

2013 Iowa Medicaid  
Birth Certificate Match Report

# DEMOGRAPHICS

Maternal Demographic Characteristics by Medicaid Reimbursement Status





## FACT SHEET PURPOSE

The purpose of the fact sheet is to highlight the characteristics of women who gave birth in Iowa during calendar year 2013, 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 may 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 specific 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 375 percent of the federal poverty level.

In 2013, the labor and delivery costs for nearly 39 percent of Iowa resident births were reimbursed by Medicaid (38.9%; n=15,212 of 39,013 births).

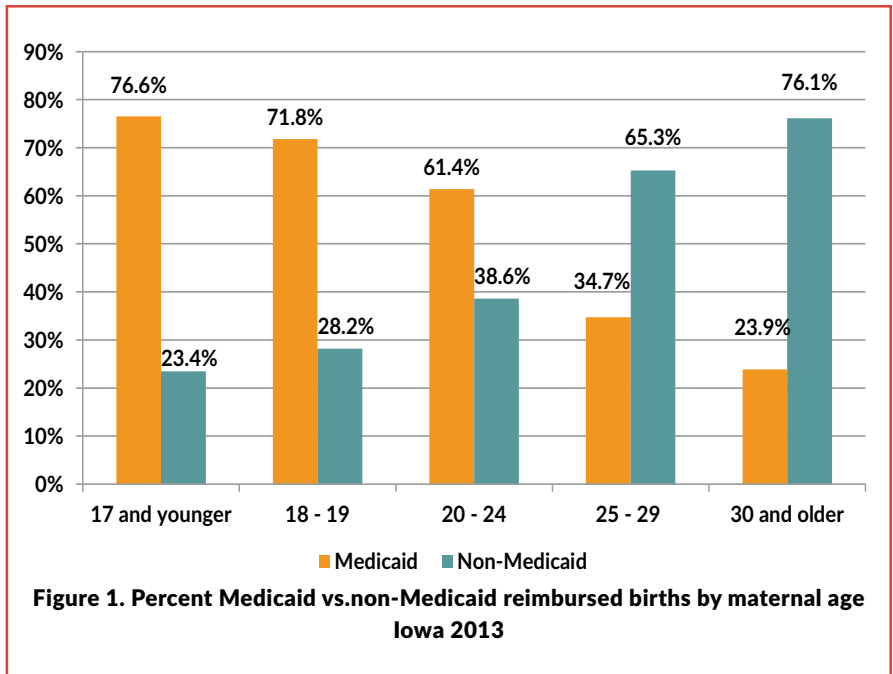


## DATA SOURCES

Data for this report were derived from a matched file of the 2013 birth certificate and Medicaid paid claims for calendar year 2013. Medicaid status was based on a paid claim for any one of the delivery related diagnostic related groups. We used paid claims for maternal diagnostic related groups for vaginal and cesarean deliveries. These groups are: 765 through 775. Birth certificate data were used for maternal demographic characteristics including age, race, ethnicity and level of education, prenatal care initiation, and infant birth outcomes. Medicaid status was determined by whether the birth certificate linked to a paid claim for any one of the delivery related diagnostic related groups.

# BIRTHS BY MATERNAL AGE AND MEDICAID STATUS

Medicaid reimbursement for births is inversely related to the mother's age. For example, in 2013, 76 percent of births to girls ages 17 and younger (76.6%; n=454) were reimbursed by Medicaid (Figure 1 & Table 1). However, just 24 percent (23.9%; n= 3,508) of births to women ages 30 and older were reimbursed by Medicaid.



**Table 1. Percent and count of births by maternal age and Medicaid status, Iowa resident births 2013**

Age	Medicaid reimbursed births		Non-Medicaid reimbursed Births		Total Births	
	Number	%	Number	%	Number	%
17 and younger	454	76.6	139	23.4	593	1.5
18-19	1,224	71.8	481	28.2	1,705	4.4
20-24	5,488	61.4	3,453	38.6	8,941	22.9
25-29	4,538	34.7	8,534	62.3	13,072	33.5
30 and older	3,508	23.9	11,193	76.1	14,701	37.7
<b>Total</b>	<b>15,212</b>		<b>23,800<sup>1</sup></b>		<b>39,012</b>	

Compared to calendar year 2013, the percent of Medicaid reimbursed births among women ages 18 to 19 decreased significantly. Specifically, the percent of births reimbursed by Medicaid decreased from 79.2 percent (2012) to 71.8 percent (2013) ([Demographics 2012<sup>2</sup>](#)). The percent of Medicaid reimbursed births to women ages 17 and younger, as well as ages 20 to 24, also decreased. However, the percent changes were not significant.

<sup>1</sup>n=1 missing age

<sup>2</sup>[http://www.idph.state.ia.us/hpcdp/common/pdf/family\\_health/2012\\_medicaid\\_demographics.pdf](http://www.idph.state.ia.us/hpcdp/common/pdf/family_health/2012_medicaid_demographics.pdf)



# BIRTHS BY MATERNAL RACE AND MEDICAID STATUS

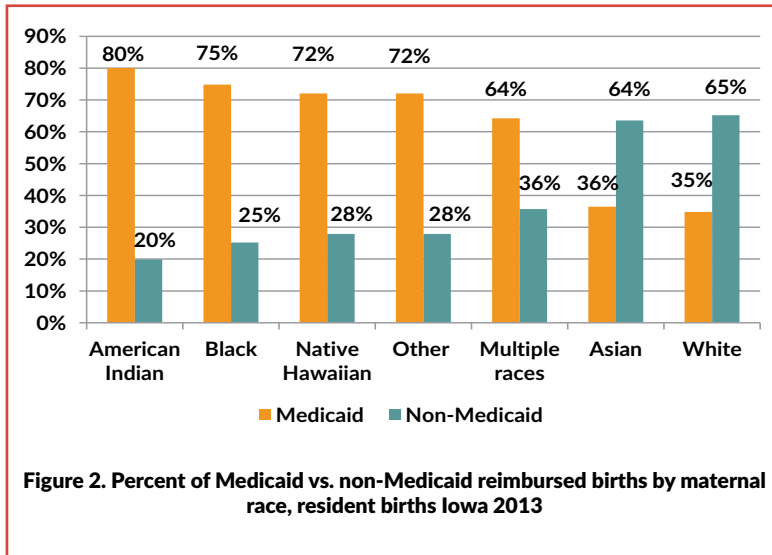


Figure 2. Percent of Medicaid vs. non-Medicaid reimbursed births by maternal race, resident births Iowa 2013

Women self-report their race on a birth certificate worksheet that is distributed and completed by the women in the birthing hospital. Women with home births also complete the worksheet. Women may select more than one race or other (not-specified) race on the worksheet. In 2013, Medicaid reimbursed more than two-thirds of the births occurring to American Indian women, Black women, Native Hawaiian women and those who reported they were of more than

one race (Figure 2 & Table 2). In contrast, among White and Asian women, approximately one-third of births were reimbursed by Medicaid.

Table 2. Percent and count of births by maternal race and Medicaid status, Iowa resident births 2013

Race	Medicaid reimbursed births		Non-Medicaid reimbursed births		Total Births	
	Number	%	Number	%	Number	%
American Indian	165	80.1	41	19.9	206	0.5
Black	1,470	74.8	495	25.2	1,965	5.0
Native Hawaiian	56	71.8	22	28.2	78	0.2
Asian	441	36.5	768	63.5	1,209	3.1
Other race	1,104	72.1	428	27.9	1,532	3.9
Multiple races	311	64.3	173	35.7	484	1.2
White	11,664	34.8	21,871	65.2	33,535	86.0
<b>Total</b>	<b>15,211<sup>3</sup></b>		<b>23,798<sup>4</sup></b>		<b>39,009</b>	

The percent of Medicaid reimbursed births among Black women decreased significantly, from 81.3 percent in 2012 to 74.8 percent in 2013 ([Demographics 2012<sup>5</sup>](#)). The percent of Medicaid reimbursed births among White women increased significantly from 33.5 percent in 2012 to 34.8 percent in 2013. The percentage of Medicaid reimbursed births to Native Hawaiian women, American Indian women, and Asian women also increased. However the percent differences were not significant.

<sup>3</sup>n=1 race not reported

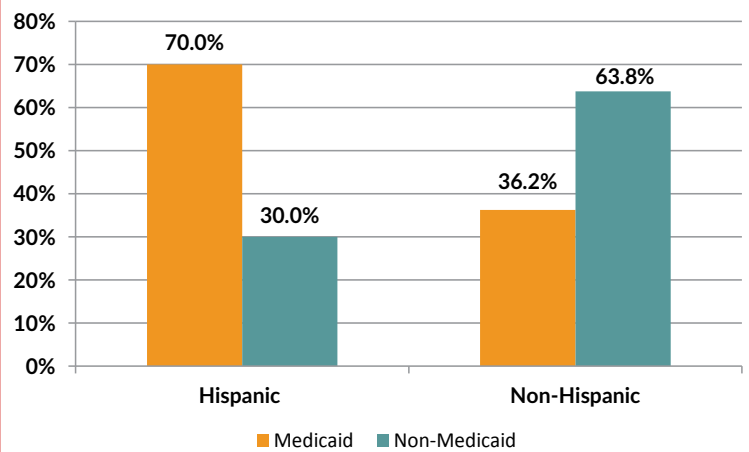
<sup>4</sup>n=3 race not reported

<sup>5</sup>[http://www.idph.state.ia.us/hpcdp/common/pdf/family\\_health/2012\\_medicaid\\_demographics.pdf](http://www.idph.state.ia.us/hpcdp/common/pdf/family_health/2012_medicaid_demographics.pdf)

# BIRTHS BY MATERNAL ETHNICITY AND MEDICAID STATUS



**Figure 3. Percent Medicaid vs. non-Medicaid reimbursed birth by maternal ethnicity, Iowa 2013**



Similar to race, women self-report their ethnicity on a birth certificate worksheet that is distributed and completed in the delivery hospital. Women with home births also complete the worksheet. In 2013, 70 percent (70.0%; n=2,221) of births to Hispanic women were reimbursed (Figure 3 & Table 3). Thirty percent (30.0%; n=952) of births to Hispanic women were not reimbursed by Medicaid. Thirty-six percent

(36.2%; n=12,990) of births to non-Hispanic women were reimbursed by Medicaid. Sixty-three percent (63.8%; n=22,845) of births to non-Hispanic women were not reimbursed by Medicaid.

**Table 3. Percent and count of births by maternal ethnicity and Medicaid status, Iowa resident births 2013**

Ethnicity	Medicaid reimbursed births		Non-Medicaid reimbursed births		Total Births	
	Number	%	Number	%	Number	%
Hispanic	2,221	70.0	952	30.0	3,173	91.9
Non-Hispanic	12,990	36.3	22,845	63.8	35,835	8.1
<b>Total</b>	<b>15,211<sup>6</sup></b>		<b>23,797<sup>7</sup></b>		<b>39,000</b>	

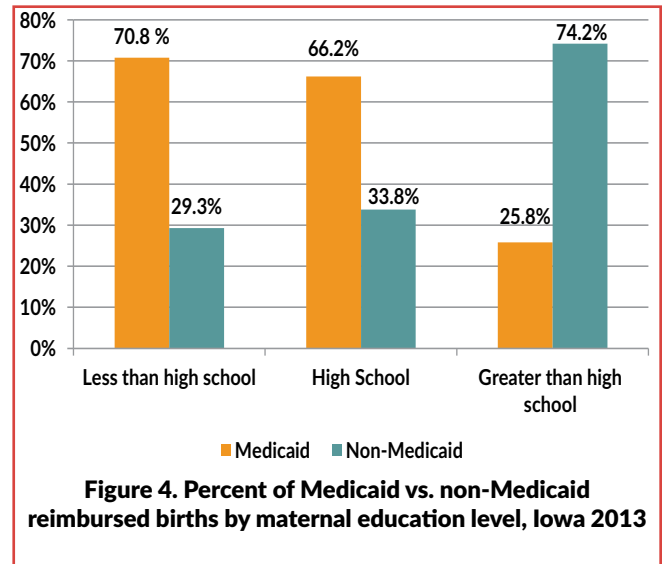
There was no change in the percent of Medicaid reimbursed births by ethnicity in 2013 compared to that of 2012.

<sup>6</sup>n=1 ethnicity not reported

<sup>7</sup>n=4 ethnicity not reported

# BIRTHS BY MATERNAL EDUCATION LEVEL AND MEDICAID STATUS

In 2013, 71 percent (70.7%; n=3,246) of births to women with less than a high school education were reimbursed by Medicaid, (Figure 4 & Table 4). More than two-thirds (66.2%; n=5,055) of births to women with a high school education were reimbursed by Medicaid. In contrast to women with less than a high school education, 25 percent (25.8%; n=6,905) of births to women with more than a high school education were Medicaid reimbursed. Seventy-four percent (74.2%; n=19,867) of births to women with more than a high school education were not Medicaid reimbursed.



**Table 4. Percent and count of births by maternal education level and Medicaid status, Iowa resident births 2013**

Educational level	Medicaid reimbursed births		Non-Medicaid reimbursed births		Total Births	
	Number	%	Number	%	Number	%
Less than high school	3,246	70.8	1,342	29.3	4,588	11.8
High school	5,055	66.2	2,582	33.8	7,637	19.6
More than high school	6,905	25.8	19,867	74.2	26,772	68.8
<b>Total</b>	<b>15,206<sup>8</sup></b>		<b>23,791<sup>9</sup></b>		<b>39,997</b>	

The percent of Medicaid reimbursed births among women with less than a high school education decreased significantly, from 75.0 percent in 2012 to 70.8 percent in 2013 ([Demographics 2012<sup>10</sup>](#)). Likewise, the percent of Medicaid reimbursed births among women with a high school education decreased significantly, from 68.2 percent in 2012 to 66.2 percent in 2013. The percent change in Medicaid reimbursed births among women with more than a high school education was not significant.

<sup>8</sup>n=6 education level not reported

<sup>9</sup>n=10 education level not reported

<sup>10</sup>[http://www.idph.state.ia.us/hpcdp/common/pdf/family\\_health/2012\\_medicaid\\_demographics.pdf](http://www.idph.state.ia.us/hpcdp/common/pdf/family_health/2012_medicaid_demographics.pdf)



## DISCUSSION

Overall, the percent of Medicaid reimbursed births decreased significantly from 2012 (40.3%; n=15,598 of 38,686 births) to 2013 (38.9%; n=15,212 of 39,013 births). By demographic subgroups, the percent decrease was most notable among women ages 18 to 19, Black women, and women with less than a high school education. At the same time, Medicaid continues to be an important source of health care coverage during pregnancy for young women and women of racial and ethnic minorities.

## 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/Bureaus of Family Health and 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.

The Iowa Department of Public Health acknowledges the Maternal and Child Health Epidemiology Program, Field Support Branch, Division of Reproductive Health, National Center for Chronic Disease Prevention and Public Health Promotion, Centers for Disease Control and Prevention for analytic support and preparation of this fact sheet.

## ADDITIONAL INFORMATION

For additional information or to obtain copies of this fact sheet, write or call:

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