



COMMONWEALTH of VIRGINIA

Executive Department

EXECUTIVE DIRECTIVE ELEVEN (2024)

SUPPORTING HEALTHIER PREGNANT WOMEN, MOTHERS, AND INFANTS BY REPORTING ACTIONABLE DATA ON MATERNAL MORTALITY

By virtue of the authority vested in me as Governor of the Commonwealth of Virginia, I hereby direct the Virginia Department of Health to enhance the Maternal and Child Health Data Dashboard to include actionable data on pregnancy-associated and pregnancy-related mortality and causes, and to establish a centralized maternal health website to provide families with essential resources in one accessible location.

Importance of the Initiative

To be the best place to live, work, and raise a family, Virginia must focus on supporting healthy babies, and ensuring mothers have the resources they need during pregnancy, during birth, and postpartum.

In 2021, there were 64 pregnancy-associated deaths in Virginia, and while that number represents a decrease from 82 in 2020, every single maternal death is an incredible tragedy. The pregnancy-associated death rate declined from 86.6 per 100,000 live births in 2020 to 66.9 per 100,000 in 2021. Over 80 percent of pregnancy-related deaths in Virginia are medically preventable. The leading causes include cardiac conditions, mental health challenges, and substance use. By leveraging solutions, these newly announced initiatives and investments build on the Administration's continued efforts to ensure Virginia has *Healthy Moms, Healthy Families, and Healthy Communities*.

Our Administration has made improving the health of our mothers and our babies a top priority. Virginia must reduce maternal mortality and promote the health of mothers and babies by leading a unified, statewide effort to eliminate confusion, streamline maternal health initiatives, and maximize the impact of every dollar invested.

Maternal health is a main pillar of our *Partnership for Petersburg* efforts, as well as across the Commonwealth. In the City of Petersburg, we have worked specifically with providers, from Medicaid managed care organizations to non-profit organizations such as Urban Baby Beginnings, to ensure women and their families are connected to care. Examples include expanded clinic hours, like Saturday OB-GYN hours at Bon Secours Southside Medical Center, and communications campaigns like the "Ask about Aspirin" initiative, which encourages

providers and patients to discuss low-dose aspirin as a preventive measure for preeclampsia, a leading cause of maternal mortality.

Our Unwavering Commitment to this Effort Has Produced Results:

Nearly \$500 million is currently spent annually to support maternal health services in the Commonwealth:

- Medicaid pays for one out of every three births in Virginia. In 2024, the Department of Medical Assistance Services (DMAS) spent more than \$300 million on medical services for pregnant women including prenatal care and labor and delivery.
- The Virginia Department of Health (VDH) spends \$170 million on programs providing all-around support to women before, during, and after childbirth as well as continued infant care. VDH continues to support healthy mothers and babies to develop lifelong healthy habits and combat food insecurity. Local health departments provide home visiting for pregnant women and new mothers through the Maternal Infant, and Early Childhood Home Visiting (MEICHV) Program.
- The Department of Behavioral Health and Developmental Services (DBHDS) spent \$9 million in FY 2024 through Project Link to reduce barriers to accessing services needed by pregnant women impacted by substance use disorders or mental health disorders and Permanent Supportive Housing to provide stable housing for moms with complex behavioral health, medical, and social needs. DBHDS will utilize \$4 million of FY 2025 appropriations to expand the Virginia Mental Health Access Program improving access to mental and emotional health services to pregnant and postpartum moms.

Increased Postpartum Visits for Medicaid Members

- Postpartum OB-GYN visits for Medicaid members in Petersburg increased almost 20 percent.
- Increased access to OB-GYN services by introducing quarterly Saturday OB-GYN clinic hours at Bon Secours Southside Medical Center for Medicaid members in Petersburg.
- INOVA Health Center also announced extended hours across the health system to increase access to expecting mothers.
- Medicaid and FAMIS MOMS members now receive guaranteed health coverage for 12 months following pregnancy. This expanded coverage enables new parents to receive critical postpartum care, an important step to improving health outcomes for mothers and babies.

Expanded Access to Doula Services

- As of October 2024, 191 doulas received state certification by VDH and there are 147 Medicaid-enrolled doulas, achieving 259 doula-supported births for Medicaid members and supporting 349 families that received doula services covered by Virginia Medicaid.
- The Department of Medical Assistance Services (DMAS) partnered with Germana Community College, Mary Washington Hospital, Rappahannock Health District, and

VDH to create a doula training program. The first cohort reached the full capacity of 12 students and additional interested students are placed on a waitlist for future semesters.

Improved Maternal Health Data and Best Practices

- Issued Executive Order 32 to reestablish the Task Force on Maternal Health Data & Quality Measures to evaluate the quality of care and barriers that prevent the collection and reporting of timely maternal health data.
- Enhanced rural maternal health technical assistance, winning national recognition.

Maternal mortality rates are uneven across Virginia. Rural areas face critical disparities in maternal health outcomes, with limited access to care and maternity deserts that jeopardize the health and safety of mothers and babies. Maternal mortality rates for non-Hispanic Black women in Virginia are more than double those of non-Hispanic White women, underscoring the urgent need for clear data to target action.

Scaling this approach while maintaining our community focus fortifies maternal healthcare systems to empower mothers with the resources, information, and care they need to ensure the best outcomes for themselves and their babies.

To do that, we need to take our collection and publication of actionable data about maternal mortality to the next level. The Virginia Department of Health's initial unverified internal data is showing positive trends and that our comprehensive effort has been making some progress. What is clear is that we need better data, reported by our state and local health departments and our managed care organizations to better guide our future efforts.

Prior to legislation patroned by former Senator Siobhan Dunnivant, MD, an OB-GYN and expert in maternal health, data was only reported every three years, not annually. This means that today, as we are trying to make decisions, we are using information that is three years old, from 2021. Furthermore, the data collected and publicly reported has been too high level, without enough detail to help health officials at all levels of government take action to support the health of mothers and babies.

On June 26, 2024, I issued Executive Order 32, *Reestablishing the Task Force on Maternal Health Data and Quality Measures*, in order to collect and evaluate maternal health data and better inform policies in the Commonwealth. In addition to analyzing the data to determine the need for additional benefits to protect women's health, the Task Force examines quality of care and the barriers that prevent the collection and reporting of timely maternal health data, especially in underserved communities.

Today's Executive Directive is a key initial recommendation of the Task Force's work. Accelerating and strengthening the collection and publication of data is vital to continue our work to produce results for all of Virginia's mothers and babies.

Directive

Accordingly, pursuant to the power vested in me as the Chief Executive Officer of the Commonwealth, and pursuant to Article V of the Constitution and laws of Virginia, I hereby direct the State Health Commissioner and the Virginia Department of Health, in consultation with the Secretary of Health and Human Resources, to do the following:

I. Improve the Publication of Actionable Data on Maternal Health

- a. Ensure the Department of Health's Maternal and Child Health Data Dashboard includes pregnancy-associated and pregnancy-related mortality as well as maternal mortality and cause data, including relevant regional and population demographic information.
- b. Collect, analyze, and publicly share robust maternal health data to drive policy decisions, pinpoint disparities, and measure progress.
- c. Make regular updates to the VDH website and ensure data remains current, transparent, and actionable for policymakers, healthcare providers, and families.

II. Develop a Comprehensive Maternal Health Resource Website

- a. Create a centralized maternal health website to provide mothers with essential resources in one accessible location, including information on public and private agencies providing family resources and other parent resource centers.
- b. Centralize existing state resources and consolidate maternal and child health information currently spread across various state agencies, including:
 - i. VDH programs such as WIC, home visiting, Resource Mothers, and pregnancy-related resources (*e.g.*, breastfeeding and infant health).
 - ii. Adoption information from the Department of Social Services.
 - iii. Tax credit information from the Department of Social Services.
 - iv. Childcare assistance from the Department of Education.
- c. Partner with existing platforms to enhance the directory of maternal health resources and ensure comprehensive service referrals for prenatal, pregnancy, and postpartum care.
- d. Ensure the website includes a comprehensive list with descriptions of services offered by public and private agencies, including adoption agencies and faith-based organizations, and other services available to assist a woman throughout her pregnancy, upon childbirth, and while the child is dependent.

Effective Date

This Executive Directive shall be effective upon its signing and shall remain in force and effect unless amended or rescinded by further executive order or directive. Given under my hand and under the Seal of the Commonwealth of Virginia this 17th day of December 2024.



Glenn Youngkin
Glenn Youngkin, Governor

Attest:

Kelly Gee

Kelly Gee, Secretary of the Commonwealth