



MEMORANDUM

**To: Ohio Department of Medicaid
CareSource**
From: First Year Cleveland
Date: March 27, 2020

RE: Recommendations for an Immediate Statewide Response to Protect Ohio's Moms and Babies During the COVID-19 Pandemic

To lower infant deaths during this unprecedented pandemic, additional system-wide and statewide changes must be executed as soon as possible. First Year Cleveland humbly requests immediate action be taken within 4 specific areas, so all of Ohio's 88 counties can work together to continue to decrease infant deaths.

- **Recommendation 1: All 5 Medicaid Managed Care Plans must be required to work with prenatal care providers to get a health parent/healthy baby COVID-19 kit out to each of their pregnant women and postpartum parents within the next 21 days. At a minimum, the kits must include: a blood pressure cuff, a body weight scale, urinalysis test strips, a thermometer, access to unlimited WIFI hotspot plans with supporting devices and free service for 180 days, and a gift card for use at food stores that will cover the cost of at least \$100 in delivered groceries a week for the duration of a women's pregnancy through the first year of life of each newborn. It is urgent that the State address digital disparities, now that critical appointments and activities require smartphones and reliable and adequate internet service plans. Examples of these activities include group prenatal care, online education, Home Visiting, working from home, and applying for critical benefits such as WIC and unemployment.**

Rational: Health care providers must transfer up to 95% of their prenatal care appointments to virtual visits that require the above equipment and technology. All Home Visiting and community-based programs focused on reducing infant deaths are being provided virtually. The digital divide impacts families throughout Ohio who have no access to the internet or may be forced to pay very high cell phone bills, due to overages beyond their contract limits on data, texting, and minutes.

- **Recommendation 2: State approved pandemic child care slots must allow, prioritize and make room for children of pregnant women and postpartum parents who must attend face-to-face health care appointments, appointments to maintain or enroll in benefits such as WIC, appointments in the legal or justice system, and outings in the community to purchase food, medications, and essential household items. All Medicaid Managed Care Plans must prioritize**

these essential appointments and/or outings with a high priority transportation program that provides drop off and pick up of parents and children to local pandemic early child care centers.

Rationale: There are circumstances that require a pregnant woman or new parent to attend a face-to-face health care appointment and go into the community for essential needs. Due to the pandemic, health care systems are no longer allowing any children to attend appointments within their facilities. In addition, children should not be accompanying pregnant women and new parents in the community. Some parents have no support system to babysit and certainly young children cannot stay home alone while parents attend to these high priority needs.

- **Recommendation 3: The Department and Managed Care Plans should utilize this opportunity to launch a statewide radio, television, and social media campaign to raise awareness about infant safe sleep practices and the importance of continuing prenatal care virtually, as many families are accessing multiple media outlets and social media while at home. This media campaign should be initiated no later than April 15, 2020 and should continue for at least 90 days.**

Rationale: With so many Ohioans glued to their television, radio, and social media pages, we must use this time to maximize a statewide voice on two core elements of infant vitality: safe sleep practices and early access to prenatal care.

- **Recommendation 4: Hospitals are going above and beyond during this pandemic and their labor and delivery practices are changing rapidly for the safety of the labor and delivery providers, laboring women and their newborns. They are making serious decisions to deny the presence of a laboring woman's support system during labor and delivery, including a partner, father, or birthing support persons such as perinatal support workers and doulas. As we know, the World Health Organization (WHO), The American College of Obstetricians and Gynecologists (ACOG), and The Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) have reiterated during this pandemic that support persons are essential to patient care throughout labor, delivery, and the immediate postpartum period. It is extremely important that a support system be considered part of the immediate care team, following all rules, such as being asymptomatic for COVID-19, and all screening protocols of the health care institution.**

Rationale: As of today, the American College of Obstetricians and Gynecologists supports one-to-one emotional support from a doula or perinatal support worker as the presence of these caregivers is associated with improved outcomes for women in labor.