

# **Birth Certificate Match Report Comparison of Maternal Demographic Characteristics Medicaid vs. Non-Medicaid Reimbursed Births – 2010 Iowa Medicaid**



## Fact sheet purpose

The purpose of the fact sheet is to highlight the characteristics of Iowa women who gave birth in Iowa during calendar year 2010, with a focus on women with labor and delivery costs reimbursed by Medicaid compared to women with labor and delivery costs not reimbursed by Medicaid. This information will be used to guide decision makers in implementing programs that improve the health outcomes of the women and infants who rely on Medicaid coverage.

## Background

Medicaid is a state/federal program that provides health insurance for certain groups of low-income people, including pregnant women. Iowa Medicaid is administered by the Iowa Department of Human Services through the Iowa Medicaid Enterprise. In Iowa, pregnant women may be eligible for Medicaid if their household income is below 300 percent of the federal poverty level.

The labor and delivery costs for 40 percent of live birth deliveries in Iowa were reimbursed by Medicaid in calendar year 2010 (40.5%; n=15,582 of 38,514 births).

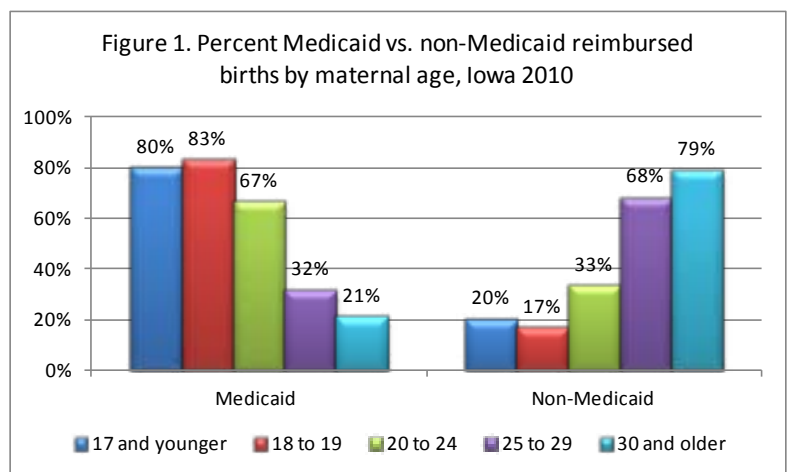
## Data Sources

Data for this report were derived from a matched file of the 2010 birth certificate and Medicaid paid claims for calendar year 2010. Paid claims were used for maternal diagnostic related groups (DRGs) 370 through 375. DRGs 370-375 are the reporting categories for vaginal and cesarean deliveries. The birth certificate was used for maternal demographic characteristics including age, race, ethnicity and level of education. Medicaid status was based on a paid claim for any one of the delivery related DRGs.

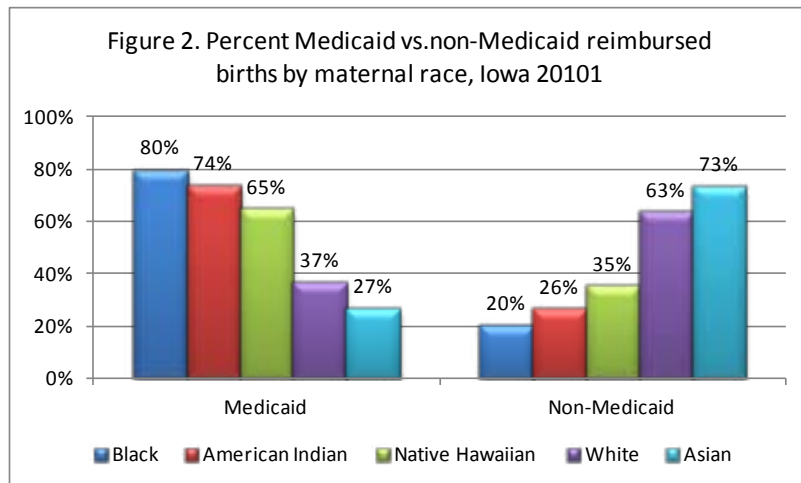
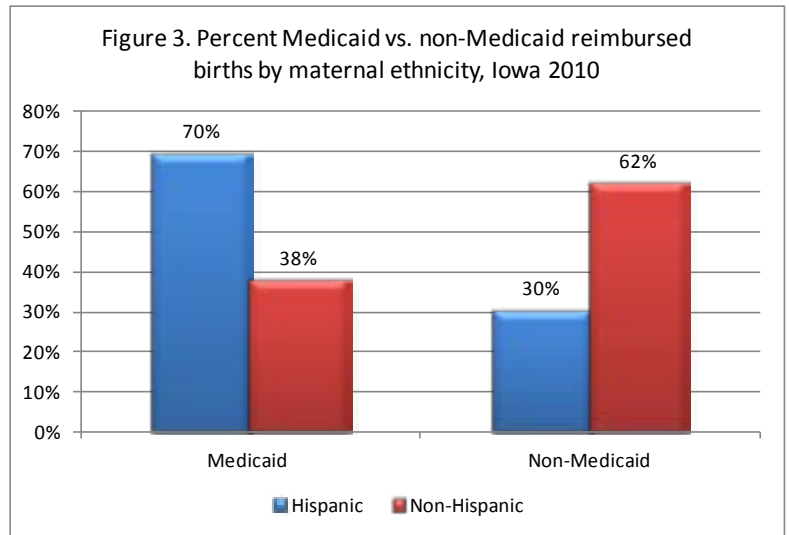
In 2010, among births to girls aged 17 years and younger, 80 percent (n=670) were reimbursed by Medicaid compared to 20 percent (n=168) of non-Medicaid recipients (Figure 1). Similar to girls age 17 years and younger, a greater percentage of births to women ages 18 to 19 were reimbursed by Medicaid (83%; n=1,846) 20 to 24 were reimbursed by Medicaid

(67%; n=6,185) compared to non-Medicaid reimbursed births (33%; n=3,109).

The percent of births to Medicaid recipients ages 25 to 29 years was 32 percent (n=4,077) compared to 68 percent (n=8,768) of among non-Medicaid reimbursed births. Among live births to women ages 30 and older, 21 percent (n=2,804) were reimbursed by Medicaid. Seventy-nine percent (n=10,502) of live births among women ages 30 years and older were among non-Medicaid reimbursed births.



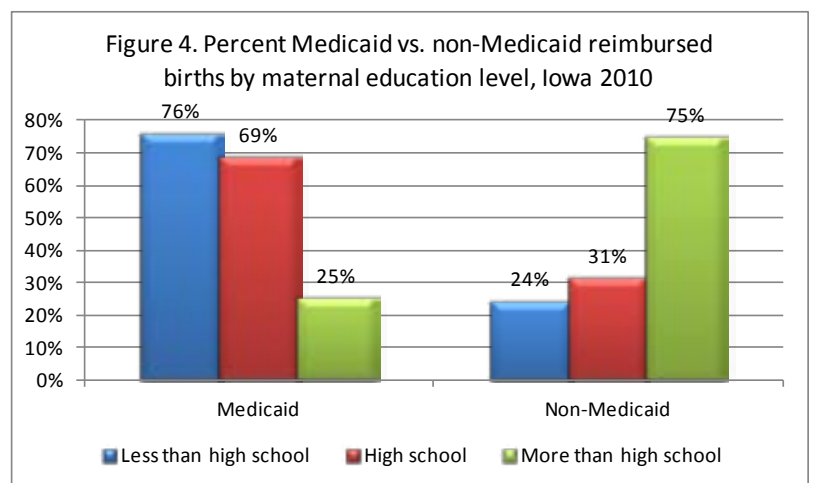
In 2010, a significantly greater percentage of births to women from racial and ethnic minorities were reimbursed by Medicaid. For example, among births to Black women, 80 percent (n=1,339) were reimbursed by Medicaid compared to 20 percent (n=339) of non-Medicaid reimbursed births (Figure 2). Among Native American women, nearly three-fourths (74%; n=156) of births were reimbursed by Medicaid compared to just over a quarter (26%; n=56) of births that were not reimbursed by Medicaid. Sixty-five percent (n=44) of births to Native Hawaiian women were reimbursed by Medicaid. Thirty-five percent (n=24) of births to Native Hawaiian women were not reimbursed by Medicaid. Thirty-five percent (n=24) of births to Native Hawaiian women were not reimbursed by Medicaid.



In contrast, thirty-seven percent (n=12,226) of births to white women and twenty-seven percent (n=255) of births to Asian women were reimbursed by Medicaid.

In 2010, 70 percent (n=2,145) of births to Hispanic women were reimbursed by Medicaid compared to thirty-eight percent (n=13,436) of births to non-Hispanic women (Figure 3).

In 2010, among women with less than a high school education, three-fourths (n=3,843) of births were reimbursed by Medicaid, compared to 25 percent (n=1,220) of births that were not reimbursed by Medicaid (Figure 4). Among women with a high school education, more than two-thirds (69%; n=5,237) of births were reimbursed by Medicaid. In contrast, one-fourth (25%; n=6,427) of births to women with more than a high school education were reimbursed by Medicaid.



## Discussion

Availability and access to Medicaid covered health services are crucial for low-income pregnant women. Forty percent of Iowa births in 2010 were reimbursed by Medicaid. Medicaid coverage is particularly important to young women, including those who are still in high school. It is also a vital source of health care coverage for women of racial and ethnic minorities in Iowa.

## Program and Policy Implications

Programs that empower young women, particularly those who have not yet completed high school, to prevent pregnancy and complete their educational goals, can reduce the proportion of births that are reimbursed by Medicaid. For example, by age 22 years, only about 50 percent of teen mothers obtain a high school diploma, compared to almost 90 percent of women who had not given birth during their adolescence<sup>1</sup>.

A disproportionate number of births to women of racial and ethnic minorities were reimbursed by Medicaid in 2010 compared to white, Asian and Hispanic women in Iowa. Programs and policies that address income and health insurance disparities among racial and ethnic minorities in Iowa may also reduce the proportion of births that are reimbursed by Medicaid.

## What is the Iowa Medicaid - Birth Certificate Match Project?

The Iowa Medicaid – Birth Certificate Match project is supported by an inter-departmental agreement between the Iowa Department of Human Services and the Iowa Department of Public Health/Bureau of Family Health and Bureau of Health Statistics. The purpose of this project is to monitor and describe the characteristics of pregnant Medicaid recipients, their receipt of pregnancy related services, and their birth outcomes relative to

women whose deliveries are not reimbursed by Medicaid. The resulting information can be used to improve programs and policies to benefit Medicaid recipients.

## Additional Information

For additional information or to obtain copies of this fact sheet, write or call the Iowa Department of Public Health, Bureau of Family Health, at 321 E. 12th Street, Des Moines, IA 50309 or toll-free at 1-800-383-3826.

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<sup>1</sup>Perper K, Peterson K, Manlove J. Diploma attainment among teen mothers. Child Trends, Fact Sheet Publication #2010-01: Washington, DC: Child Trends: 2010