

How Insurance Companies are Answering the Call for Help

2023

The Mission of Blue Health Initiatives

Launched by Blue Cross and Blue Shield of Kansas (BCBSKS) in 2016, Blue Health Initiatives works to invest in communities to create sustainable, healthy places where Kansans live, work and play in ways that improve the quality of their lives. We are taking a holistic approach that focuses on policies, systems and environments that shape our lives.

By working together, we can lay the foundation for a healthier future. Three key pillars comprise Blue Health Initiatives and will transform Kansas communities in healthy ways for years to come.

Pathways



Pathways initiatives create community-wide change through cross-sector engagement in seven Community Pathways.

[LEARN MORE →](#)

Trailblazers

Trailblazers initiatives catalyze change by piloting innovative solutions to address the unique needs of our state. Grantees are selected in promising areas where proven strategies for success do not yet exist.

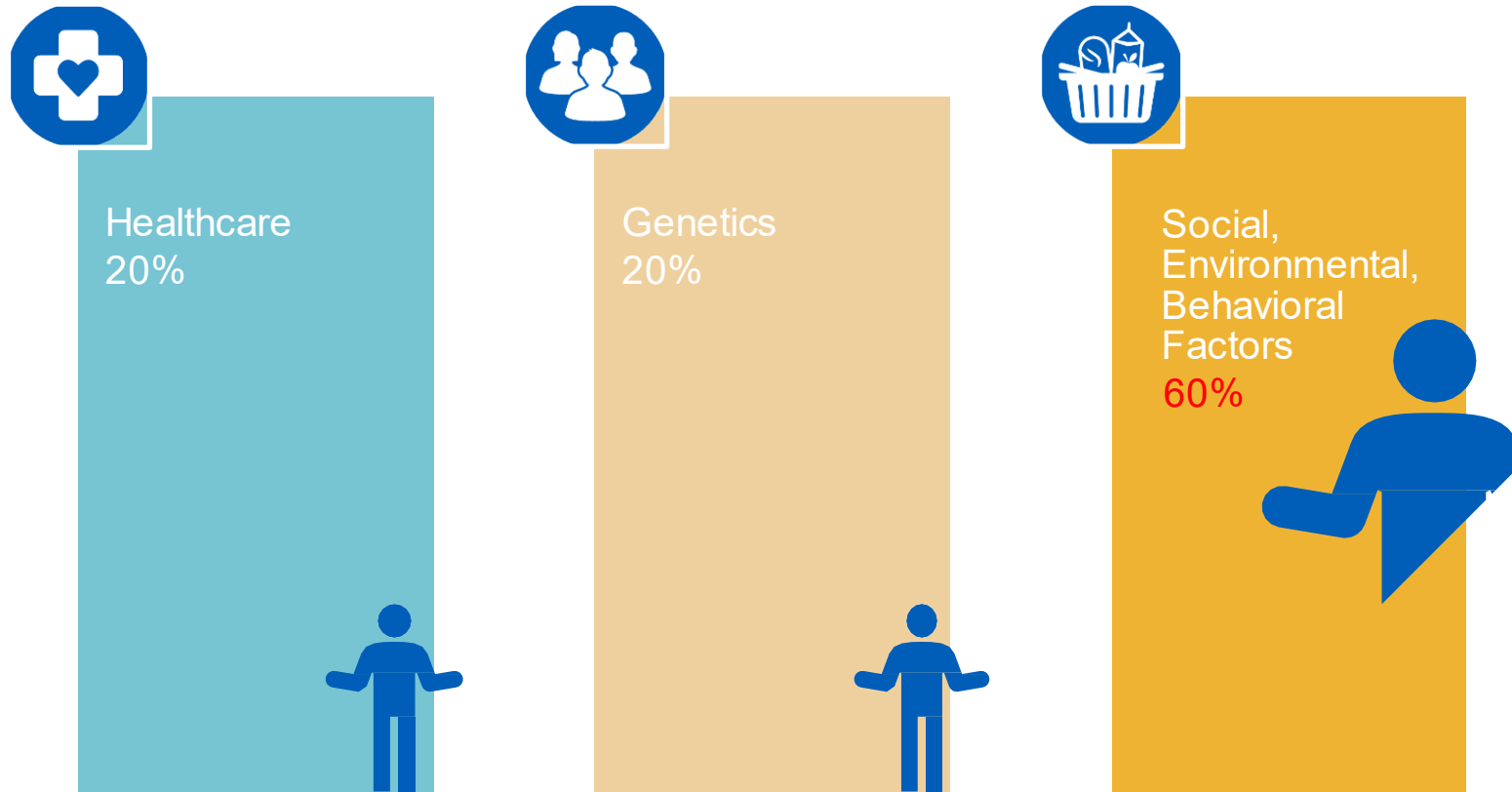
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Healthy Lifestyles

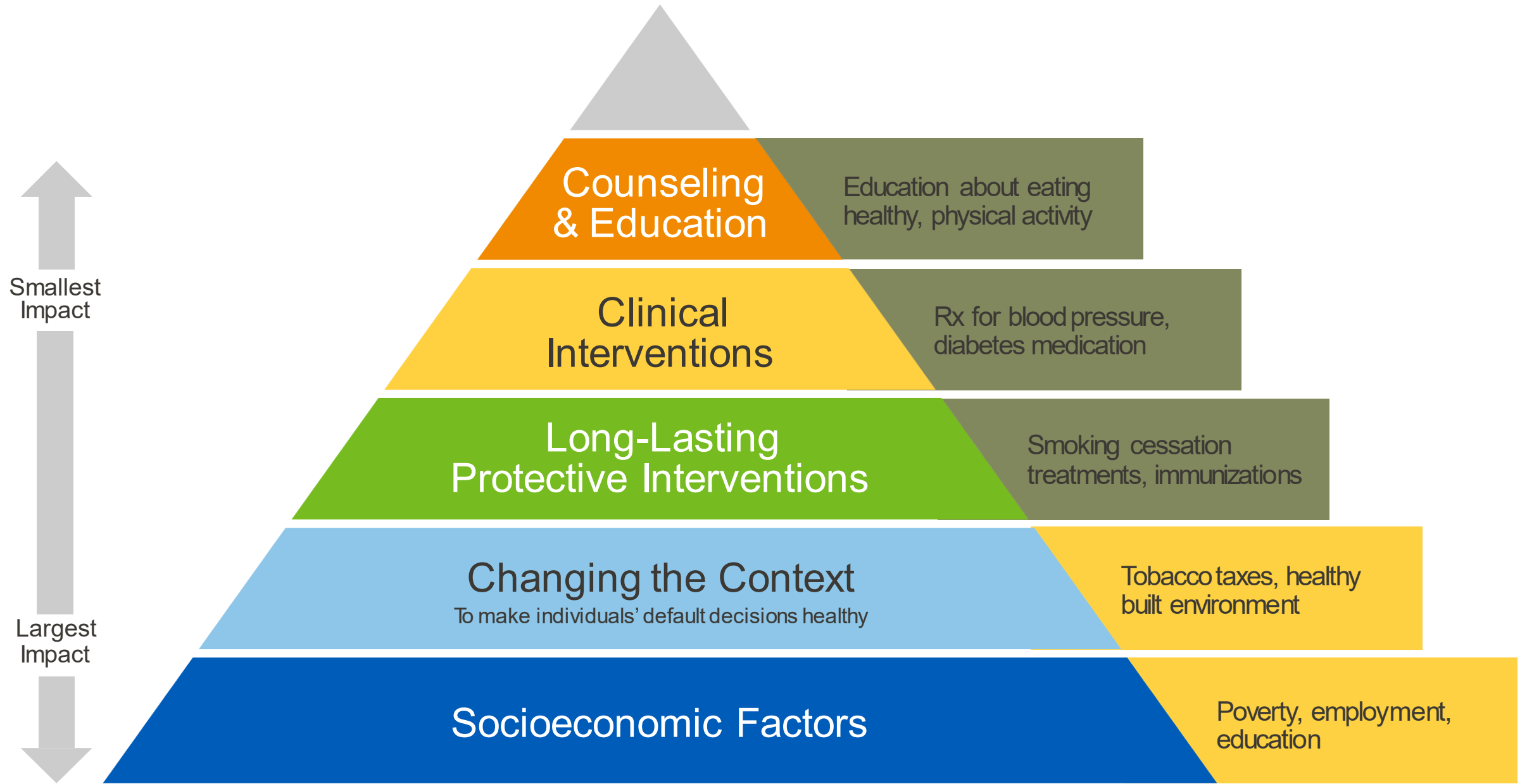
Healthy Lifestyles initiatives engage Kansans of all ages in promoting healthy habits. Whether at school, at home or in the community, these initiatives are inspiring healthy behaviors for life.

[LEARN MORE →](#)

There is More to Health than Healthcare



Social determinants of health are the conditions in which people are born, grow, live, work and age that shape health...and the fundamental drivers of those conditions. (WHO)



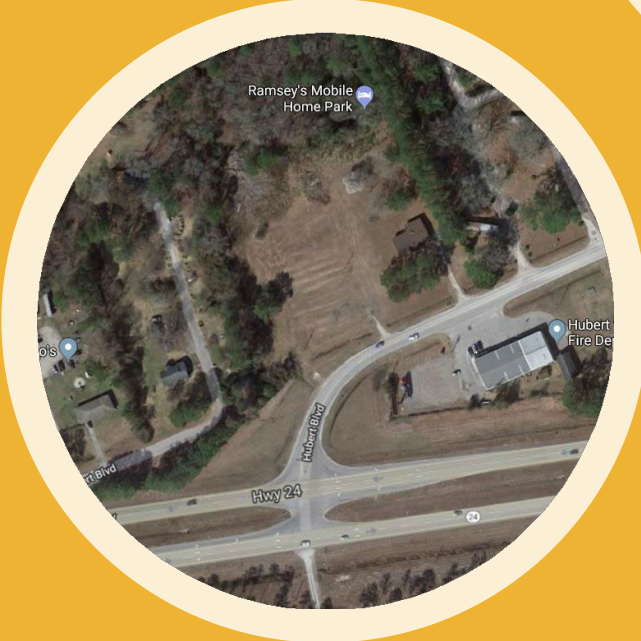
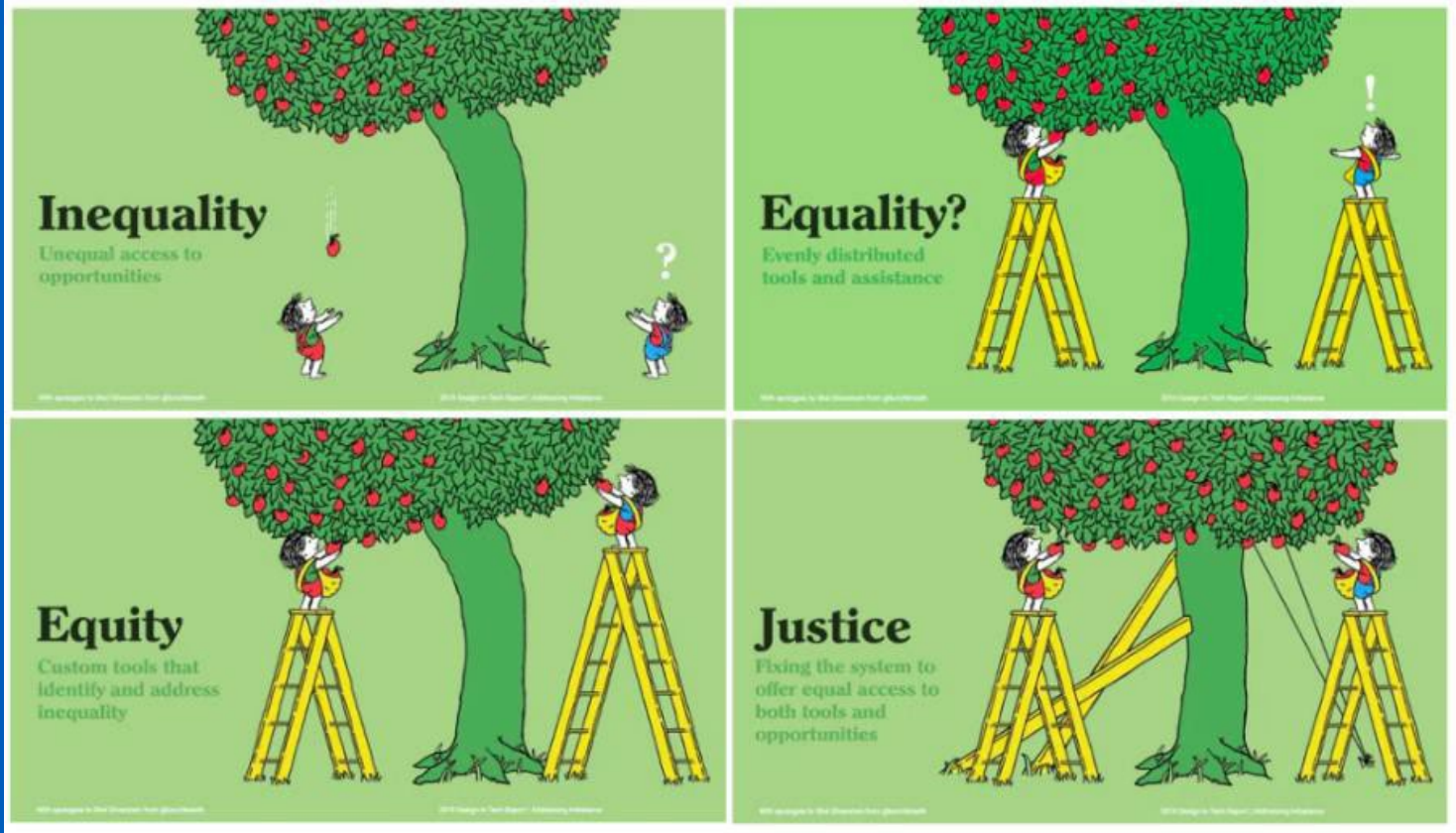


Figure 1
Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education			
Support	Walkability				
	Zip code / geography				

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations



Blue Cross Blue Shield Association's (BCBSA) National Health Equity Strategy includes:

- ✓ Collecting data to measure disparities
- ✓ Scaling effective programs
- ✓ Working with providers to improve outcomes and address unconscious bias
- ✓ Leaning into partnerships at the community level
- ✓ Influencing policy decisions at the state and federal levels

In April 2021, BCBSA made public a bold, system-wide goal:

TO REDUCE RACIAL DISPARITIES IN MATERNAL HEALTH BY 50% IN FIVE YEARS.



What We've Learned

The U.S. maternal death rate rose sharply in 2020 during the COVID-19 pandemic. Black women are three times more likely to die from childbirth complications than White women, and face a 70% higher risk of severe maternal morbidity (SMM), or life-threatening events, than any other racial groups—often related to conditions that require close attention throughout a woman's pregnancy.

These disparities span education levels, socioeconomic status, age and geography—pointing to deeper-seated issues like underlying chronic conditions, racial inequities and bias within the health care system that must be addressed systemically and across a woman's life span—not just while she is pregnant.

Meaningful actions must combat the cultural, operational and structural barriers that have created inequities that exist today, while also addressing disparities in maternal health. Here's what we've learned so far:

- Maternal care must be culturally conscious and competent: Implicit bias, and lack of cultural humility and awareness, create a trust barrier in patient-provider relationships. This can not only deepen disparities but also puts the effectiveness of maternal care at risk.
- Data is critical to measure impact: There are significant gaps in available health equity data. Without access to the right data, or usage standards, it is hard to measure disparities and even more difficult to solve for them.
- Postpartum care is vital maternal care: Addressing maternal equity gaps requires us to rethink the full spectrum of maternal care, especially during the post-delivery period.



"Your health shouldn't depend on the color of your skin or the neighborhood you live in."

The crisis in racial disparities in our country's health care is unconscionable and unacceptable. While BCBS companies have made great strides in addressing racial health disparities in our local communities, there is so much more to be done."

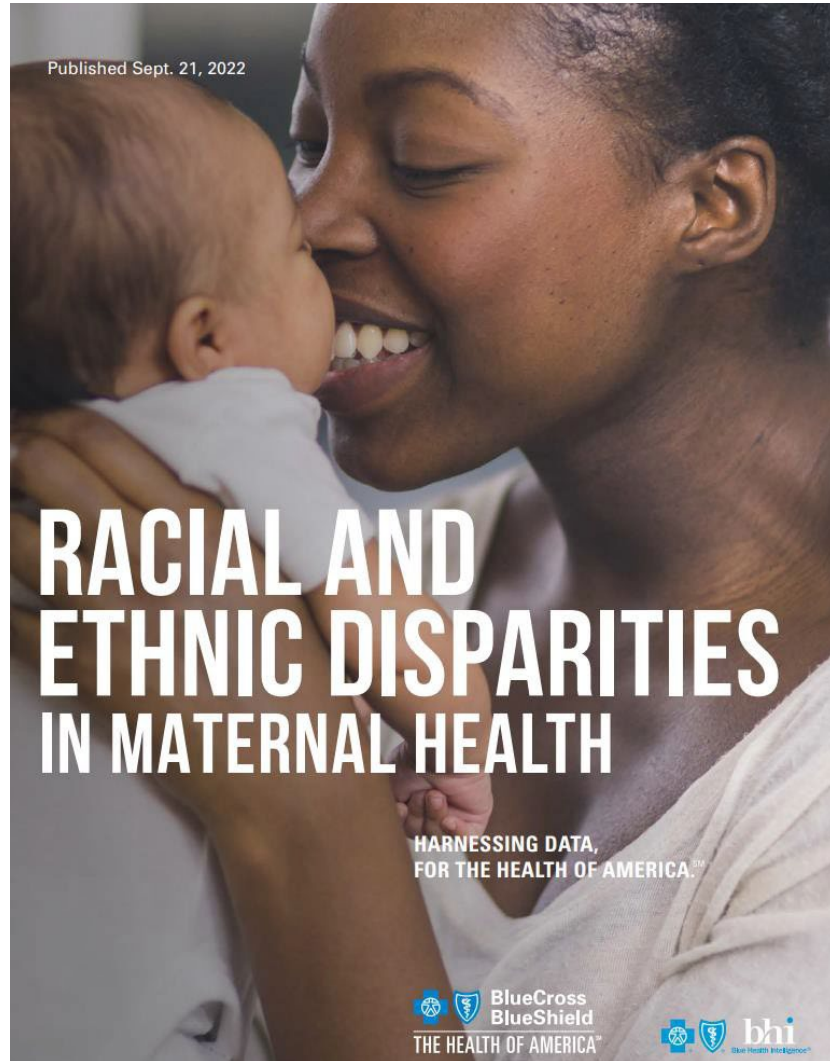
**— Kim Keck, President and CEO,
Blue Cross Blue Shield Association**

Top Ten Maternal Health Equity Actions

-  **1** Engage maternal voices and community stakeholders to craft, build and sustain a holistic maternal health program. Form public and private partnerships to address root causes of disparities, inequalities and Social Determinants of Health (SDOH). 
-  **2** Provide access to cultural humility and unconscious bias training for everyone in the maternal care continuum. 
- 3** Include nurse-midwives and birthing centers in provider networks and design programs to increase education and awareness for members. 
- 4** Facilitate access to doulas and community health workers for maternal support services. 
- 5** Implement facilitated self-management or peer prenatal care models such as CenteringPregnancy.™ 

- 6** Expand benefit coverage to ensure postpartum care including behavioral health care to one year post-delivery. 
- 7** Align quality measurement with national standards-setting organizations and tie back to provider quality programs. 
-  **8** Join and participate in a Perinatal Quality Collaborative. 
- 9** Implement value-based contracts specific to maternal health. 
- 10** Amplify programs of special significance such as vaccination programs with a focus on COVID-19 and influenza. 

RACIAL AND ETHNIC DISPARITIES IN MATERNAL HEALTH



KEY FINDINGS

1. SMM rates have risen about 9% for all racial and ethnic groups in both the BCBS commercially insured and Medicaid populations between 2018 and 2020.
2. Early evidence among commercially insured women indicates the pandemic has likely worsened this trend.
3. SMM rates are consistently higher among Black, Latina and Asian women compared to White women, regardless of age or type of insurance.
4. While SMM rates for all women rise with age, Black women ages 35-44, especially those with chronic conditions, have a 66% higher risk of experiencing an SMM event than White women.
5. Black, Latina and Asian women have higher rates of many risk factors (such as asthma, diabetes or high blood pressure) for SMM than White women.

<https://www.bcbs.com/the-health-of-america/reports>

SMM Rates Are Substantially Higher for Black, Latina and Asian Women

For Black women with commercial insurance, SMM rates were 53% higher, and with Medicaid, 73% higher than SMM rates for White women. Rates were also higher among Latina and Asian women. Latina women with commercial insurance had 22% higher rates and with Medicaid, 28% higher rates of SMM than White women. Asian women with commercial insurance had 15% higher rates and, with Medicaid, 38% higher rates of SMM than White women (Exhibit 2).



Exhibit 2: Commercially Insured vs. Medicaid SMM Rates by Race and Ethnicity During Delivery Through Six Weeks Postpartum (Per 10,000 Births)

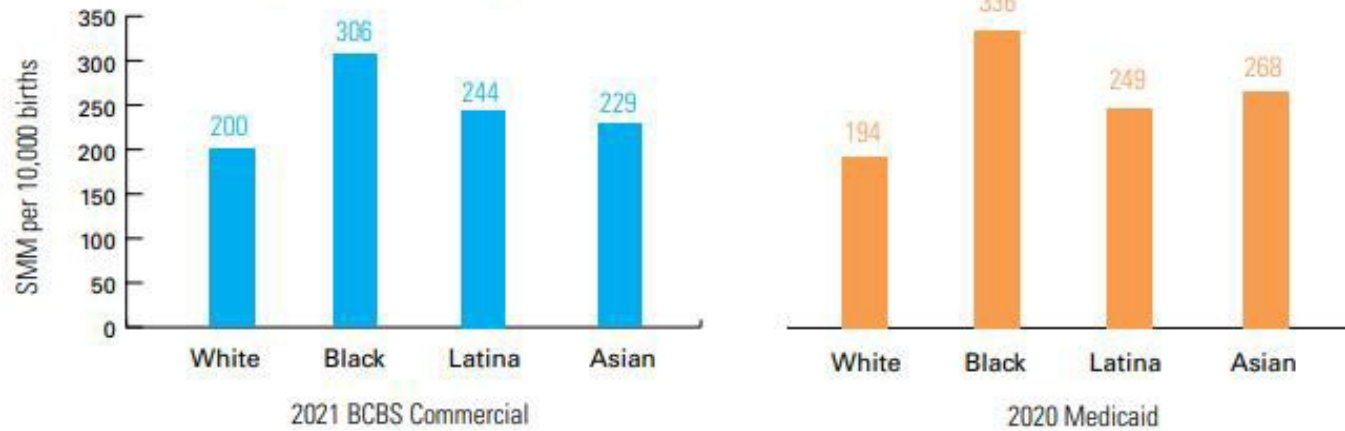


Exhibit 3a: Commercially Insured SMM Rates by Race, Ethnicity and Age During Delivery Through Six Weeks Postpartum (Per 10,000 Births) (Averaged between 2018-2021)

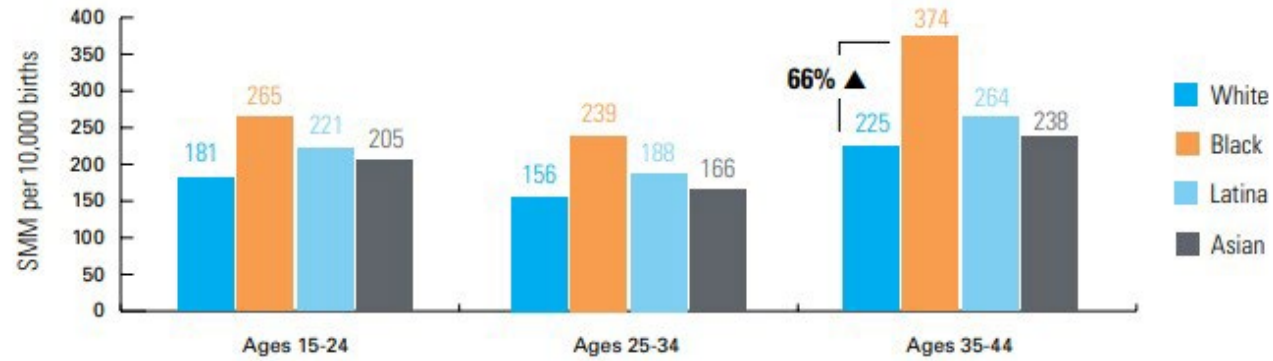
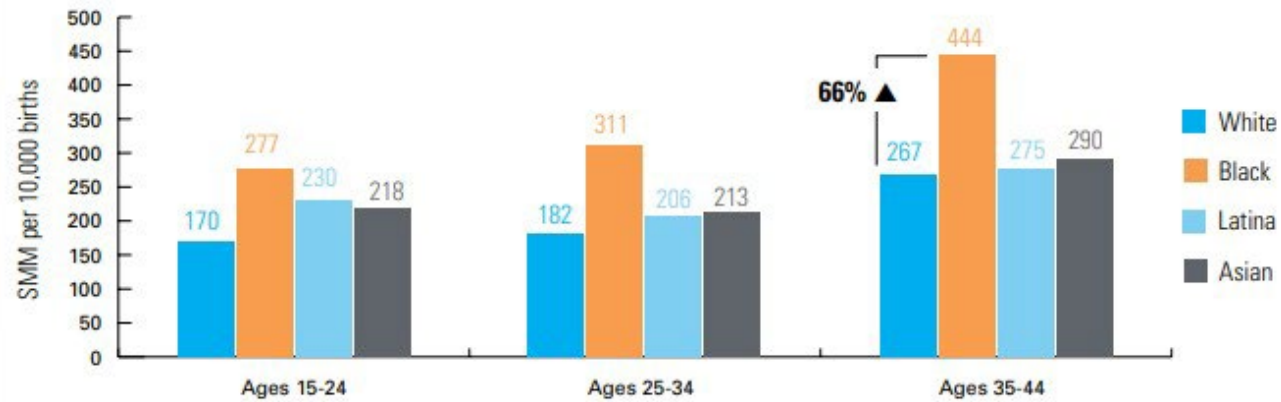


Exhibit 3b: Medicaid SMM Rates by Race, Ethnicity and Age During Delivery Through Six Weeks Postpartum (Per 10,000 Births) (Averaged between 2016 to 2020)



Disparities in Risk Factors Among Women with Commercial Insurance

Among women with commercial insurance, the prevalence rate of each of these risk factors is higher for at least one, and sometimes all three, racial and ethnic groups than it is for White women. Prevalence rates are highest among Black women compared to other groups for all risk factors except for those older than 36.

Exhibit 4: Risk Factors by Race and Ethnicity for Commercial Population

Risk Factor	Prevalence Rate (per 100)				Percent Difference		
	White	Black	Latina	Asian	Black vs. White	Latina vs. White	Asian vs. White
Preeclampsia w/Severe Features	3.5	5.7	3.9	2.6	61%	12%	-26%
Placental Abruption	0.9	1.2	1.0	1.1	34%	10%	30%
Current Birth Preterm	8.6	11.6	9.6	8.0	36%	12%	-6%
Asthma	5.5	7.1	6.2	3.6	28%	12%	-34%
Preexisting Diabetes	1.2	1.9	1.8	1.5	53%	44%	22%
Chronic Hypertension	3.4	6.1	4.3	2.0	78%	26%	-42%
Anemia	10.4	17.6	11.1	12.2	70%	7%	18%
Delivery BMI >40	0.8	1.3	0.8	0.3	61%	3%	-66%
Age >35 at Delivery	23.9	24.7	28.8	38.7	3%	21%	62%

RACIAL AND ETHNIC DISPARITIES IN MATERNAL HEALTH

Disparity in the Number of Risk Factors by Race and Ethnicity

Comparing the number of risk factors among women of color to White women of the same age provides deeper insight into the scope of these disparities. For example, 40% of Black women ages 35-44 have one or more risk factors for SMM, **which is 60% higher** than White women. Fourteen percent have two or more risk factors, **about 180% higher** than White women.

Exhibit 6: Number of Risk Factors by Race/Ethnicity* Among Commercial Women

Percentage of Risk Factors by Race/Ethnicity	White	Black	Latina	Asian
Ages 35-44 with one or more risk factors	25%	40%	32%	27%
Ages 35-44 with two or more risk factors	5%	14%	9%	6%

*Data for women with commercial insurance only, 2018-2021.



Who Is At Highest Risk for SMM?

Black women ages 35-44 with multiple risk factors are at the highest risk. In this age range, Black women have a higher prevalence of risk factors than women of other races and ethnicities. Research¹¹ has shown these risk factors, such as chronic conditions, may be linked to the cumulative effects of systemic racism.



BLUE CROSS BLUE SHIELD ASSOCIATION

Racial Disparities in Maternal Health



Rates of severe maternal morbidity¹ (SMM) have been increasing among all women in the U.S. But there are substantial racial disparities in SMM rates and their risk factors, such as bleeding disorders, diabetes and heart disease. A new report, “Racial Disparities in Maternal Health,” part of the Blue Cross Blue Shield, The Health of America Report® series, examines variations in these SMM rates and risk factors between majority white, Black and Hispanic communities. The Blue Cross Blue Shield Association (BCBSA) analyzed 2.2 million hospital births covered by Blue Cross Blue Shield (BCBS) commercial insurance from 2018 to 2020.

KEY FINDINGS

WIDE DISPARITIES IN CHILDBIRTH COMPLICATIONS

SMM rates were substantially higher for women in majority Black and majority Hispanic communities (63% and 32% respectively) than for women in majority white communities in 2020.



YOUNGER BLACK MOTHERS ARE STILL AT HIGHER RISK

Black women under the age of 24 are more likely to experience severe childbirth complications than white women over the age of 35 – an age group usually considered high risk.

DISPARITIES VARY IN SMM INDICATORS BETWEEN RACES/ETHNICITIES

Compared to majority white communities, women in majority Black and Hispanic communities have higher prevalence rates for nearly all SMM indicators, such as acute kidney failure, sepsis, shock and eclampsia.

BLACK AND HISPANIC WOMEN ARE MORE LIKELY TO HAVE RISK FACTORS FOR SMM

Women in majority Black communities have up to twice the prevalence of risk factors, and women in majority Hispanic communities have prevalence rates up to a third higher for some risk factors, than women in majority white communities.

DOING THE WORK

Many BCBS companies have started the work to reduce these disparities and prevent dangerous outcomes. That includes [identifying women at risk](#) and providing one-on-one coaching to manage their chronic conditions during pregnancy, [addressing underlying social needs](#) that have a significant impact on health and providing community support, [such as doulas](#), to mothers throughout their pre- and postnatal journeys.



National Health Index

Health Index Comparison

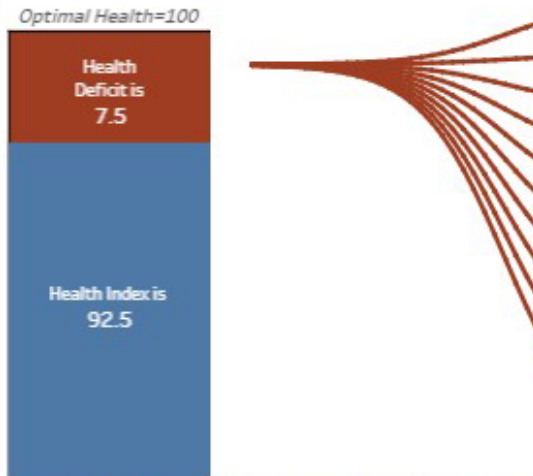


© 2023 Mapbox © OpenStreetMap

Select a color or click and drag ac

Less Healthy

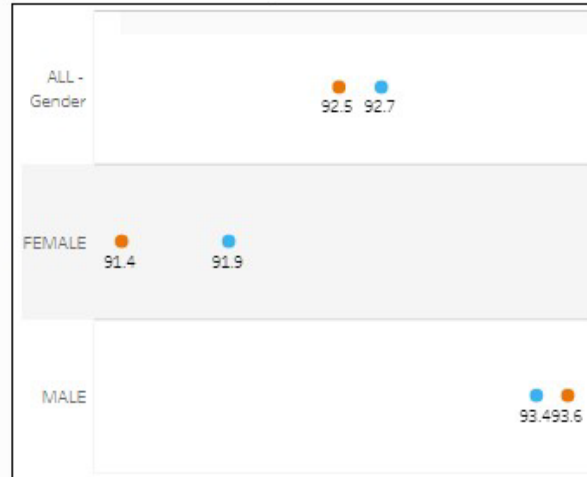
Kansas Conditions Impact



The chart above illustrates the top 10 most impactful conditions. Conditions are more impactful (more prevalent and severe) to a p

Demographic Comparison

By Gender



By Age



■ National ■ State

■ National ■ State

The charts above shows how the BCBS Health Index scores differ across age and gender groups.

Note: For counties or demographics with insufficient data, no BCBS Health Index score is given.

News

Healthy Blue Partners with Doulas of Douglas County to Address Racial Disparities in Maternal and Infant Health

Doulas of Douglas County announces that Healthy Blue is a new sponsor and partner in expanding access to doula support and improving health outcomes for mothers of color and birthing parents.

The United States has the highest maternal mortality rate among developed countries. Black women and birthing parents are more than three times more likely to die in childbirth than white women and birthing parents. Doula support can address these health inequities for at-risk individuals--low-income, rural, and communities of color.

Doulas of Douglas County provides support during pregnancy, at birth and through the postpartum period. In addition to these services, families served by a doula can access support such as up to 12 weeks of paid parental leave (funded through a United Way Anti-Poverty grant) and a community closet with items such as breastfeeding supplies, pregnancy clothing and diapers.

"Our goal is to ensure that women of color in our community have what they need to successfully parent their young children," said Traci Dotson, Doulas of Douglas County program manager.

Doulas of Douglas County recently launched a program with funding from the Kansas Children's Cabinet and Trust Fund to develop a network of infant and toddler childcare centers for mothers and birthing parents returning to work after parental leave.

"Our newborn babies are learning right after birth," said Daneka Vann, Doulas of Douglas County education specialist. "I'm excited to join with mothers of color to get our babies off to the best possible start in life. We are building a community working together to invest in our babies and ourselves as parents."

Healthy Blue provides Doulas of Douglas County with funding for:

- Free doula support for 50 birthing people
- Office space for Doulas of Douglas County to host childbirth education classes, breastfeeding support and other community gatherings for families
- Supplies for the Maternity, Birth and Wellness Community Closet

Healthy Blue is a collaboration of Blue Cross Blue Shield of Kansas, Blue Cross and Blue Shield of Kansas City (Blue KC) and Anthem Partnership Holding Company, which was formed in hopes of being selected to serve KanCare when the state issues Medicaid managed care contracts next year.



Blue Cross and Blue Shield of Kansas

- REL Data partnership with Blue Health Intelligence
- Hiring Health Equity Manager
- Engaging with Kansas Stakeholders
- Partnering!

Maternal & Child Health Equity Conference

Addressing
-the-
Social
Determinants
-of-
Health

Save the Date
August 25, 2023 | 8a-4p
WSU Metropolitan Complex
Wichita, KS

Featuring Keynote Speaker:
Nina Wallerstein, DrPH, MPH

INSTITUTE FOR HEALTH EQUITY ADVANCES
ADVANCING RESEARCH
IN COMMUNITY
HEALTH EQUITY

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Our Home. Our Heart.



Mental & Behavioral Health

MiResource



Mental Health Campaign



WellSky Updates on Network Build

In-Network Partners

alzheimer's association



Kansas Children's Service League

ChildCare Aware OF EASTERN KANSAS

EL CENTRO DE TOPEKA

Atticus



A Lifestyle Change Program For A Better You

MIDLAND CARE Meals



K-STATE Research and Extension



catholic charities OF NORTHEAST KANSAS

community Action PARTNERSHIP COMMUNITY ACTION, INC.

DOORSTEP Neighbors Helping Neighbors

TOPEKA & SHAWNEE COUNTY PUBLIC LIBRARY

JAYHAWK AREA AGENCY ON AGING, INC.

SCMS HealthAccess

Let's Help Building a Better Community

Kansas Office of Public Advocates Kansas Ombudsman Office

East Topeka Senior Center

BlueCross BlueShield Kansas

Stormont Vail Health



United Way of Greater Topeka

Topeka Habitat for Humanity



TRM MINISTRIES TOPEKA RESCUE MISSION MINISTRIES

Parents as Teachers

TOPEKA public schools Engage! Prepare! Inspire!

IBSA



BOYS & GIRLS CLUBS OF TOPEKA

Log Referral & Contact

HOCI Housing and Credit Counseling Inc

The Kansas Community Network has 34 in network organizations that offer 399 unique services that span a wide range of services

We can help you connect to community resources

Finding help to meet your needs is easy. BCBSKS is providing you with access to a free community resource directory to assist you with finding services in your area.

[LEARN MORE](#) →



<https://www.bcbsks.com/blue-health-initiatives/kansas-community-network>