



Maternal mortality rates in the United States are rising. The U.S. has the highest rate of maternal death among developed nations with significant racial disparities and large differences in rates between states. The Society for Maternal-Fetal Medicine (SMFM) has identified five important ways that states are addressing the rising rates of maternal mortality: 1) the establishment of maternal mortality review committees, 2) the establishment of perinatal quality collaboratives, 3) the expansion of Medicaid, 4) reporting of maternal death data stratified by race/ethnicity, and 5) participation in the Alliance for Innovation on Maternal Health program. This fact sheet details the progress Missouri has made toward reducing maternal mortality. To view other state fact sheets, visit SMFM.org/scorecard.

Efforts by Missouri to Prevent Maternal Deaths

2018	2019	2020	
✓	✓	✓	Maternal Mortality Review Committee
✗	✓	✓	Perinatal Quality Collaborative
✗	✗	●	Medicaid Expansion
✓	✓	✓	Reports Maternal Mortality Data by Race/Ethnicity
*	*	✓	Alliance for Innovation on Maternal Health

Exists in the State: ✓
 In Progress: ●
 Does Not Yet Exist: ✗
 Not Measured in Past Years: *

Pregnancy-Related Mortality Ratio

(number of pregnancy-related deaths per 100,000 live births)

Race	Missouri*	USA
American Indian	+	28.3 [^]
Asian or Pacific Islander	+	13.8 [^]
Non-Hispanic Black	53.0	41.7 [^]
Hispanic	24.0	11.6 [^]
Non-Hispanic White	22.0	13.4 [^]
Overall	26.0	17.3*

*2017 | **2013-2017 | [^]2014-2017 | +data suppressed due to low numbers

Black women in Missouri are **nearly 2.5 times more likely to die** from pregnancy-related causes than white women.

Insurance Coverage for Reproductive-Aged Women and New Mothers in Missouri

14%

of women 15-44 years of age are without health insurance.

Missouri's Medicaid program covers pregnant people up to

201%

of the federal poverty level.

The rate of pregnancy-associated deaths for women on Medicaid was more than

5X

greater than the rate for those with private insurance.

Pregnant people and new mothers with monthly incomes of

\$3,638

or less are eligible for Medicaid coverage (family of 3).

Many new mothers lose Medicaid coverage

60

days after giving birth.

Postpartum Medicaid Extension

SMFM recommends that states provide 12 months of comprehensive postpartum Medicaid coverage to all new mothers.



*A section 1115 waiver that would permit Missouri to provide 12 months of postpartum Medicaid coverage to new mothers who are enrolled in a substance use disorder treatment program within 60 days after the end of pregnancy is pending with the U.S. Department of Health and Human Services.

State Actions Aimed at Reducing Maternal Deaths



Maternal Mortality Review Committees

- Gather and analyze data and
- Make recommendations

Driving Action by



Perinatal Quality Collaboratives

- Build the infrastructure for and advance system-wide quality improvement efforts



AIM

- Implement patient safety bundles



Policymakers

- Advance policy reforms, including expanding and extending Medicaid coverage

Missouri's Maternal Mortality Review Committee

Website

<https://health.mo.gov/data/pamr/>

Most Recent Report

<http://bit.ly/MOMMRCReport2020>

Year Most Recent Report Released

2020

Does Most Recent Report Include Recommendations?

Yes

Local Resources

Medicaid

<https://dss.mo.gov/mhk/accept.htm>

Questions? Contact Rebecca Abbott
(rabbott@smfm.org)

Review data sources and methodology at
<https://www.smfm.org/scorecardmethodology>.

Last updated January 18, 2021.

SMFM State Liaisons

Megan Foeller, MD
Daniel Jackson, MD, MS
Devon Ramaeker, MD
Leilah Zahedi-Spung, MD