

Response to Public Comments
Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean
Delivery Affinity Group
CMS-10398 #76, OMB 0938-1148

CMS received two public comments on CMS-10398 #76 (Expressions of interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group). Both comments were from private individuals. One comment was in support of this expression of interest form and affinity group to improve maternal and infant health outcomes. The other comment was concerned about the expression of interest form requirement was burdensome and the fact that the affinity group meetings are not public.

Comment 1: I support the policy for expressions of interest in improving maternal health by reducing low risk cesarean delivery for a few reasons. First reason being that maternal health determines a child's health. According to the CDC, maternal and child health is "vital to creating a healthy world" (CDC Global Health Maternal and Child Health, 2014). When maternal and child health is affected generational health disparities are created. A second reason being that cesarean deliveries take a toll on the mothers healing process. It is vital for a mother to feel like she can return to her daily activities or get into a routine to take care of their new infant. The third reason I would support efforts in reducing cesarean deliveries would be that it takes a toll on the mother's mental health. Compared to vaginal deliveries, women who have cesarean deliveries are 6 times more likely to develop postnatal depression 3 months after delivery (Boyce, P. M., & Todd, A. L., 1992). Cesarean deliveries pose a short-term and long-term health risks to mothers and their children, and all efforts should be taken to reduce low risk cesarean deliveries.

CMS Response: Thank you for your comment in support of our work to improve maternal health by reducing low-risk cesarean delivery.

CMS Action: None.

Comment 2: Although vaginal delivery is the preferred method of delivery for both mother and infant health, this continues an unnecessary burden on state and local entities. Often times, health care providers and administrators of these programs are continuously bombarded with paperwork requirements that are unfunded and without thought to the time that is taken away from actual care of patients. There are also serious concerns about transparency and open government when subcommittees are allowed to meet privately (closed to the public). The risk to the general public outweighs the stated concerns. Portions of meetings that concern personal information may be conducted privately, however, all other meetings should be conducted openly.

CMS Response: Thank you for your comment. This expression of interest form is a one time request and it is voluntary. It only needs to be completed by state Medicaid and CHIP agencies that wish to participate in the Affinity Group. The Affinity Group provides no-cost technical assistance for states who would like guidance in developing and implementing a quality improvement project to improve maternal health through lowering the rate of low-risk cesarean deliveries. The Affinity Group is not a subcommittee; it involves 1:1 coaching with a quality improvement advisory team as well as some group workshops and peer to peer learning.

CMS Action: None