

# MLC-3 in Kansas

## Kansas Department of Health and Environment (KDHE)

### Participating Bureaus:

- Bureau of Public Health Informatics
- Bureau of Family Health
- Bureau of Local and Rural Health

### QI Team Members:

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## Quality Improvement Story Board



### Improving Access to Prenatal Care in the First Trimester

## Plan

### 1. Background

Several Kansas Department of Health and Environment (KDHE) programs have a role in encouraging and assuring women enter prenatal care in the first trimester of pregnancy. There may be opportunities for improved awareness and coordination among these programs.

### 2. Aim Statement

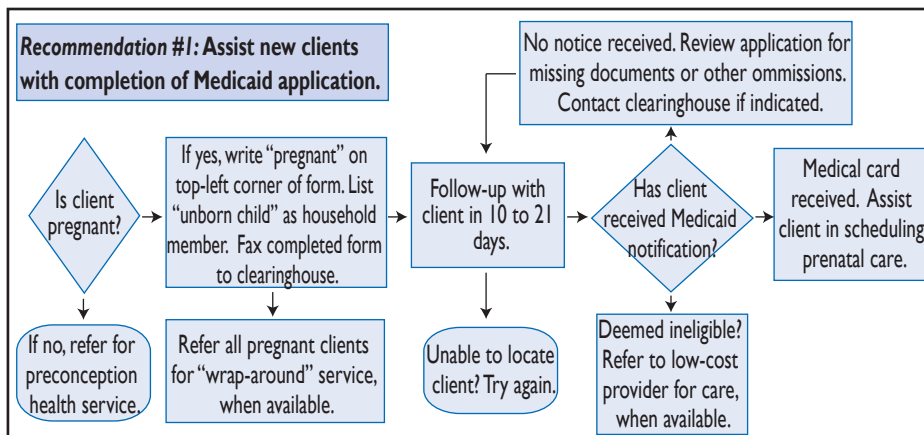
By Aug. 21, 2009, the state MLC-3 project team will identify at least six KDHE programs with significant impact on early entry into prenatal care for women of childbearing age. The team will conduct a systematic review of these six programs by Sept. 30, 2009. The team will identify at least three recommendations to KDHE leadership with the greatest potential to address gaps and increase coordination by Nov. 13, 2009.

### 3. Examine the Current Approach

Currently, there is limited coordination between KDHE programs that impact early entry into prenatal care.

### 4. Identify Potential Solutions

- Identify units within KDHE that impact women of reproductive age.
- Develop and distribute a questionnaire to unit leaders regarding the unit operations.
- Review the questionnaire results and select units most closely involved in programs related to the needs of women of reproductive age, then review policies, procedures and processes in use by these units.



### 5. Develop an Improvement Theory

Recommendations:

- A.** All KDHE programs involving or serving women of childbearing age should:
  - Provide assistance to clients in applying for Medicaid/CHIP.
  - Indicate pregnancy status on the upper portion of all Medicaid/CHIP applications.
  - Fax applications to the Medicaid/CHIP clearinghouse for expedited processing.
  - Follow up with the client to assure eligibility and appointment has been made.
- B.** Use safety net data to assess improvements in access to early prenatal care:
  - Select indicators (e.g., the quality of care provided).
  - Compare this data with other information sources within KDHE, identify gaps and duplication of efforts.
- C.** A KDHE workgroup shall be appointed to examine birth records to evaluate accuracy and relevance in assessing early access to prenatal care in Kansas.
- D.** Develop a resource directory of low-cost source of prenatal care. This resource directory should include:
  - A list of providers.
  - The scope of the providers' services.
  - Criteria used in determining client eligibility for services.

## Do

### 6. Test the Theory

- Recommendations were submitted to the State Health Officer and Bureau Directors for review, approval and adoption.
- Recommendation B has been adopted. Indicators have been selected and incorporated.
- Recommendation C has been adopted. Review of birth records by the

National Center for Health Statistics is in progress.

## Study

### 7. Study the Results

Results will be examined after the adoption of all recommendations.

## Act

### 8. Standardize the Improvement

Interventions found to be effective will be standardized.

### 9. Establish Future Plans

- "Discussions" with the Medicaid clearinghouse will focus on developing ways to measure changes in numbers and timeliness of enrollment of pregnant women.
- Outcomes based on selected indicators will be incorporated into future grant cycles, and evaluated with grant reports.
- Following training of birth clerks, an ongoing review of birth records will look for increased accuracy of data filed.
- Resource directory use will be determined by monitoring Web hits and hotline contacts. User needs will be identified by using online surveys.