West Virginia Universal Maternal Risk Screening

By implementing a universal maternal risk screening, West Virginia is able to identify the most common infant mortality risk factors and address these issues through public policy and practice changes.

With infant mortality and premature birth rates on the rise in West Virginia, the West Virginia Department of Health & Human Resources (DHHR) wanted to improve birth outcomes statewide. Beginning on January 1, 2011, and in accordance with West Virginia Legislative Rule §64-97-5, all healthcare providers offering maternity services are required to implement the West Virginia Prenatal Risk Screening Instrument (PRSI) to promote early and accurate identification of prenatal risk factors and submit these forms to DHHR for review. After one year of implementation, DHHR received data from more than 11,000 PRSIs completed by 336 maternity service providers, representing approximately 50 percent of all West Virginia pregnancies from 2011.

Steps Taken:
- The West Virginia Uniform Maternal Screening Act §16-4E, passed on May 28, 2009, established the need for a comprehensive and uniform approach to screening pregnant women to identify at-risk and high-risk pregnancies.
- In 2010, the maternal risk advisory council, established by DHHR, reviewed screening tools being used by providers and developed the PRSI. The council established the process for providers to submit their completed forms to DHHR using RightFax software to be stored, analyzed, and reported to the council.
- The system flags forms for missing data or when additional service needs are indicated. Providers are then contacted by DHHS to complete the information, and automatic referrals are made for any necessary services. Medicaid cases are referred to the Right from the Start (RFTS) program, where women receive in-home targeted case management through six weeks postpartum and children for up to one year.
- All maternity service healthcare providers are now required, by West Virginia Legislative Rule §64-97-5, to implement the PRSI at all initial prenatal appointments. This one-page tool collects information about demographics, vital physiological statistics, pregnancy history, oral health, breastfeeding, family history, medical conditions, prenatal care entry delay, various obstetrical risk factors, and substance abuse.

Results:
- The PRSI allows West Virginia maternity healthcare providers to perform efficient and effective prenatal risk screenings and, although it is still early, allows the state to look toward improving birth outcomes for mothers and infants.
• Without compensation or consequence, about 60 percent of maternity service providers participated in the first year of the program, providing data for approximately 50 percent of pregnancies statewide.
• Through the 11,082 PRSI forms received, DHHR was able to determine the most common risk factors (e.g. oral health, psychosocial, vital physiological, substance use, and prior pregnancies) reported by medical practitioners in WV and can now work to address these issues through policy, programs, and services.

Lessons Learned:
• Although a number of forms were incomplete when submitted, fewer than expected were flagged for missing information. The process has created future educational opportunities for DHHR staff members training providers to ensure the PRSI forms are completed properly.
• When training providers, one-on-one relationship building is encouraged. Buy-in among healthcare providers was greater when they had the opportunity to explain the importance of the PRSI tool in a face-to-face discussion.
• To improve the speed and accuracy of submitting the forms to DHHR, the program will now use TeleForm optical reader software. Additionally, the physician’s National Provider Identifier (NPI), issued by the Centers for Medicaid and Medicare Services (CMS) and used in all HIPAA standard transactions, has been added to the forms.
• The West Virginia Perinatal Partnership’s, medical community’s, and state legislature’s concerns regarding the rise of infant mortality and prematurity in the state were essential in establishing universal maternal risk screening in West Virginia.

For more information:
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