

Evaluating Telehealth as a Strategy for Reducing Maternal Mortality and Morbidity Disparities

Statement of Problem

The maternal mortality rate in the U.S. is the highest among high-income countries and has been [steadily rising](#) in recent years. Maternal mortality is only the tip of the maternal health iceberg; rates of severe maternal morbidity (SMM) [have been increasing](#), and mental health conditions are now the [leading underlying cause](#) of pregnancy-related deaths in the U.S. “Mental health near misses,” such as [suicidality](#) and [overdose](#), are also increasing among birthing individuals. Disparities in outcomes of maternal mortality, SMM and mental health near misses (SMM+) exist for numerous populations due in part to a [lack of access to quality and continuous prenatal and postpartum care](#). There is an urgent need to identify safe and effective interventions to reduce SMM+ using approaches that are responsive to the role of social determinants of health.

An emergent and embraced tool during the COVID-19 pandemic, telehealth may prove useful in [addressing the social determinants of health](#) necessary to improve care utilization by mitigating systematic structural and social challenges faced by marginalized birthing people. However, there is little data on maternal safety outcomes like SMM+. Additionally, research is needed to understand how telehealth can be implemented during high-risk transition periods (e.g., postpartum) to overcome existing barriers with the specific goal of reducing SMM+ and SMM+ disparities.

Description

Our team aims to determine the impact of telehealth on SMM+ and SMM+ disparities and to identify best practices for implementing telehealth to reduce these outcomes. We will take a mixed-methods approach to evaluate interventions with an equity lens by conducting novel causal inference analyses of a national Medicaid claims database, the largest U.S. health insurance provider during pregnancy. The study will include qualitative work centered in Philadelphia—a city with among the nation’s highest maternal mortality disparities and featuring one of the country’s only local maternal mortality review committees—but with national reach.

The specific aims of the study are to:

1. Estimate the effects of telehealth prenatal and postpartum care strategies and state policies expanding coverage for telehealth modalities and payment parity on SMM+ and SMM+ disparities.
2. Identify barriers and facilitators to implementing telehealth care with the goal of reducing SMM+ and SMM+ disparities.
3. Develop and disseminate best practice recommendations for using telehealth to detect early warning signs of SMM+.

Next Steps

We’ll establish a community advisory board that will advise on the current project and next steps for future research.

Utilizing national Medicaid claims data will offer unique opportunities in the future to explore the impact of other policies on SMM+ and to identify potential clinical and policy interventions to improve maternal health equity.

Our hope is that this research will fill critical gaps in knowledge about the safety, effectiveness, and equity in maternal telehealth care and will inform care, guidelines, and policy in Philadelphia and nationally.

This project page was last updated in December 2024.

Suggested Citation

Children's Hospital of Philadelphia, PolicyLab. *Evaluating Telehealth as a Strategy for Reducing Maternal Mortality and Morbidity Disparities* [Online]. Available at: <http://www.policylab.chop.edu> [Accessed: plug in date accessed here].

PolicyLab Leads



[Meredith Matone](#)

DrPH, MHS



[Ellen Caniglia](#)

ScD

Team



[Stephanie Garcia](#)

MPH



[Katherine Kellom](#)

Funders of Project

National Institute of Child Health and Human Development

Project Contact

Ellen Caniglia

ellen.caniglia@pennmedicine.upenn.edu