	Kobra Eghtedary	
Identify available local health resources. Monitoring indicators for following initiatives: Project LAUNCH, Sew Up the Safety Net, REACH in Flint, and FIMR teams in Pontiac	Low-income, racial and ethnic minority groups	MDCH/Division of Family & Community Health	Brenda Fink	Ongoing
Use evidence-based model to identify highest risk populations for NFP allocation and contracting	First time mothers at high risk for poor birth outcomes	MDCH/Perinatal Health	Brenda Fink	
Conduct Native American PRAMS survey for all NA births in MI to better account for NA population in the data base.	Native American women and infants	MDCH/BFMCH	Alethia Carr	November, 2013
Conduct PRAMS oversampling of African American women for IM contributing factors	African American women	MDCH/Epidemiology	Patricia McKane	
Participate in Region V Collaborative Improvement & Innovation Network (COIIN)	Minority women of child-bearing age and their health care providers	Bureau of Family Maternal & Child Health	Alethia Carr	

Updated 71513

Activity	Target Audience	Program Agency	Responsible Person	Status
Conduct training of Bureau staff on health equity and racism issues	Staff of Bureau of Family, Maternal and Child Health	MDCH	Alethia Carr	December 2013
Kids Count Fact sheet to be released on infant mortality and disparity. Lobbying for Medicaid expansion.	General population and health professionals.	MI League for Public Policy	Jane Zehnder-Merrell	Spring, 2013
Challenging the agency to assure the leadership style incorporates social determinants of health and health equity. Established a steering committee of influential women of color in the community with a passion for social determinants to impact the system and hold the Ingham Co. Health Dept. accountable.	Public health professionals	Ingham County Health Dept.	Renee Canady	
Implementing the Children's Healthcare Access Project (CHAP) on a county basis. Kent County is fully implemented. Wayne County is piloting; 3 counties in planning phase. Goal is to open more slots for children on Medicaid, improve quality of care and improve outcomes related to morbidity.	Families with children on Medicaid	MI Chapter of American Academy of Pediatrics & Mott Children's Health Center	Dr. Lawrence Reynolds	