

## Michigan Now Offering Group Prenatal Care Coverage

The Centering Healthcare Institute is pleased to announce that the Michigan Department of Health and Human Services (MDHHS) is now offering a group prenatal care reimbursement at \$45 enhanced payment for up to 12 visits per patient per session with the inclusion of federally qualified health centers (FQHCs). This change is effective October 1, 2024.

We want to thank MDHHS for developing this additional reimbursement for group prenatal care and their continuous efforts in improving maternal health through their *Healthy Moms, Health Babies* Initiative.

CHI is a non-profit organization that works closely with health care providers from all sectors to change healthcare, especially regarding improving outcomes related to mothers, babies, and families. CHI started when our founder, a certified nurse midwife, Sharon Rising, wanted to provide more effective prenatal care by bringing birthing people together for their visits. With over two decades of experience as the go-to resource for group care, we have developed and sustained the Centering model in nearly 400 practice sites and in some of the largest health systems in the world. Currently, the state of Michigan has 37 CP sites, and we would like to see this number grow to better the health outcomes of birthing people.

CenteringPregnancy® (CP) is an evidence-based, patient-centered model following nationally recognized guidelines that leads to better care, better health outcomes, and lower cost. CP health outcomes are aligned with the MISP efforts to improve maternal and infant outcomes and leads to greater engagement, learning and self-confidence, and higher satisfaction with the prenatal care among patients. CP decreases the rate of preterm and low weight babies, increases breastfeeding rates, leads to better pregnancy spacing, and has been shown to nearly eliminate racial disparities in preterm birth by creating an environment where social and economic factors that impact health are identified and addressed.

CP involves a significant shift in the model and schedule of prenatal care because it replaces traditional individual appointments, rather than being overlaid on them like care management visits or some other prenatal care enhancements, thereby presenting opportunities for alignment with alternative payment models.

## Resources:

- Medicaid Coverage of Group Prenatal Care Services (September 27, 2024)
- Mother Infant Health & Equity Improvement Plan (September 2019)