

MOMS

Montana Obstetrics
& Maternal Support

Year 1 Highlights

The Montana Obstetrics & Maternal Support (MOMS) program was created to connect rural providers to obstetrical/gynecological, perinatal, mental health and addiction medicine specialists to build competency and consistency across perinatal providers. MOMS is a collaboration between the Montana Department of Public Health and Human Services, Billings Clinic, and the University of Montana. MOMS seeks to elevate maternal health as a priority in Montana.

- Montana has the 6th highest rate of maternal mortality at 40.7 deaths per 100,000 births.¹
- With 194 of every 10,000 deliveries resulting in significant complications, Montana's rate of severe maternal morbidity is 35% higher than the national average.²
- Racial and rural health disparities plague Montana's health system with 52 of Montana's 56 counties having at least one Medically-Underserved Area (MEA) designation.³
- More than half of Montana's counties do not have an obstetric physician or mid-level professional, such as a nurse practitioner, providing maternal healthcare. In these counties, women may travel hundreds of miles for annual visits and prenatal care, as well as delivery.³

Montana Department of Public Health and Human Services (DPHHS)

- Convened the **MOMS Maternal Health Leadership Council**, a state level advisory group that guides maternal health initiatives in the state of Montana.
- Transitioned the **Montana Perinatal Quality Collaborative (PQC)** to be convened by DPHHS, and is expanding membership and facilitating implementation of maternal quality and safety improvement projects at birthing facilities across the state.
- Working with the **Alliance for Innovation on Maternal Health (AIM)** to elevate maternal safety as a priority in Montana. Montana will apply for AIM enrollment in February 2021 and begin work on the first patient safety bundle.



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Billings Clinic

- Began work on the **MOMS Needs Assessment** which identified access/distance to care, lack of access to mental health and substance use treatment, and inadequate resources for identifying and remedying social determinants of health as the primary barriers to effective prenatal and postpartum care.
- Launched **MOMS Project ECHO** clinics that connect urban-based specialists to rural medical professionals serving Montana's perinatal and postpartum populations through a free, online telehealth platform. Through didactic presentations, patient case reviews, and peer discussions, ECHO participants learn best-practices in maternal health. Project ECHO limits provider isolation and improves competency and consistency across the state of Montana. Clinics are offered the 2nd and 4th Tuesday of each month.

Project ECHO has attracted over 100 unique participants, with more than 30 being physicians.

- Launched rural simulation training in conjunction with **Simulation in Motion-Montana (SIM-MT)**. 18 sites in Eastern Montana have been offered access to high-fidelity simulation training services provided in their communities at no cost. Learners have participated in birthing scenarios addressing uncomplicated births, basic neonatal resuscitation, and identification of obstetric hemorrhage.

17 physicians and midlevel providers have participated in SIM-MT trainings alongside their nursing, emergency medical technician, and law enforcement counterparts.

University of Montana- Center for Children, Families and Workforce Development (CCFWD)

- Completed the first annual **Maternal Health Report** to be disseminated to stakeholders in December 2020. This report compiles and synthesizes data from several public health and demographic surveillance systems to illustrate the status of maternal health in Montana.
- Conducted a **research study on telemedicine practices** adopted by obstetricians during the COVID-19 pandemic in Montana, Wyoming, and Idaho.
- Initiated a partnership with the Montana Hospital Association to **study severe maternal morbidity** and near miss obstetric events in rural and native communities.
- Provided continuous quality improvement (**CQI**) **assessments and feedback** to facilitate improvement of the MOMS Project ECHO Clinic and simulation training program.

References

- 1 America's Health Rankings analysis of CDC WONDER Online Database, Mortality files, United Health Foundation, [AmericasHealthRankings.org](https://www.americashealthrankings.org), Accessed 2020.
- 2 Center for Disease Control and Prevention, Rates in Severe Morbidity Indicators per 10,000 Delivery Hospitalizations 1993-2014. <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/smm/rates-severe-morbidity-indicator.htm>, Accessed 2020.
- 3 Montana Medicaid. 2016. Access Monitoring Plan. <https://www.medicaid.gov/sites/default/files/2019-12/mt-amrp-16.pdf>



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