

# DEMOGRAPHICS

2011 Iowa Medicaid – Birth Certificate  
Match Report Comparison of Maternal  
Demographic Characteristics Medicaid  
vs. Non-Medicaid Reimbursed Births



Iowans Working Together...  
Doing What Works



## Fact Sheet Purpose

The purpose of the fact sheet is to highlight the characteristics of Iowa women who gave birth in Iowa during calendar year 2011, with a focus on women with labor and delivery costs reimbursed by Medicaid compared, to women with labor and delivery costs not reimbursed by Medicaid. This information will be used to guide decision makers in implementing programs that improve the health outcomes of the women and infants who rely on Medicaid coverage.

---

## Background

Medicaid is a state/federal program that provides health insurance for certain groups of low-income people, including pregnant women. Iowa Medicaid is administered by the Iowa Department of Human Services through the Iowa Medicaid Enterprise. In Iowa, pregnant women may be eligible for Medicaid if their household income is below 300 percent of the federal poverty level.

In 2011, the labor and delivery costs for 40 percent of Iowa resident births were reimbursed by Medicaid (40.2%; n=15,357 of 38,204 births).

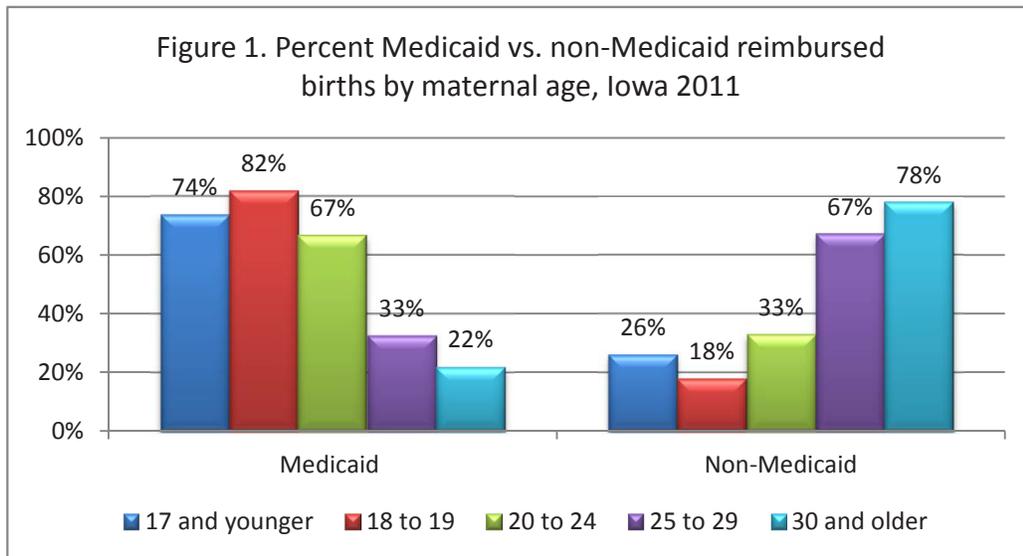
---

## Data Sources

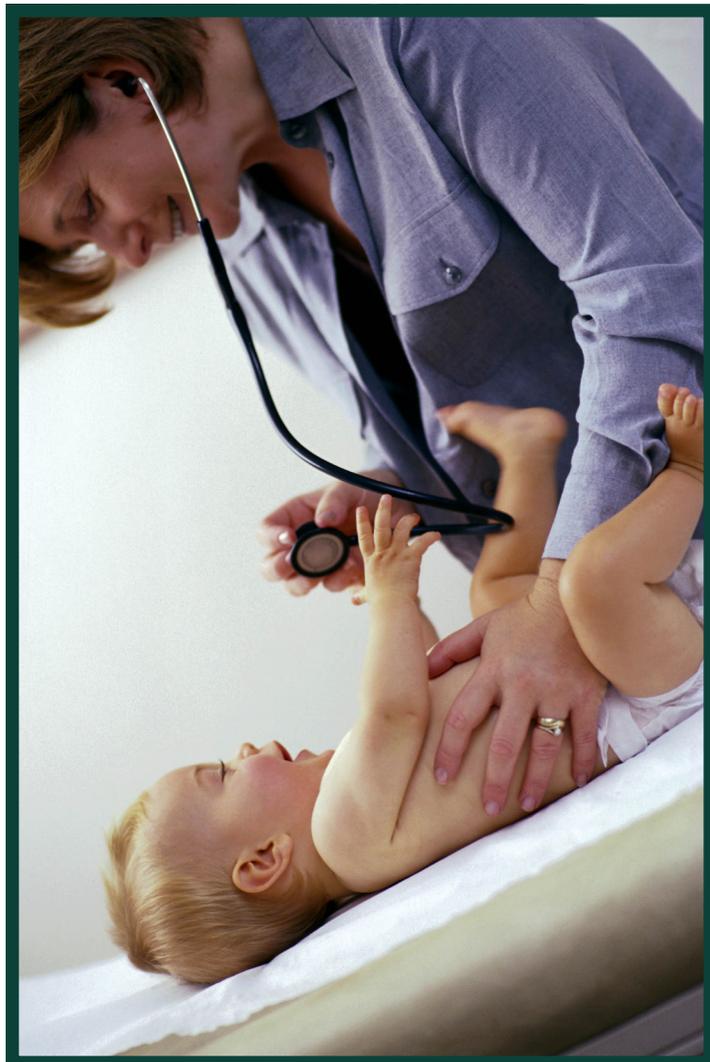
Data for this report were derived from a matched file of the 2011 birth certificate and Medicaid paid claims for calendar year 2011. We used paid claims for maternal diagnostic related groups (DRGs) 370 through 375. DRGs 370-375 are the reporting categories for vaginal and cesarean deliveries. The birth certificate was used for maternal demographic characteristics including age, race, ethnicity and level of education. Medicaid status was based on a paid claim for any one of the delivery related DRGs.



## Births by Maternal Age and Medicaid Status



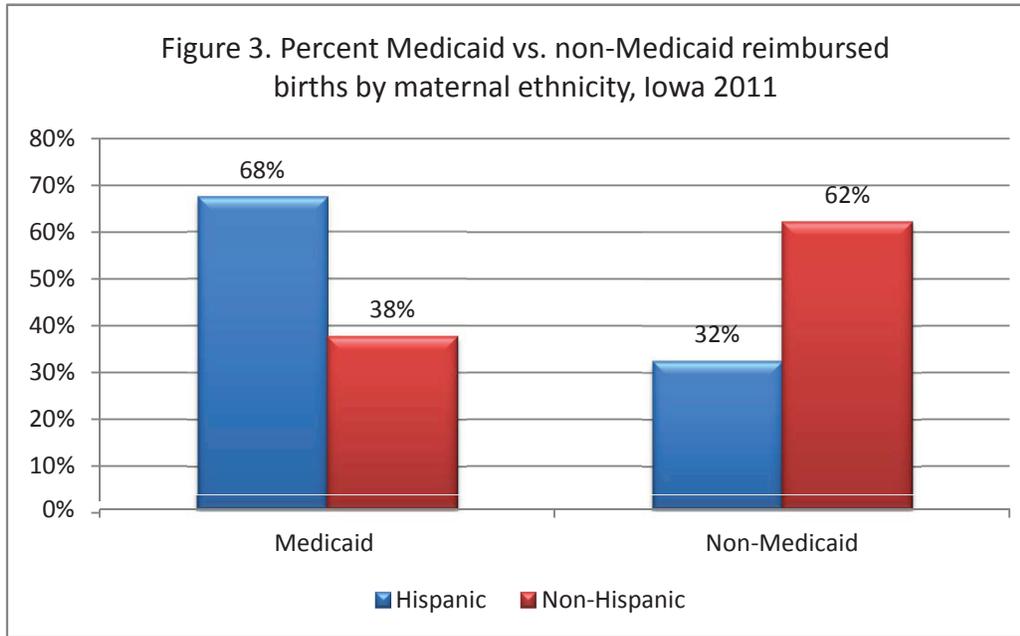
In 2011, among mothers aged 17 and younger, 74 percent (n=539) of births were reimbursed by Medicaid compared to 26 percent (n=191) of non-Medicaid recipients (Figure 1). Similarly, a greater percentage of births to women ages 18 to 19 were reimbursed by Medicaid (82%; n=1,620) compared to non-Medicaid reimbursed births (18%; n=356). A greater percentage of births to women ages 20 to 24 were reimbursed by Medicaid (67%; n=5,982) compared to non-Medicaid reimbursed births (33%; n=2,959).



The percent of births to Medicaid recipients ages 25 to 29 was 33 percent (n=4,223) compared to 67 percent (n=8,691) of births to non-Medicaid recipients. Among births to women ages 30 and older, 22 percent (n=2,992) were reimbursed by Medicaid. Seventy-eight percent (n=10,649) of births among women ages 30 and older were non-Medicaid reimbursed births.

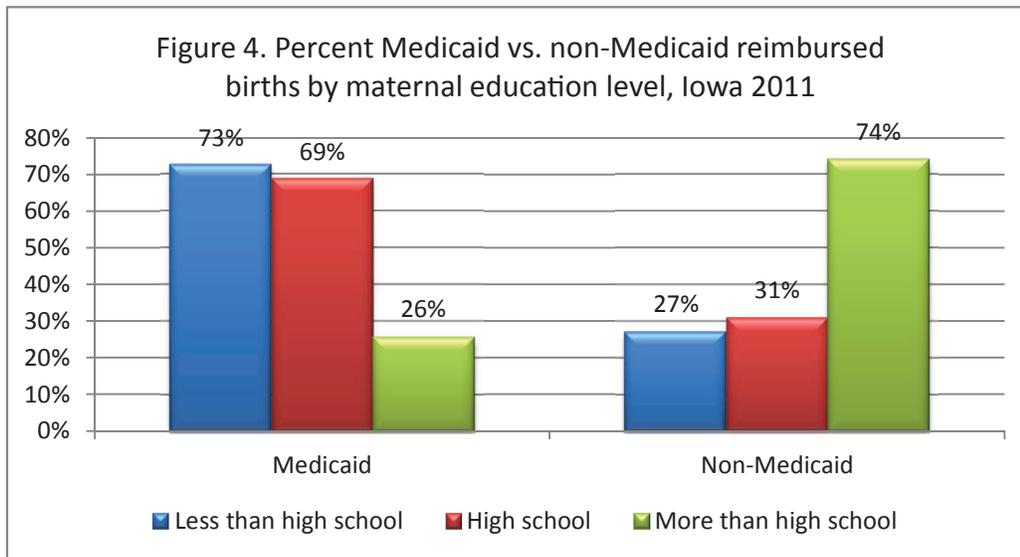


## Births by Maternal Ethnicity and Medicaid Status



In 2011, 68 percent (n=2,103) of births to Hispanic women were reimbursed by Medicaid compared to 32 percent (n=13,253) of births to non-Hispanic women (Figure 3).

## Births by Maternal Educational Level and Medicaid Status



In 2011, among women with less than a high school education, 73 percent (n=3,586) of births were reimbursed by Medicaid, compared to 27 percent (n=1,347) of births that were not reimbursed by Medicaid (Figure 4). Among women with a high school education, more than two-thirds (69%; n=5,093) of births were reimbursed by Medicaid. More than one-fourth (26%; n=6,670) of births to women with more than a high school education were reimbursed by Medicaid.

## Discussion

Compared to Medicaid reimbursed births in 2010, the 2011 data reiterate that Medicaid covered health services are crucial for low-income pregnant women. Forty percent of Iowa births in 2011 were reimbursed by Medicaid. Medicaid coverage remains an important service to young women, including those who are still in high school. On the other hand, it is interesting to note that in 2010, 80 percent of births to women ages 17 and younger were reimbursed by Medicaid. In 2011, this percentage decreased to 74 percent. Other percentages remained essentially unchanged. Medicaid coverage is a vital source of health care coverage for women of racial and ethnic minorities in Iowa.

---

## Program and Policy Implications

Programs that empower young women, particularly those who have not yet completed high school, to prevent pregnancy and complete their educational goals can reduce the proportion of births that are reimbursed by Medicaid. For example, by age 22, only about 50 percent of teen mothers obtain a high school diploma, compared to almost 90 percent of women who had not given birth during their adolescence.

A disproportionate number of births to women of racial and ethnic minorities were reimbursed by Medicaid in 2011 compared to white, Asian and Hispanic women in Iowa. Programs and policies that address income and health insurance disparities among racial and ethnic minorities in Iowa may also reduce the proportion of births that are reimbursed by Medicaid.

### ADDITIONAL INFORMATION

For additional information or to obtain copies of this fact sheet, write or call the Iowa Department of Public Health, Bureau of Family Health, at 321 E. 12th Street, Des Moines, IA 50309 or toll-free at 1-800-383-3826.

---

## What is the Iowa Medicaid – Birth Certificate Match Project?

The Iowa Medicaid – Birth Certificate Match project is supported by an inter-departmental agreement between the Iowa Department of Human Services and the Iowa Department of Public Health/Bureaus of Family Health and Health Statistics. The purpose of this project is to monitor and describe the characteristics of pregnant Medicaid recipients, their receipt of pregnancy related services, and their birth outcomes relative to women whose deliveries are not reimbursed by Medicaid. The resulting information can be used to improve programs and policies to benefit Medicaid recipients.

The Iowa Department of Public Health acknowledges the Maternal and Child Health Epidemiology Program, Applied Sciences Branch, Division of Reproductive Health, National Center for Chronic Disease Prevention and Public Health Promotion, Centers for Disease Control and Prevention for analytic support and preparation of this fact sheet.

---