Policy Improvements and Legislative Impact on Rural Maternal Health

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AMCHP Mission and Vision

AMCHP leads and supports programs nationally to protect and promote the optimal health of women, children, youth families, and communities.

AMCHP envisions a nation that values and invests in the health and wellbeing of all women, children, youth, families, and communities so that they may thrive.
Who are our members?

• State public health leaders
• High-level state government officials
• Directors of MCH programs (Title V directors)
• Directors of CSHCN programs
• Adolescent health coordinators
• Families
• Academic, advocacy and community-based family health professionals
The Challenge

18 million women of reproductive age live in rural America

45% of rural U.S. counties had no hospital obstetric services from 2004-14; during this same period, an additional 9% of rural counties lost all hospital obstetric services

Pregnant women in rural counties must drive hours to deliver their babies due to local hospital closures

Women in rural areas experience higher rates of hospitalizations with complications during pregnancy vs. women living in metro areas
The Challenge

Increasing population and demand for obstetric care is outpacing the supply of providers.

106 Hospital closures since 2010; disproportionate amount in non-Medicaid expansion states

The median education debt for all medical school graduates in 2016 was $190,000

Total annual compensation for general ob-gyns is among the lowest of the surgical subspecialties.
A Suggested Path Forward

- Policies that support expansion of telehealth services/state QI initiatives...i.e. Utah ECHO
- Improving Access to Maternity Care Act – collect data and direct resources
- Policies/funding that will incentivize work in under-resourced communities
- Policies/reimbursement models that support non-physician healthcare professionals (CNMs)...birthing centers); obstetric collaborative/team based models
- Rising malpractice premiums
Thank You!!!

Let’s discuss...