

Introduction

Primary care (PC) transitions are critical for the management of Gestational Diabetes (GDM) and Hypertension (HDP) to reduce the long-term risk of developing type-2 diabetes, hypertension, and CVD.

Our study Medicaid Claims data to examine the extent to which postpartum mothers with GDM and HDP transition to PC within 12 months of childbirth.

Methodology

South Carolina



14,273
postpartum
mothers

- Enrolled in Medicaid
- Women above 20 years
- Live birth in the year 2017 & 2018

1,427 (10.02%) GDM
2,146 (15.05%) HDP
514 (3.60%) Both (GDM & HDP)

A cross-sectional study in women receiving postpartum services within 12 months. Primary care visits was the outcome variable of interest.

Study Variables

- Primary care visits was the outcome variable of interest. Any women with at least one primary care visit (Family/General Practice Physician visit) claim in the 12 months following birth were considered as a primary care transition.
- GDM, HDP, and both (GDM & HDP) were the primary independent variables of interest.

Results

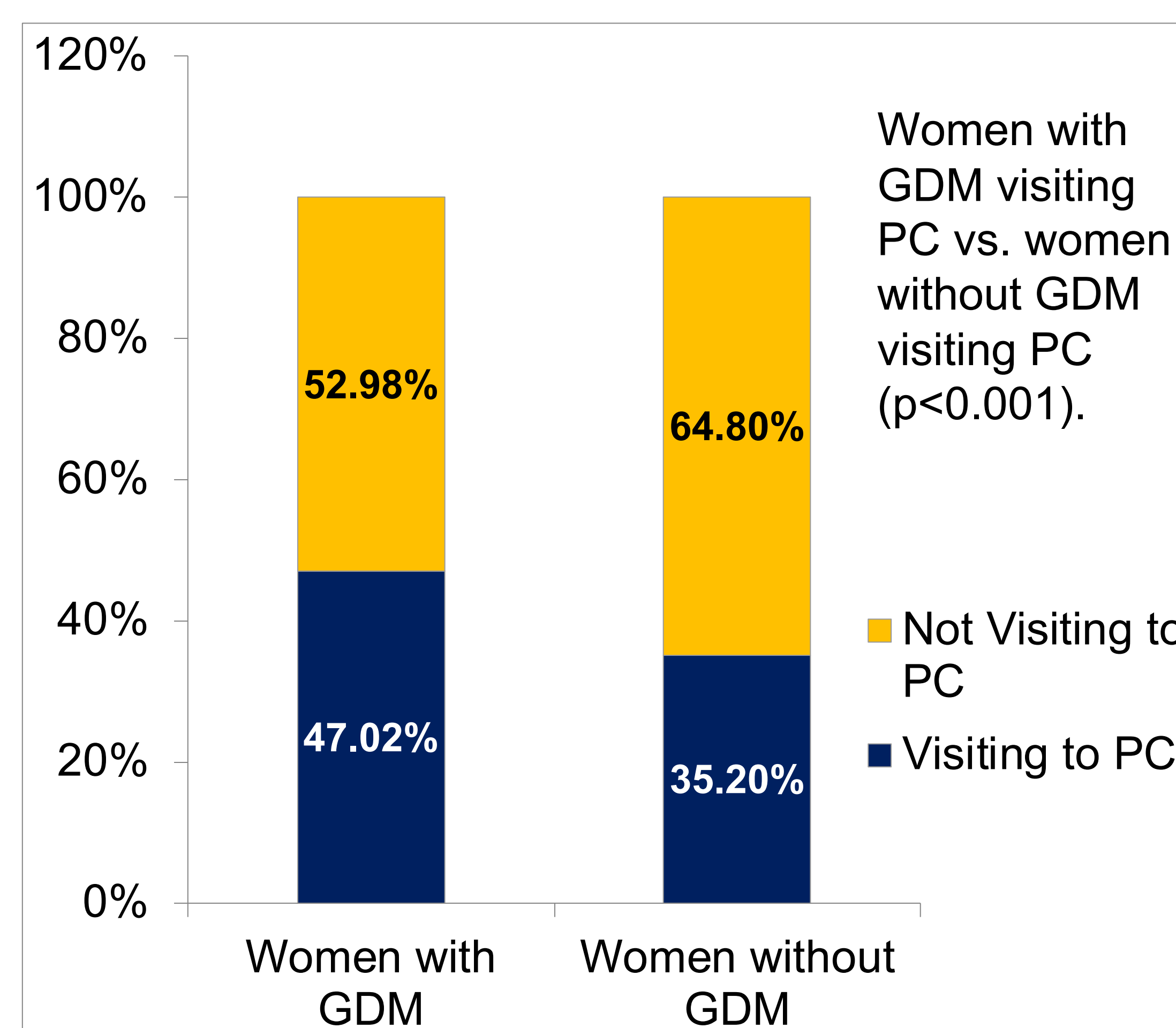


Fig: Primary Care Visits by the women with GDM vs. women without GDM

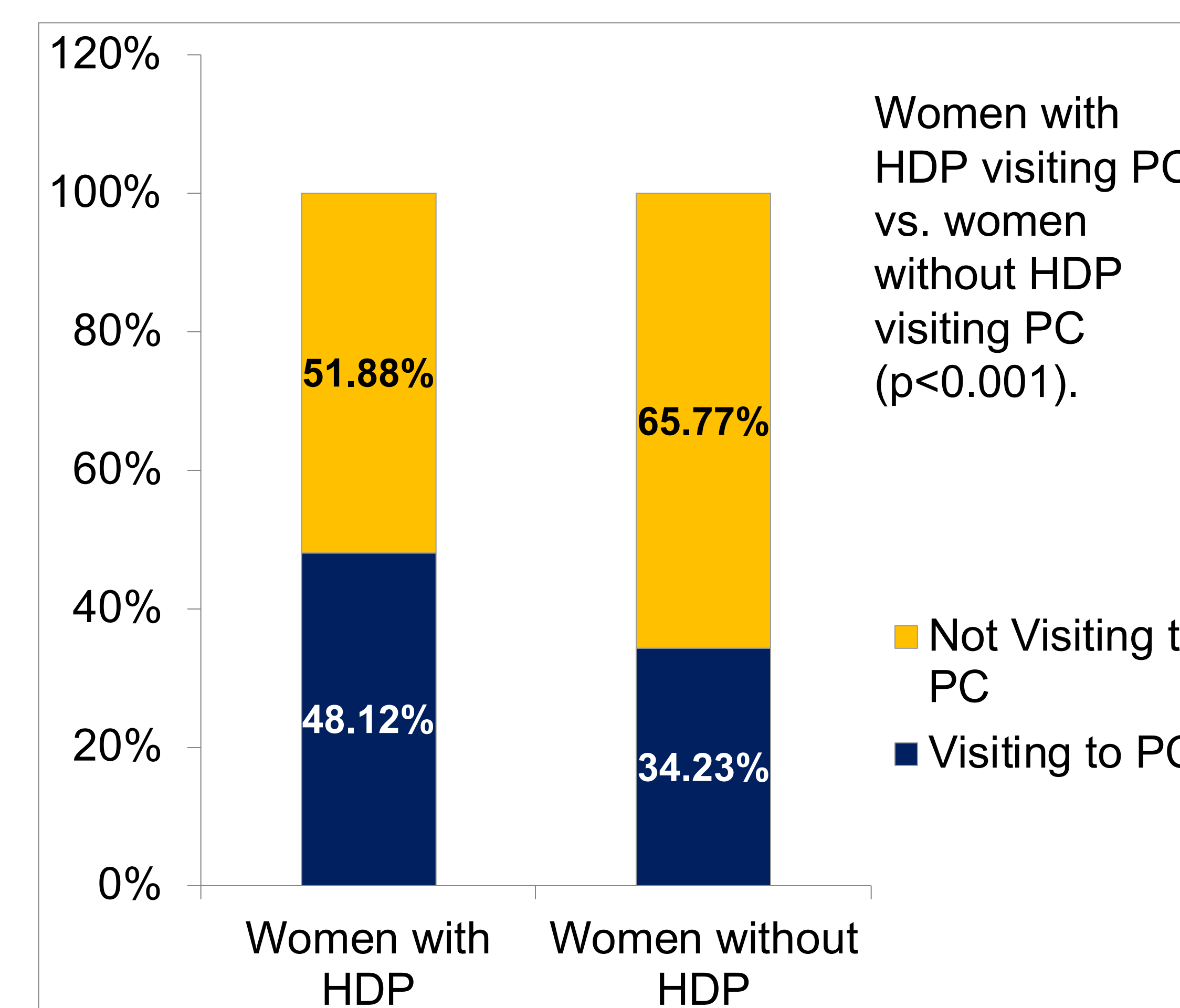


Fig: Primary Care Visits by the women with HDP vs. women without HDP

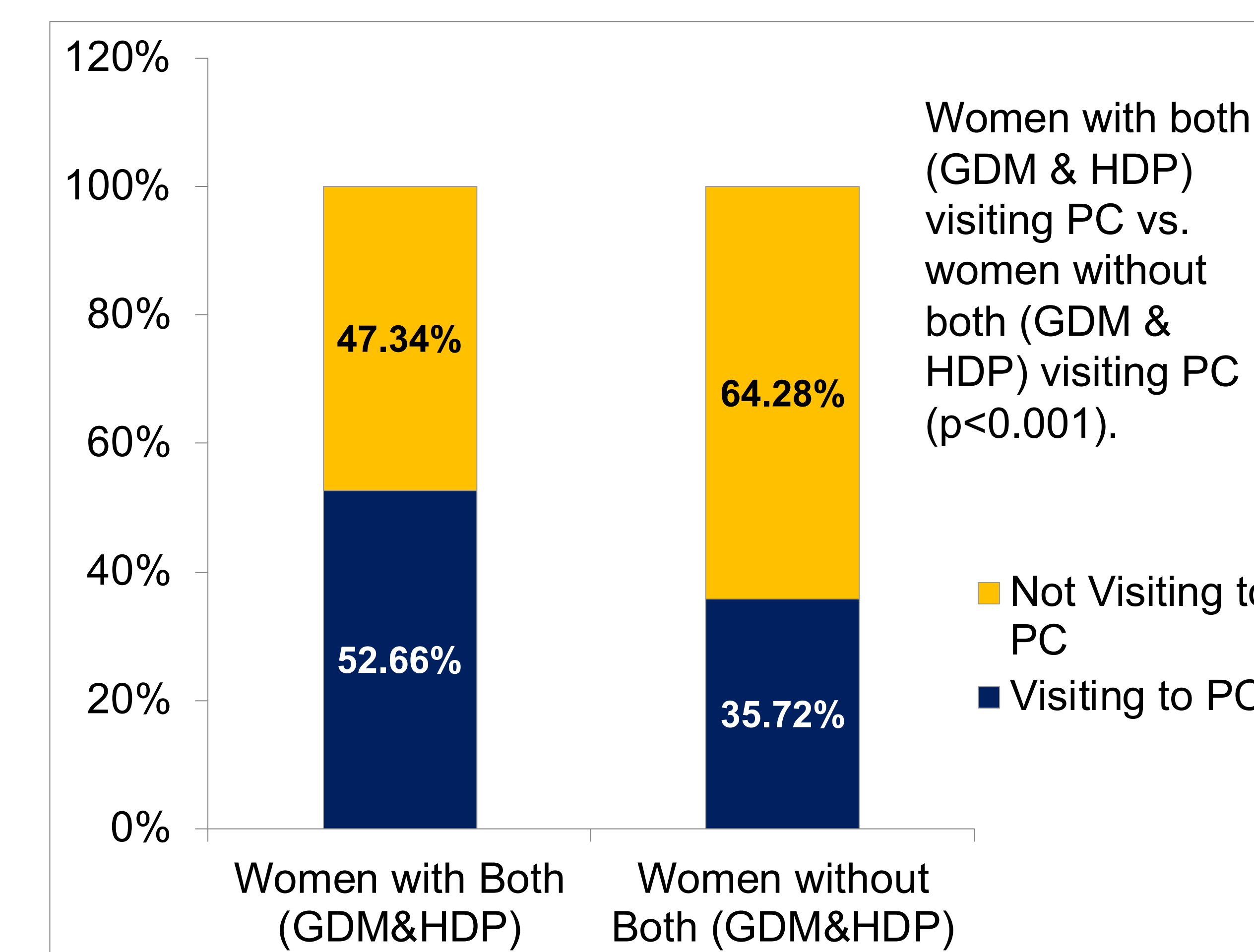


Fig: Primary Care Visits by the women with Both (GDM & HDP)

Findings

Variables	PC (FAMGNN) (%)	p-value	Unadjusted Odds Ratio	Adjusted Odds Ratio
Maternal Age				
20-29	3,149 (36.05)	Ref		
30-39	1,823 (36.72)	0.433	1.03 (0.96–1.11)	0.98 (0.91 – 1.06)
More or equal to 40	159 (37.32)	0.592	1.06 (0.86–1.29)	1.03 (0.83 – 1.28)
Race/Ethnicity^a				
Non-Hispanic White	1,992 (43.16)	Ref		
Non-Hispanic Black	1,814 (36.49)	0.000	0.76 (0.69–0.82)	0.67 (0.62 – 0.73)
Non-Hispanic Other	899 (36.31)	0.000	0.75 (0.68–0.83)	0.78 (0.70 – 0.87)
Hispanic	143 (19.92)	0.000	0.33 (0.27–0.39)	0.37 (0.30 – 0.45)
Unknown/Missing	283 (21.01)	0.000	0.35 (0.30–0.40)	0.42 (0.36 – 0.49)
Maternal Resident^a				
Urban (Metropolitan Counties)	4,076 (34.93)	Ref		
Rural (Nonmetropolitan Counties)	1,055 (42.94)	0.000	1.40 (1.28–1.53)	1.35 (1.22 – 1.48)
Medicaid Eligibility Criteria/Payment category^a				
Pregnancy	1,767 (26.38)	Ref		
Low income families	3,077 (44.92)	0.000	2.28 (2.12–2.45)	2.06 – 2.39
Other category	287 (49.74)	0.000	2.76 (2.32–3.28)	2.09 – 2.97
Gestational Diabetes (GDM)				
No	4,467 (35.20)	Ref		
Yes	662 (47.02)	0.000	1.63 (1.46–1.82)	1.41 (1.25 – 1.58)
Hypertensive disorders during pregnancy (HDP)				
No	4,103 (34.23)	Ref		
Yes	1,022 (48.12)	0.000	1.78 (1.62–1.95)	1.67 (1.52 – 1.85)
Both (GDM & HDP)				
No	4,863 (35.72)	Ref		
Yes	267 (52.66)	0.000	2.00 (1.68–2.39)	

Conclusion

- Postpartum mothers with GDM and HDP had higher odds of PC visits compared with those without GDM and without HDP.
- However, the overall percentage of women visiting PC with chronic disease was lower than 50%.
- More barriers preventing women from receiving PC should be analyzed and addressed.

Contact Information

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