



A Member's Maternity Journey

From Pregnancy through Postpartum



Maria's Journey with ProgenyHealth

Learn how Maria engaged with ProgenyHealth to manage her high-risk pregnancy – starting with ProgenyHealth's pregnancy app, moving into close monitoring by our Case Managers, and finally receiving 12 months of postpartum support for her complex SDoH issues.



Member Engagement

Maria engages through ProgenyHealth's pregnancy app

Identifying Risk

ProgenyHealth evaluates Maria's risk & determines recommended action steps

Care Plan

ProgenyHealth creates & reviews a care plan for Maria

Social Determinants of Health (SDoH) Challenges

ProgenyHealth helps to solve Maria's medical needs complicated by life challenges

Premature Delivery & NICU Admission

Maria is prepared for her baby's premature delivery & NICU admission

NICU Follow-up through Discharge

ProgenyHealth supports Maria during her NICU stay & prepares her for discharge

Postpartum Support

Maria receives critical support from ProgenyHealth during the postpartum stage

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Maria engages with ProgenyHealth through the pregnancy app

Maria and her husband find out she is pregnant again. They feel anxious and overwhelmed because her last pregnancy and delivery were complicated.

Maria discovers a ProgenyHealth app on her health plan's website that can guide her journey. She enters basic demographics and begins exploring topics related to her medical and pregnancy history.

ProgenyHealth receives a referral that identifies Maria as a high-risk pregnancy. ProgenyHealth's case management team notes the health topics that Maria has read. This prompts an outreach with Maria's initial assessment in hand.

Ensuring Access

Some members don't have access to mobile apps or telehealth services. ProgenyHealth also offers telephonic support and translation services to help drive engagement.



The ProgenyHealth Case Manager contacts Maria to review her health and pregnancy history and establish a risk level.

Maria reported her first pregnancy as uncomplicated, with a vaginal delivery of a full-term baby boy. During her second pregnancy, she was found to have extremely high blood pressure with elevated liver enzyme levels and low platelets at 36 weeks.

She was admitted and delivered by emergency C-section under general anesthesia. Her five-pound baby girl required two days in the NICU. Maria required a week in the ICU while her levels normalized and did not receive lactation support.

Maria has not established prenatal care with a provider, partly from her denial of the unexpected pregnancy and being new to the area.

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ProgenyHealth evaluates Maria's risk and determines recommended action steps



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ProgenyHealth creates & reviews a care plan for Maria

Since Maria lives in a maternity care “desert,” the ProgenyHealth Case Manager seeks the closest facility that can manage a high-risk pregnancy based on her history. The Case Manager contacts a satellite clinic just 20 minutes from Maria’s house where high-risk specialists can see Maria weekly.

The Case Manager provides preeclampsia education and sets up DME coverage for a blood pressure cuff. She teaches Maria how to use the cuff and upload her readings for provider review.

Maria attends an initial visit at the satellite clinic. Maria is estimated to be thirteen weeks pregnant and begins aspirin therapy for preeclampsia.

Addressing Maternity Care Challenges

Today’s growing healthcare costs, court decisions, and shrinking care options in rural areas are decreasing access to maternal healthcare — creating maternity care “deserts.”



Maria needs periodic 3D ultrasounds 90 minutes from home, but she and her husband only have one car. The Case Manager explores her transportation benefits and finds a solution.

Maria needs blood pressure medicine as prescribed by her provider. The Case Manager learns that this out-of-pocket expense is straining the family's finances.

Her Case Manager communicates with Maria's doctor, explores equivalent medications, and arranges for an adjusted prescription that Maria's plan would cover.

Maria's provider feels her sodium intake is impacting her blood pressure. The Case Manager discovers that Maria is eating inexpensive, high-sodium, canned soups and stews and educates Maria on the nutritional listing of sodium levels. The conversation alerts the Case Manager of Maria's food insecurity issues.

Maria's husband's reduced working hours force the family to seek cheaper groceries. The Case Manager connects Maria with WIC services plus several local food pantries.

Finally, the Case Manager schedules a consultation with ProgenyHealth's Lactation Consultant to develop a breastfeeding plan should her baby be born prematurely and require a NICU admission or separation from mom. Together, they obtain a breast pump to ensure Maria has the equipment needed prior to delivery.



ProgenyHealth helps to solve Maria's medical needs complicated by life challenges



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Maria is prepared for her baby's premature delivery & NICU admission

Maria's provider applauds Maria's efforts to manage her pregnancy closely. The provider schedules Maria's delivery at 34 weeks due to worsening blood pressure levels and slightly elevated liver enzymes. By closely monitoring Maria's health condition, SDoH needs, and medications, ProgenyHealth and the provider worked together to intervene before her case became emergent.

Several days before the baby's birth, ProgenyHealth's NICU Case Manager and Maternity Case Manager consult about Maria's premature delivery. The NICU Case Manager reaches out to Maria to explain what to expect after delivering a 34-week infant and helps facilitate Maria's plan to breastfeed exclusively.

Delivering Better Outcomes

ProgenyHealth ensures appropriate lengths of stay and levels of care should a NICU event occur — ultimately reducing inpatient costs, physician fees, emergency department visits, and readmissions.



The NICU Case Manager remains in close contact with the NICU team where Maria delivered. Even though some oxygen was required, Maria's baby is progressing well and is nearly ready for discharge.

Maria is pumping and feeding as well as latching for feedings. The baby requires additional specialty formula for weight gain.

The NICU Case Manager helps to schedule a pediatrician appointment for the baby and arranges for specialty formula with WIC to ensure the feeding plan continues at home.

The Maternity Case Manager performs several postpartum depression screens and determines Maria may be at risk for depression and anxiety.

The Maternity Case Manager arranges virtual visits with a therapist who specializes in postpartum care. The Case Manager and Maria schedule a follow-up appointment with her OB to discuss behavioral health concerns, perform a postpartum exam, and discuss birth control options.

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ProgenyHealth supports Maria during the NICU stay & prepares her for discharge





Maria receives critical support from ProgenyHealth during the postpartum stage

The Maternity Case Manager assists Maria with ongoing transportation for her medical appointments over the next several months. She also checks in on Maria's behavioral health and assesses for improvements.

Throughout the baby's first year of life, the NICU Case Manager monitors developmental milestones and continues to support Maria's breastfeeding plan. She also helps Maria stay on track with pediatrician visits and the baby's scheduled immunizations.

Ongoing Support

ProgenyHealth serves women, infants, caregivers, and families through the milestones of maternal health — from conception and pregnancy to postpartum and parenting.



ProgenyHealth – Providing for a lifetime of improved health and well-being for moms, babies, caregivers, and families

ProgenyHealth empowers our health plan and employer partners to change the trajectory of maternal and infant health outcomes across America. Informed by more than 20 years of experience and patient data, our end-to-end maternal and infant care management solution helps ensure the best possible outcomes for every expecting mother we touch. Our wholly integrated solution builds a network of support for an uninterrupted continuum of care from prenatal health, through any resultant NICU stay, and all the way to one full year of life.

From the very beginning, we unite early health risk assessment data with self-directed digital tools and dedicated Case Managers who work tirelessly to connect at-risk moms-to-be with the resources, care, and support they need for a healthy, full-term delivery. By promoting predictable, equitable, and standardized high quality care journeys, we ensure healthier outcomes—and lower costs—across your entire at-risk population. In so doing, we help overcome systemic barriers to support healthier pregnancies and healthier starts to life for all moms and babies, one family at a time.

Learn more how ProgenyHealth can create a seamless maternal experience for your members:



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