

How Strong Start is Leveraging Public-Private Partnerships to Reduce Early Elective Deliveries

For decades, organizations like the American College of Obstetricians and Gynecologists (ACOG) and the March of Dimes have been promoting the importance of full-term pregnancies—those naturally reaching at least 39 weeks gestation—yet early elective deliveries still account for 10-15 percent of all deliveries.

In February 2012, the U.S. Department of Health and Human Services (HHS) introduced the [Strong Start](#) initiative to reduce early elective deliveries and improve outcomes for newborns and pregnant women. “Strong Start” builds on the work of ACOG, March of Dimes and others, and brings together the Federal government, state, and local government agencies, as well as the private sector.

Numerous studies show early elective deliveries are associated with increased maternal and neonatal complications for both mothers and newborns, compared to deliveries occurring beyond 39 weeks and women who go into labor on their own.

Decreasing the rate of these early elective deliveries means:

- More mothers get safe, evidence-based care.
- Infants improve their chances for good physical and developmental health.
- Lower costs for public and private payers because they’re performing less caesarian sections for failed inductions, they have less neonatal intensive care unit admissions, and less associated complications for the newborns.

The [Centers for Medicare & Medicaid Services](#)’ (CMS) [Innovation Center](#)—in partnership with the [Center for Medicaid and CHIP Services](#)—supports this effort to improve birth outcomes.

“Strong Start” is made of 2 separate, but related, programs:

- A nationwide public-private partnership and awareness campaign to spread the adoption of best practices that can reduce the rate of [early elective deliveries](#) for all populations.
- A funding opportunity for providers, states and other applicants to test the effectiveness of [enhanced prenatal care approaches to reduce pre-term births](#) in women covered by Medicaid.

CMS is taking on 3 major activities as part of the “Strong Start” campaign:

1. Promoting Awareness—CMS will support broad-based awareness efforts in partnership with leading organizations, including the March of Dimes and ACOG, as well as other professional and advocacy organizations. These efforts will target pregnant women, their families, their health providers, and organizations that serve pregnant women.
2. Spreading Best Practices—to help speed and spread the adoption of best practices that reduce early elective deliveries, CMS will build on the efforts and infrastructure of HHS’ [Partnership for Patients](#), and the commitment of the nearly 4,000 participating

institutions. The campaign will work with the Partnership for Patients' 26 Hospital Engagement Networks to make measurable goals for participating hospitals, and to give technical assistance in testing strategies and putting them into place. The existing Partnership for Patients infrastructure will also support efforts to collect data, measure success and promote quality improvement.

3. Promoting Transparency—CMS will support efforts to collect performance data and measure success and continuous improvement.

Visit: <http://innovation.cms.gov/initiatives/Strong-Start> to learn more about “Strong Start” and to access additional resources in the online e-toolkit.

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