

ALL ABOUT...

Healthy Start

What It Is...

Started in 1985, Healthy Start is a major infant health initiative which promotes early, comprehensive and continuous prenatal care for low-income, uninsured pregnant women. The aim of the program is to improve the health of newborns by reducing the incidence of low birth-weight babies and infant mortality.

In 2003, Healthy Start became a new category of MassHealth as part of the state's Children's Health Insurance Program (CHIP). With this new designation, Massachusetts receives 65% federal reimbursement for all costs incurred. Pregnant women are eligible for Healthy Start if they are Massachusetts residents and have incomes at or below 200% Federal Poverty Level.

What It Covers...

Healthy Start provides coverage for a range of health services to pregnant and postpartum women including: pregnancy-related primary and specialty care; prescriptions, pregnancy-related radiology and laboratory services, amniocentesis, postpartum home nursing visits, family planning, and more (*see reverse for a full listing*).

Why It's Important...

- ❖ Women who have no prenatal care are nearly four times as likely to deliver low birth-weight infants and over seven times as likely to deliver premature infants as compared to women with adequate prenatal care.¹
- ❖ Every normal birth that occurs instead of a low birth-weight birth saves approximately \$59,700 in the first year of medical expenses alone.²
- ❖ For every dollar cut from prenatal care, it is estimated that the cost of postnatal care will increase by \$3.33 and incremental long-term cost will increase by \$4.63.³ In other words, every dollar spent towards Healthy Start saves the Commonwealth nearly \$8 in the future.
- ❖ Women who receive no prenatal care have a higher risk of death from preeclampsia and eclampsia than women who have received any level of prenatal care.⁴

¹ "Elimination of Public Funding for Prenatal Care for Undocumented Immigrants in California: A Cost/Benefit Analysis" *American Journal of Obstetrics and Gynecology*. January 2000. p.233-239.

² "Cost-effectiveness of Care for Very Low Birth Weight Infants" *Pediatrics*. July 1998. p. 35-43.

³ Elimination of Public Funding of Prenatal Care... *American Journal of Obstetrics and Gynecology*. January 2000

⁴ "Pregnancy-Related Mortality from Preeclampsia and Eclampsia" *Obstetrics and Gynecology*. April 2001. p.533-538.

Services Covered by Healthy Start

- ✧ Pregnancy related primary and specialty care
- ✧ Outpatient mental health up to 10 visits per benefit year
- ✧ Prescriptions
- ✧ Office based emergency oral health (i.e., trauma related)
- ✧ Pregnancy related radiology and laboratory services
- ✧ Amniocentesis
- ✧ Prescribed durable medical equipment up to \$300 per benefit year
- ✧ Home nursing postpartum visits:
 - 2 for normal pregnancy related care
 - 5 for pregnancy complications and C-section
- ✧ Emergency ambulance transfer for management of pregnancy (*referred by physician or nurse midwife*)
- ✧ Family planning postpartum

Services Not Covered by Healthy Start

- ✧ Non-pregnancy related services
- ✧ Hospital inpatient facility charges
- ✧ Emergency room treatment
- ✧ Home birth
- ✧ Elective abortion
- ✧ Reversal of tubal ligation
- ✧ Transportation to prenatal care
- ✧ Transportation to the hospital for labor and/or delivery
- ✧ Chiropractic services
- ✧ Routine oral health
- ✧ Physical therapy
- ✧ Cosmetic or comfort care/items
- ✧ Newborn care

