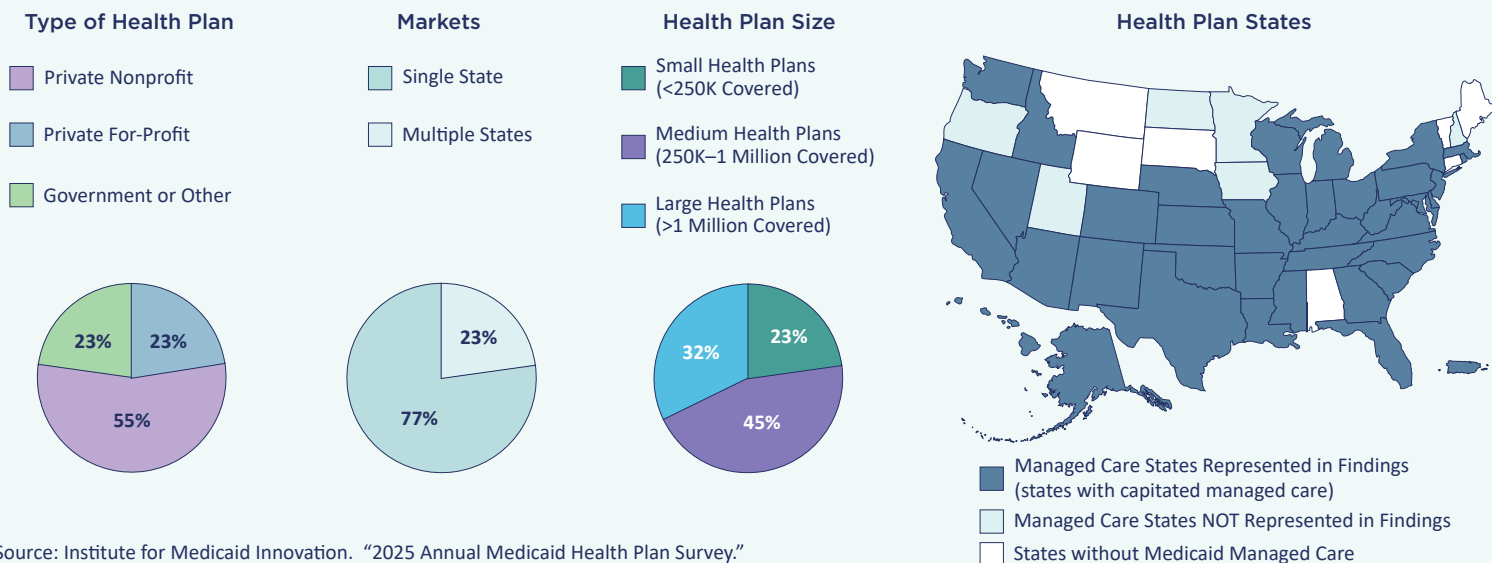




Annual Medicaid Managed Care Organization Survey Maternal and Perinatal Health

Demographics

In its eighth year, the 2025 survey findings represent health plan data from almost every state with Medicaid managed care. The annual survey collected information at the parent company and corporate levels and is intended to equip Medicaid stakeholders with the information needed to accurately articulate the national narrative about Medicaid managed care. The survey respondents are representative of the national demographics of all Medicaid health plans.



Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Type of Contracted Primary Care Providers for Maternal and Perinatal Health

Certified Nurse Midwife (CNM)

Advanced practice nurse with either a university-based master's or doctoral degree. Certified nurse midwives are trained in education programs that are accredited by the Accreditation Commission for Midwifery Education.

Certified Professional Midwife

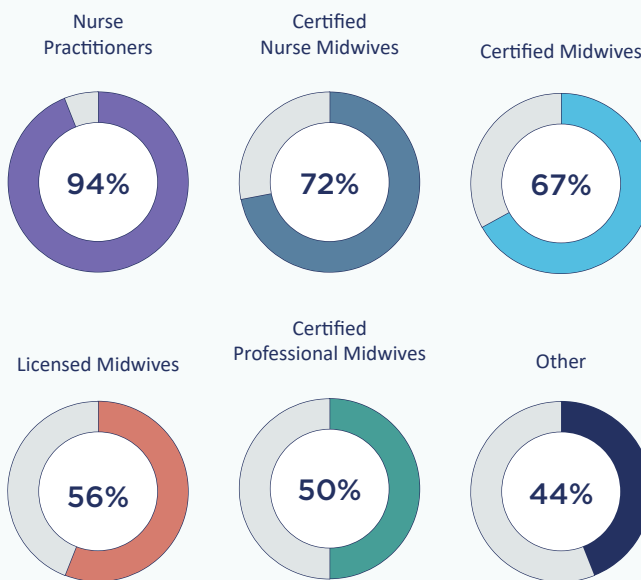
An individual who has varying educational and/or training experiences that might include work as an apprentice.

Certified Midwife

Graduate from a masters-level midwifery education program that is also accredited by the Accreditation Commission for Midwifery Education. The training is similar to that of a certified nurse midwife, but they do not have a nursing degree.

Licensed Midwife

An individual who has been issued a license to practice midwifery by a licensing board in the state where they practice. This is a legal designation conferring certain rights, restrictions, and legal status as a practitioner and is not the same as certification or credentialing by a midwifery education or accreditation board.



Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes physician assistants, doulas, obstetricians and gynecologists, and perinatologists. No health plans selected "None of the above."



73%

of responding Medicaid health plans are responsible for managing maternal and perinatal health benefits.

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Note: Health plans that are not at risk for maternal health did not respond to questions in this section of the 2025 Annual Medicaid Health Plan Survey.

Medicaid Health Plans' Contracted Settings to Provide Members with Sexual and Reproductive Health Care, Including Pregnancy, Childbirth, and the Postpartum Period

	Small Health Plans	Medium Health Plans	Large Health Plans	All Health Plans
Federally Qualified Health Centers	100%	100%	83%	94%
Freestanding family planning providers	100%	62%	83%	78%
Freestanding birth centers	50%	62%	83%	67%
Telehealth platforms	75%	62%	67%	67%
Other	0%	0%	17%	5%

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: No specifics were shared for "Other." No health plans selected "None."


94%

of Medicaid health plans have a way to identify pregnant members during the first trimester.

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Ways Medicaid Health Plans Identify Pregnant Members

Electronic health record, claims data, laboratory results, encounter data, or provider information (e.g., Obstetric Needs Assessment Form)



Members self-identify through case managers or member services



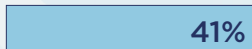
Enrollment data received from state



Health information exchange

















Other



Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes provider referrals for care management and care coordination, Maternal Prenatal Risk Assessment, Adjusted Clinical Groups algorithm, and emergency notification service.

Medicaid Health Plans' Covered Ancillary Benefits for Pregnant Members

94%	Support from a community health worker	
94%	Support from a social worker and/or nurse case manager	
89%	Nutritional counseling	
83%	Breastfeeding or chestfeeding education	
83%	Childbirth education	
83%	Lactation counseling (e.g., postpartum services provided by a lactation consultant)	
83%	Support from a doula	
67%	Group prenatal care (e.g., CenteringPregnancy)	
67%	Physical therapy	
67%	Services through telehealth**	
61%	Comprehensive dental care	
61%	Parenting education	
33%	Acupuncture	
22%	Other	

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: No specifics were shared for "Other." No health plans selected "None."

** Services through telehealth include video visits with case managers and obstetrician visits.

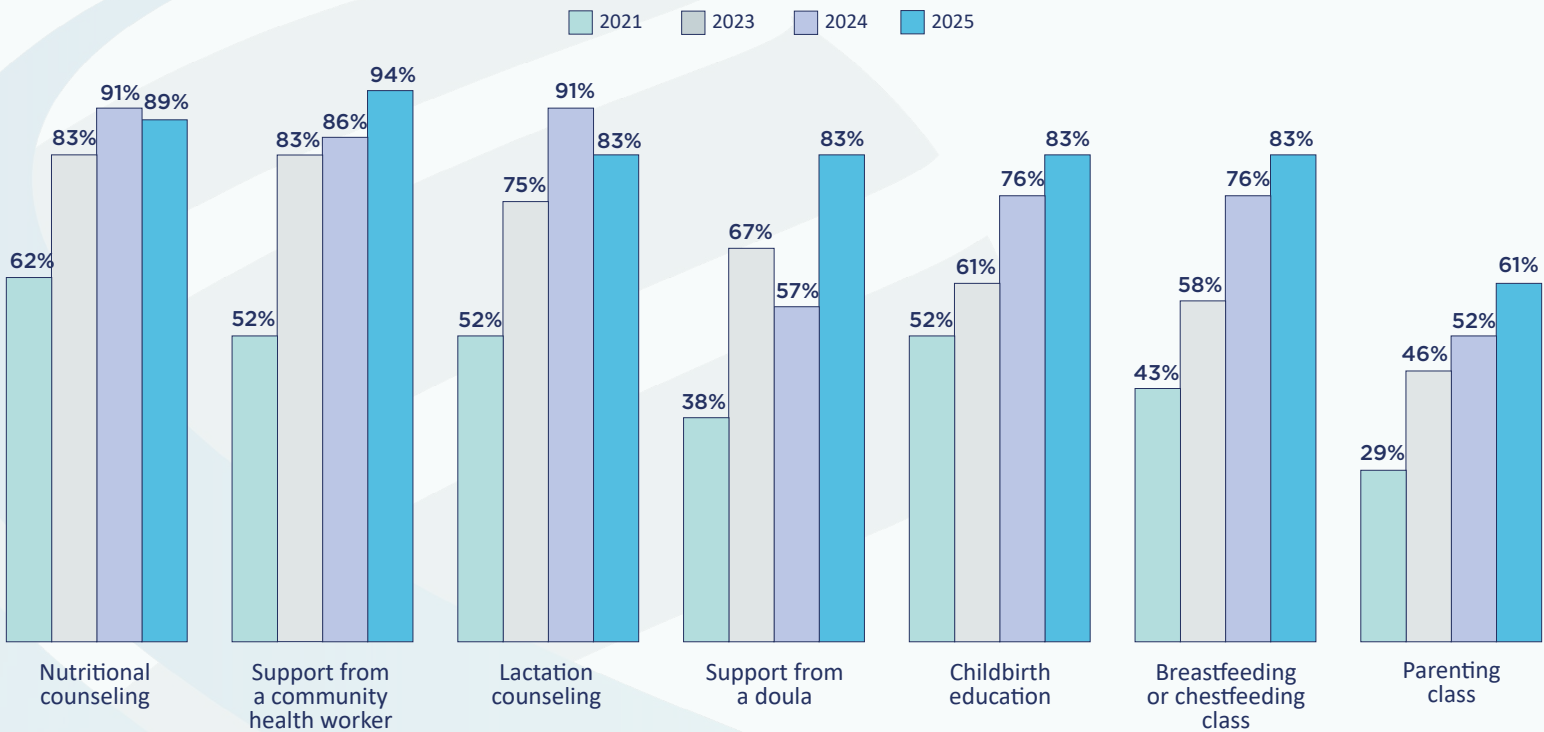
Provider Types for Which Increased Medicaid Reimbursement Rates Would Assist Health Plans in Addressing Sexual and Reproductive Health Needs

	Small Health Plans	Medium Health Plans	Large Health Plans	All Health Plans
Certified professional midwives	75%	75%	50%	67%
Certified midwives	50%	75%	67%	46%
Licensed midwives	75%	75%	50%	67%
Certified nurse midwives	75%	75%	67%	72%
Doulas	25%	88%	67%	67%
Freestanding birth centers	50%	88%	83%	78%
Perinatal community health workers	50%	88%	83%	78%
Community health workers	75%	88%	50%	72%
Perinatal nutritionist	50%	75%	67%	67%
Behavioral health providers	75%	75%	67%	72%
None	25%	0%	0%	6%
Other	25%	12%	33%	22%

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes lactation consultants.

Year to Year Comparison of Medicaid Health Plans' Covered Benefits for Pregnant Individuals



Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Note: 2022 data is not available as the survey was changed from retrospective to current in 2023.

How State Medicaid Agencies Could Assist Medicaid Health Plans in Addressing the Sexual and Reproductive Health Needs of Members

Improve data sharing between the state and managed care organizations	84%	Increase resources to support facilitation of partnerships	68%
Establish equitable and sustainable payment levels for births in freestanding birth centers	79%	Establish sustainable payment levels for perinatal physicians	63%
Establish sustainable payment levels for behavioral health providers	79%	Facilitate contracting with community-based organizations	63%
Improve quality of data sharing between the state and managed care organizations	79%	Improve data sharing between managed care organizations and provider groups	63%
Improve data sharing between government agencies (e.g., Child Welfare System, Justice System) and managed care organizations	74%	Remove regulatory burdens and obstacles for freestanding birth centers	63%
Improve data sharing between managed care organizations and community-based organizations	74%	Streamline provider enrollment and credentialing processes	58%
Remove regulatory burdens and obstacles for midwives to practice at the top of their license	74%	Remove coverage restrictions for reproductive health care	47%
Establish equitable and sustainable payment levels for doulas	68%	Remove regulatory burdens and obstacles for home births	42%
Establish equitable and sustainable payment levels for midwives	68%	Other	11%

Source: Institute for Medicaid Innovation. "2025 Annual Medicaid Health Plan Survey."

Notes: **Other** includes residential substance use disorder treatment for pregnant women. No health plans selected "States cannot provide further assistance."