Short-term Emergency Medicaid Coverage





Fact Sheet Purpose

The purpose of this fact sheet is to highlight the characteristics and birth outcomes of women whose labor and delivery costs were reimbursed by Medicaid's short-term emergency program compared to women whose labor and delivery costs were reimbursed by the larger Medicaid program.

Background

Medicaid is a state/federal program that provides health insurance for certain groups of low-income people, including pregnant women. In Iowa, pregnant women may be eligible for Medicaid if their household income is below 375 percent of the federal poverty level. Up to 3 days of Medicaid coverage is available to pay for the cost of emergency services for persons who do not meet citizenship, alien status, or social security number requirements.

In 2014, the labor and delivery costs for nearly 40 percent of Iowa resident births were reimbursed by Medicaid (38.4%; n=15,299 of 39,685 resident births). Of these Medicaid reimbursed deliveries, six percent (6.4%; n=980) were reimbursed by the 3-day emergency program. Iowa Medicaid is administered by the Iowa Department of Human Services through Iowa Medicaid Enterprise.

Data Sources

Data for this report were derived from a matched file of the 2014 birth certificate and Medicaid paid claims for calendar year 2014. Medicaid status was based on a paid claim for a delivery related diagnostic related group between 765 and 775, and linked to a birth certificate. Birth certificate data were used to determine maternal demographic characteristics, pre-existing conditions, smoking during pregnancy, prenatal care initiation, and infant birth outcomes.

Table 1. Selected maternal demographic characteristics, short-term emergency Medicaid coverage compared to Medicaid coverage only, lowa resident births, calendar year 2014

Characteristic	3-day emer	gency coverage	Medicaid coverage				
Age	Number	%	Number	%			
12-19	39	4.0	1,465	10.3			
20-29	504	51.4	9,408	66.0			
30 and older	437	44.6	3,376	23.7			
Race/ethnicity							
Non-Hispanic White	26	2.7	10,708	75.2			
Non-Hispanic Black	69	7.1	1,432	10.1			
Non-Hispanic Other	70	7.2	585	4.1			
Hispanic	814	83.2	1,517	10.7			

- Women who received short-term emergency coverage for their deliveries tended to be older than women who received regular Medicaid coverage for their deliveries.
- The majority of women who received short-term emergency coverage for their deliveries were of Hispanic ethnicity.

Table 2. Selected pre-existing conditions, smoking during pregnancy, and prenatal care initiation, short-term emergency Medicaid coverage compared to Medicaid coverage, lowa resident births, calendar year 2014.

Characteristic	Short-term emergency coverage		Medicaid coverage	
	Number	%	Number	%
Gestational diabetes	110	11.2	1,028	7.2
Pregnancy related hypertension	33	3.4	926	6.5
Previous preterm birth	38	3.9	725	5.1
Smoked cigarettes during pregnancy	6	0.6	3,164	22.2
First trimester prenatal care initiation	592	60.8	11,050	78.1

- A higher percentage of women who received short-term emergency coverage for their deliveries had gestational diabetes compared to women who received regular Medicaid coverage for their deliveries.
- A higher percentage of women who received regular Medicaid coverage for their deliveries had pregnancy related hypertension or a previous preterm birth.
- Less than one percent of women who received short-term emergency coverage for their deliveries smoked cigarettes during pregnancy, compared to 22% of women who received regular Medicaid coverage for their deliveries.
- A lower percentage of women who received short-term emergency coverage for their deliveries initiated prenatal care during their first trimester compared to women who received regular Medicaid coverage for their deliveries.

Table 3. Birth outcomes, 3-day emergency Medicaid coverage compared to Medicaid coverage, lowa resident births, calendar year 2014.

Characteristic	Short-ter	m emergency coverage	Medicaid coverage	
	Number	%	Number	%
Low birth weight	58	5.9	1,032	7.2
Preterm birth	75	7.7	1,349	9.5

- A lower percentage of women who received short-term emergency coverage for their deliveries gave birth to a low birth weight infant compared to women who received regular Medicaid coverage for their deliveries.
- Similarly, a lower percentage of women who received short-term emergency coverage for their deliveries gave birth to a preterm infant compared to women who received regular Medicaid coverage for their deliveries.

Additional Information¹

For additional information or to obtain copies of this fact sheet, contact 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.

¹ 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.