# Revisiting birth-spacing as an outcome measure for Medicaid family planning waivers May 14, 2007 Conference Call

# Research on Participation in Waiver Services as Related to Birth to Conception Intervals SC Medicaid Family Planning Waiver

# **Research Question:**

• Do more regular participants in Medicaid family planning waiver services have more longer birth to conception intervals as compared to women who did not use waiver services as often? (Participants vs. enrollees)

### Methods:

- *Research Design* Retrospective, encompassing the time period from July 1994 to June 2003, the first ten years of the SC Medicaid Family Planning Waiver.
- *Data Sources* Medicaid claims data (for enrollment and participation information) linked to live birth certificate data (for birth to conception interval) as well as control variables.
- *Inclusion Criteria* Waiver enrollees who had given birth after at least 36 months of consecutive waiver enrollment, excluding women who gave birth within 36 months of their date of enrollment and women for whom this birth was a multiple birth (twins, etc.). Since the main variable of interest was waiver participation, and waiver participation was defined as the number of annual visits, a 36 month window of enrollment was chosen so that there would be variation among the number of annual visits received. The number of women who were enrolled in the waiver for at least 36 months prior to their first waiver birth was 22,317. Approximately 10% (n=2,268) of these women continued their enrollment in the waiver through a second birth.
- *Measures* Total family planning services via the Medicaid Family Planning Waiver was a continuous variable representing the number of annual family planning visits billed to Medicaid under the waiver in the 36 month period (minimum) before the birth plus the number of visits in the birth to conception interval. Birth to conception interval was defined as the period of time between the index birth and the next conception (related to the second birth in these data). Birth to conception interval was calculated in months by ORS using the date of birth of the second child, minus its gestational age. This variable was provided as a continuous variable.
- *Controlled for* the mother's race/ethnicity, age, education level, marital status, urban/rural residence, parity, and tobacco and alcohol use during pregnancy.
- Data Analysis Multiple linear regression

### **Results:**

- Controlling for covariates, greater total participation (before the first waiver birth and between the first and second waiver births) in family planning waiver services is associated with longer birth to conception intervals.
- Each additional MFPW visit translates into about 1.5 month greater birth to conception interval.
- Also found that overall participation in services was very low (70% never had a annual visit).

### **Conclusions:**

- Greater waiver participation seems to have an effect on lengthening the birth to conception interval.
- More outreach is needed to get women from enrollment to participation in services.

#### Limitations:

- Selection bias
- Study encompassed time where women did not have to re-enroll yearly
- Small numbers of women on waiver for an extended period of time
- Incomplete agency data (birth certificate)