



Transforming Maternity Care Blueprint for Action
Major Recommendations at a Glance

Performance Measurement and Leveraging of Results

1. Fill gaps to attain a comprehensive set of high-quality national consensus measures to assess processes, outcomes, and value of maternity care; care coordination; and experiences of women and families.
2. Improve availability and ease of collection of standardized maternity care data, both to encourage high-quality clinical care and to allow performance measurement and comparison.
3. Create and implement a national system for public reporting of maternity care data to all relevant stakeholders so that it can be leveraged to improve maternity care.
4. Use reported maternity care performance data to develop initiatives that foster improvement in the quality and value of maternity care at each level and throughout the system.

Payment Reform to Align Incentives with Quality

1. Advance efforts toward comprehensive payment reform through a restructured payment model that bundles payment for the full episode of maternity care for women and newborns.
2. Pilot the model payment reform strategy through regional demonstration projects funded through competitive Request for Funding Proposals.
3. While working toward comprehensive payment reform, implement selected policies immediately to address some severe misalignments in the current payment system.
4. Develop critical enabling factors and conditions for payment reform in concert with payment reform efforts.

Disparities in Access and Outcomes of Maternity Care

1. Expand access to services that have been shown to improve the quality and outcomes of maternity care for vulnerable populations.
2. Conduct research into the determinants and the distribution of disparities in maternity care risks and outcomes of care, and improve the capacity of the performance measurement infrastructure to measure such disparities.
3. Compare effectiveness of interventions to reduce disparities in maternity services and outcomes, and implement and assess effective interventions.
4. Improve maternity care and outcomes in populations experiencing disparities by increasing the number of under-represented minority caregivers and improving the cultural and linguistic competence of health professionals generally.

Improved Functioning of the Liability System

1. Improve the collection, analysis and dissemination of aggregated occurrence data for quality improvement and actuarial setting of premium rates.
2. Implement continuous quality improvement and clinical risk management programs to identify, prevent and mitigate adverse events in maternity care.
3. Improve the liability system by exploring alternative systems that separate negligence and compensation, compensate patients quickly and fairly, and remove waste from the system.
4. Align legal standards with objectives for a high quality, high performance maternity care system.

Scope of Covered Services for Maternity Care

1. Identify an essential package of evidence-based maternity care services for healthy childbearing women and newborns, and additional essential services of benefit to women and newborns with special needs.
2. Carry out research to evaluate the comparative effectiveness and safety of priority maternity services that require further evidence before they can be considered for inclusion in the essential services list.
3. Use determinations about comparative effectiveness of maternity services to make coverage decisions and improve the quality of maternity care.

Coordination of Maternity Care Across Time, Settings and Disciplines

1. Extend the health care home model to the full episode of maternity care to ensure that every childbearing woman has access to a Woman- and Family-Centered Maternity Care Home that fosters care coordination.
2. Develop local and regional collaborative quality improvement initiatives to improve clinical coordination at the community level.
3. Develop consensus standards for appropriate care level and risk criteria.

Clinical Controversies (Home Birth, Vaginal Birth After Cesarean, Vaginal Breech and Twin Birth, Elective Induction, Maternal Demand Cesarean)

1. Align practice patterns and views of both maternity caregivers and consumers with best current evidence about controversial clinical scenarios and evidence-based maternity care generally.
2. At the clinical microsystem and health care organization levels, implement policies and practices that foster safe physiologic childbirth and decrease excessive use of elective procedures and interventions.
3. At the macroenvironmental level, institute legislative and policy initiatives, payment incentives, and liability protections to foster access to a full range of care options for labor and birth supported by evidence.

Decision Making and Consumer Choice

1. Expand the opportunities and capacity for shared decision-making processes, and tools and resources to facilitate informed choices in maternity care.
2. Design system incentives that reward provider and consumer behaviors that lead to healthy pregnancies and high quality outcomes.
3. Revive and broaden the reach of childbirth education through expanded models and innovative teaching modalities.
4. Promote a cultural shift in attitudes toward childbearing.

Scope, Content and Availability of Health Professions Education

1. Align funding for health professions education with national goals for high quality, high value maternity care and workforce development.
2. Develop a common core curriculum for all maternity care provider disciplines that emphasizes health promotion and disease prevention.
3. Ensure that students in each discipline have opportunities to learn from an interdisciplinary teaching team.
4. Improve the quality and effectiveness of continuing education in all maternity care professions, and align maintenance of certification with performance measures.

Workforce Composition and Distribution

1. Define national goals for redesign of the U.S. maternity care workforce based on a primary care model with access to collaborative specialty care, consistent with the health care reform priority of primary preventive services and care coordination.
2. Carry out an independent capacity assessment to determine projected workforce needs, and identify strategies for achieving the optimal maternity care workforce.
3. Support the appropriate volume, geographic distribution and density of providers in each discipline through health care policy and reimbursement realignment.
4. Develop, test and implement interventions to improve collaborative practice among primary maternity caregivers and other members of the maternity team.

Development and Use of Health Information Technology

1. Increase interoperability across all phases and settings of maternity care by creating a core set of standardized data elements for electronic maternity care records.
2. Increase interoperability among health IT systems by implementing a persistent patient and provider identification system with adequate security features to protect individual health information.
3. Explore ways to use health IT to improve clinical care quality, efficiency and coordination and to enable performance evaluation in these areas, and implement incentives to drive widespread adoption of health IT for these uses.
4. Increase and improve consumer-based uses and platforms for health IT.