INTRODUCTION

The United States continues to lag behind other developed nations in reducing infant mortality, mainly due to the high preterm birth rate in the U.S.1 Both infant mortality and prematurity place a significant emotional burden on families, and infants born preterm are at risk for both short- and long-term disabilities. With costs exceeding $26 billion annually, prematurity also places an incredible financial burden on the U.S. health care system, families, employers and the overall economy.2 Research has shown that improving women’s overall health status, including providing access to preconception and interconception care, has the potential to improve reproductive health outcomes and thus reduce the financial, emotional and physical burdens associated with infant mortality and prematurity.3 In fact, there is evidence that the risk factors associated with adverse pregnancy outcomes can be mitigated through interventions such as encouraging a preconception visit, improving public awareness of the importance of preconception health, and providing risk assessment and educational and health promotion counseling to all women through primary care.4

Despite the evidence, however, preconception care is not a part of standard clinical practice, prevention messages are not reaching women, and the quality of primary care for millions of American women remains inadequate.5 Fewer than one-third of women of childbearing age speak with a health care provider prior to pregnancy about their health and its potential impact on a pregnancy.5

The Affordable Care Act (ACA) represents a crucial opportunity to overcome barriers to preconception care by assuring access to affordable health insurance coverage for more women and by securing access to benefit packages with an emphasis on prevention. Most of the approximately 62 million women of childbearing age (15–44 years) in the U.S. are enrolled in private insurance plans.7 Private insurance covers 65 percent of women between the ages of 18 and 64 and 60 percent of adolescents between the ages of 10 and 18.8 Thus, the preconception health care policies and practices of health plans currently impact the health of millions of women and are poised to impact even more women as provisions of the ACA expand access to private health insurance in 2014.

In this issue brief we report on the activities of selected health plans/foundations known to be addressing preconception health. We examine the current role of private health plans and their philanthropic foundations in promoting preconception health, including the motivations for their interest in preconception care and their current strategies to increase access to preconception care, and document how some of these approaches are reaching women of childbearing age. We conclude by summarizing the barriers that still remain and potential strategies for health plans and foundations to overcome these barriers and promote preconception health.

HEALTH PLAN MOTIVATION FOR PROMOTING PRECONCEPTION HEALTH

Health plans cite various motives for promoting preconception health. Health plans engaged in the area of preconception health cite preventing prematurity and decreasing costs associated with adverse outcomes of high-risk pregnancies as key motivations for their activities. Health Care Service Corporation (HCSC), for example, developed preconception health promotion activities and tools to provide helpful information to identify and reduce social, behavioral and biomedical risks through early prevention and management. The
emphasis is on identifying those factors that are best addressed before conception or early pregnancy to help its employer clients offset the high costs of preterm births and improve the health of employees as well as their dependents. Blue Cross and Blue Shield of Florida (BCBSF) received and responded to specific requests from employer groups to include a preconception health program in its health and wellness offerings. The high rates and cost of infant mortality are also the focus of investments by the BlueCross BlueShield of Tennessee (BCBST) Health Foundation, as evidenced by their investment in a peer-to-peer pregnancy education and prevention program.

The fact that more than half of pregnancies are unplanned is another factor influencing health plans and foundations to focus on promoting healthy living among all women of childbearing age. For example, Blue Cross and Blue Shield of Arizona (BCBSAZ) began offering a specific preconception health program to its members in June 2011 as part of its commitment to improve the quality of life for Arizona families. The Horizon Foundation for New Jersey, concerned about the impact of low levels of health literacy on health outcomes and costs, supports the ChoiceOne Pregnancy and Sexual Health Resource Centers’ Optimal Health Training Program, which educates women of childbearing age on self-care, prevention and early intervention.

HEALTH PLAN PRECONCEPTION HEALTH ACTIVITIES

Health plans/foundations are utilizing various avenues to promote preconception health and relay information on healthy living to women of childbearing age. Here we describe five health plan/foundation approaches for promoting preconception health.

1. Preconception & Interconception Health as a Component of Prenatal Programs

Health plans provide comprehensive education to expectant mothers through their prenatal or maternity programs and many have begun to incorporate preconception health into these programs. Most programs offer telephonic counseling with registered nurses, educational mailings, and online materials. For example, HealthNow New York’s Right Start Maternity Program offers members telephonic access to registered nurses equipped with a preconception health assessment to guide discussions with members on the importance of preconception health. While no medical advice is given over the phone, the assessment stresses the importance of talking with a physician about preconception health, as well as the importance of taking folic acid, addressing lifestyle issues (such as eliminating alcohol consumption and tobacco use), and managing chronic disease. The ultimate goal of the assessment is to encourage women to see their physicians to discuss preconception health in more detail. The assessment is made available to any woman who calls the disease management hotline and requests preconception health information. HealthNow staff relied on the expertise of the March of Dimes as well their own medical training to create the preconception health messages contained in the assessment.

In a similar way, BCBSF has registered nurses available to discuss preconception health with members who call into the hotline for its Healthy Additions prenatal program. The plan also disseminates preconception health information from the Centers for Disease Control and Prevention (CDC) and the March of Dimes at health fairs and upon request to members who contact the program.

Health plans also take advantage of the opportunity to influence a woman’s health in the interconception period through their access to women who are already pregnant and enrolled in their prenatal programs. The interconception period is widely viewed as an important opportunity to provide interventions that can prevent health problems for the woman and future children. It may be particularly beneficial for those who had an adverse outcome in their previous pregnancy. Blue Cross Blue Shield of Minnesota’s (BCBSMN) Healthy Start Prenatal Support Program specifically focuses on sharing information on interconception care during the third trimester so women can understand recommendations for spacing their pregnancies and plan for healthy pregnancies in the future.

BCBSAZ has established a specific preconception health program as part of its HealthyBlue Beginnings program. HealthyBlue Beginnings is offered to large employer group accounts (100 or more employees) through a contract with Alere, an independent health and wellness management
HealthyBlue Beginnings stresses that good health habits are the most cost-effective way to improve the likelihood of a problem-free pregnancy and a healthy newborn. Designed in accordance with recommendations and guidelines from the CDC, the program begins with an assessment focused on preconception lifestyle and dietary factors and makes telephonic consultation with a registered dietician available. Educational materials developed from American College of Obstetricians and Gynecologists (ACOG) and March of Dimes sources are also provided to motivate behavior change and prepare mothers for the physical and nutritional demands of pregnancy. Additionally, the program provides an at-home pregnancy test, a toll-free hotline staffed by obstetric nurses, and a follow-up assessment to reinforce education and behavior change. The availability of the program is widely advertised both to employer groups and directly to members, and women are encouraged to self-refer into the program. BCBSAZ reports that its employer groups have been extremely supportive and excited about the launch of its preconception program.

2. Utilizing New Media and Interactive Health Communication Approaches

Health plans offer their members access to benefit information and general health care information through their websites. With the rise in popularity of social media, many health plans now have a social media presence to interact with their members, and several plans are specifically using these outlets to share preconception health information with members. For example, HealthNow utilizes Twitter and Facebook to convey a range of preventive health messages and includes preconception health messages once a year. These preconception messages are developed using March of Dimes resources and generally focus on the importance of folic acid supplements, vitamin consumption, chronic disease management and lifestyle issues. BCBSAZ plans to launch a broad social media strategy in 2012 and will incorporate preconception health messages and information about its preconception program.

Several health plans offer member portals to health information. Wellmark Blue Cross and Blue Shield, for example, uses its own website to reach mothers-to-be by providing a recommended prenatal health care schedule and advising patients to consult their physicians for preconception care physicals. Other plans rely on sites operated by outside vendors such as Krames StayWell Solutions and WebMD. Each vendor offers links to information on various preconception health issues. In addition to online health libraries, these vendors often use texting, applications (commonly known as “apps”) and social media to disseminate pertinent health information to plan members.

HCSC has developed a comprehensive public health and wellness website that incorporates several innovative approaches designed to help everyone stay healthier and safer through increased awareness and simple-to-use knowledge. The BeSmartBeWell (BSBW) site delivers

March of Dimes

Health plans can direct women to the March of Dimes preconception care website “Get Ready for Pregnancy,” which features information on the importance of folic acid, proper nutrition and a consistent exercise routine. The site also features commonly asked questions and information regarding genetic counseling and vaccinations. “Get Ready for Pregnancy” is available at http://www.marchofdimes.com/pregnancy/getready.html.

The March of Dimes also offers preconception health resources in the form of posters, booklets, pamphlets, fact sheets and flyers that can be distributed in provider offices or by health plans to their members. These resources span a wide range of preconception issues including the importance of folic acid, appropriate oral health, and fertility treatment. Specific resources include a booklet for couples to assess their readiness for pregnancy as well as a specific booklet for new fathers. Many of these preconception health resources are available in both English and Spanish and some resources are specifically geared towards African American women. In addition, there is a booklet specific to the cultural preconception health needs of American Indian and Alaska Native families. These resources are available for sale at http://www.marchofdimes.com/catalog/category.aspx?categoryid=160&code=PRECONCEPTION+HEALTH
real-life video stories, information and clinically reviewed resources that are intended to educate the visitor in a simple, easy-to-understand way. “Managing Pregnancy Risks” is one topic area addressed by BSBW, and this section features several short videos discussing risks and what to do about them along with personal stories highlighting specific risks and the positive choices a woman can make in a high-risk pregnancy. The site also includes tips and advice on how women can educate themselves, adopt healthier lifestyles and manage risks associated with pregnancy, as well as numerous links to pertinent resources produced by ACOG, the CDC, the March of Dimes, and the National Women’s Health Information Center, among others.

The site is promoted regularly with email newsletters to the public, communications to HCSC’s stakeholders, bi-weekly press releases, cross-promotions with content collaborators such as the CDC and through other means. HCSC is committed to providing increased access to care by making BeSmartBeWell.com available to the general public, including any woman considering childbirth. In addition, they promote the availability of the site to providers and encourage them to tell their patients about the site. External health-related organizations such as the Texas Department of Health, the State of Alaska and the CDC, as well as educational organizations, link to BeSmartBeWell and promote the site to their constituents.

BeSmartBeWell has Facebook and YouTube pages and is active on Twitter as well. Emails are sent regularly to more than 37,000 individuals who have opted into receiving information about the BeSmartBeWell topics via bimonthly newsletters and biweekly news alerts. They are also currently developing a new social media strategy for BeSmartBeWell designed to tailor content to more specific audiences. Recently BeSmartBeWell posted additional content to the “Managing Pregnancy Risks” topic and created a question and answer format video with a pregnancy subject matter expert that launched in January 2012.

HCSC indicated they saw a 30 percent increase in total visits to the BSBW site in 2011 relative to 2010 due to an improved and more comprehensive promotional effort. The pages contained within the “Managing Pregnancy Risks” section had some 7,400 page views through 2011 and an average visit duration of nearly 5 minutes.

3. Promoting Health Literacy to Encourage Adoption of Healthy Lifestyles

Recognizing that high levels of health literacy have been linked to positive health outcomes and lower costs,11 many health plans and foundations support programs and services designed to provide clear, understandable information to members to encourage them to make informed decisions about their health care. Many women are unaware of the impact of certain behaviors on reproductive health and childbearing;12 therefore, increasing a woman’s health literacy can help promote knowledge of the importance of preconception health.13

The Horizon Foundation for New Jersey, the philanthropic arm of Horizon Blue Cross Blue Shield of New Jersey, has been working to improve preconception health literacy by funding the ChoiceOne Pregnancy and Sexual Health Resource Center to deliver the Optimal Health Training Program (OHTP) to women who depend on public medical services in northern New Jersey. This center serves women of all ages who are experiencing or are at-risk for an unplanned pregnancy or sexually transmitted infection. ChoiceOne staff determines each woman’s health literacy status upon initial screening, and women with lower levels of health literacy are targeted to receive the OHTP as a component of their services at ChoiceOne. The program includes education and skills training in health care terminology, medical forms, gaining access to early intervention and prevention programs, medical assessment, and mentorship in responsible self/family health care. Ultimately, the hope is that the improved knowledge will help participants navigate the health care system more effectively in the future to access needed preconception services and that they will be empowered to share their knowledge with others in their communities. In terms of program reach, the ChoiceOne program delivered services to 3,719 women during the year-long grant period – two and a half times its original goal.

4. Engaging in Public-Private Sector Partnerships

Health plans and health plan foundations regularly enter into partnerships with both public and private sector organizations to enhance their work, leverage resources, and achieve healthier outcomes in their communities. Recognizing Tennessee’s high infant mortality rate and
the potential for preconception care to improve birth outcomes, BlueCross BlueShield of Tennessee (BCBST) Health Foundation has granted funds to Girls Inc. of Chattanooga for the Infant Mortality Public Awareness Campaign for Tennessee (IMPACT) program. This program works to help combat the high rate of infant mortality in Hamilton County by educating high school students about how risky behaviors before and during pregnancy can contribute to poor birth outcomes. Forty high school students were selected through a competitive process over four years and received leadership, public speaking, and preconception health and infant mortality training. In addition to conducting peer education workshops at local schools, these IMPACT members also create public service announcements (PSAs) that are displayed on billboards in Chattanooga and aired by a local cable provider. The PSAs touch on issues such as making healthy choices to avoid pregnancy until ready, avoiding cigarettes and alcohol before, during and after pregnancy, and proper nutrition during pregnancy.

The IMPACT program relies on numerous partnerships with other organizations, and the BCBST Health Foundation works closely with Girls Inc. of Chattanooga to foster partnerships with medical professionals at BCBST. Other important partnerships include sexual health and infant mortality experts provided by the Hamilton County Department of Health to educate IMPACT members, research and data analysis experts who train IMPACT members on accurate data collection, advertising specialists who help members learn about PSAs, prominent local hospitals that facilitate meetings with neonatal staff and allowed members to shoot a PSA in their halls, and the Hamilton County Department of Education, which arranges for IMPACT members to conduct peer education during school hours.

The IMPACT program disseminates pre- and post-tests to students to measure the effectiveness of their educational sessions and has achieved positive results. For example, the percentage of students who correctly identified that all women of child-bearing age should be taking folic acid increased by 34 percentage points after the IMPACT educational session. Of those same students, 83 percent identified that the best time to prevent babies from dying is before pregnancy occurs, an increase of 25 percentage points over pre-training knowledge.

5. Partnering with Health Care Professionals/Providers

Health plans frequently work to promote health and wellness among their members by providing a range of relevant resources to the providers in their networks. These resources include practice guidelines, toolkits and periodic updates on clinical issues, as well as in-person seminars, webinars and e-courses. HealthNow is currently exploring the feasibility of sharing information on preconception health with local providers through the Western New York Prenatal Collaborative made up of competing health plans in its service area, including HealthNow, Independent Health, Fidelis and Univera Community Health. The collaborative has already developed and provided other materials to providers, such as a common set of physician guidelines and a referral form that can be used across all of the plans.

BARRIERS TO PROMOTING PRECONCEPTION HEALTH

Despite these many examples of health plan/foundation efforts to promote preconception health among their members and for the larger community, barriers remain prevalent. To begin, OB/GYNs and other providers, rather
Health Plan Approaches to Preconception Health

than health plans, naturally have a larger role to play in delivering preconception health care. Women have more direct interactions with providers than with health plans and may be more comfortable receiving information from a provider than a health plan. Providers, however, have limited time with their patients, and it may not be realistic to expect them to address preconception health during a visit for another health-related concern. Health plans also reported that women do not generally seek out preconception health visits, and women with no known risk factors are even less likely to be interacting with the health care system.

In addition, the burgeoning chronic disease rates in the U.S. and the high associated costs pull attention and limited prevention resources toward chronic disease and away from preconception health. We found several instances where health plans stopped offering preconception health information and materials to members or employer accounts because they were infrequently requested and time intensive to update.

Another challenge health plans face is determining the appropriate messaging or framing of preconception health information. In some communities preconception health is perceived as controversial, and there can be sensitivity to addressing a topic that conflicts with prevailing personal and cultural values. This reluctance can be further compounded by a reticence to discuss reproductive health in the school system. The Girls Inc. of Chattanooga IMPACT program is prohibited from discussing reproductive health because public schools have an abstinence-only educational policy.

**STRATEGIES FOR HEALTH PLANS/FOUNDATIONS TO OVERCOME BARRIERS**

There are opportunities for health plans/foundations to overcome the previously identified barriers of limited direct access to women and the lack of resources for preconception health activities.

Social media and mobile technology have significantly expanded the ability of health plans to reach women directly with health information. Many health plans already have a well-developed social media presence, and these tools could be further leveraged to promote preconception health. Interactive, innovative health communication approaches, including the use of Facebook and Twitter along with more comprehensive strategies such as HCSC's BeSmartBeWell.com website, point to the potential for health plans to reach a large number of women of childbearing age even outside of providers' offices and to better promote healthy living during the preconception period and throughout their lives.

In addition, several plans are currently involved in the successful text4baby program, which sends educational information via free text messages to expectant and new mothers. This program could be a potential communications vehicle for preconception health information.

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**American Congress of Obstetricians and Gynecologists**

The American Congress of Obstetricians and Gynecologists (ACOG) offers a resource list of commonly asked questions regarding preconception health that can be shared with women. These questions range from overall healthy lifestyle questions to more specific questions concerning safe medications and family health history questions. These questions and their answers can be shared with women of childbearing age and can be accessed at [http://www.acog.org/~/media/For%20Patients/faq056.pdf?dmc=1&ts=20120417T1512583347](http://www.acog.org/~/media/For%20Patients/faq056.pdf?dmc=1&ts=20120417T1512583347)

ACOG also lists resources for health care professionals as well as the general public including information from the Centers for Disease Control and Prevention’s National Center on Birth Defects and Developmental Disabilities, The Food and Drug Administration, the March of Dimes, Medline Plus and WEBTREATS. Other resources include a variety of preconception health information specific to diabetes management, genetic counseling, substance abuse, and teratogen exposure. These resources can be found at: [http://www.acog.org/About_ACOG/ACOG_Departments/Resource_Center/WEBTREATS_Preconception_Care](http://www.acog.org/About_ACOG/ACOG_Departments/Resource_Center/WEBTREATS_Preconception_Care)
health promotion. A similar program open to women of childbearing age could be an opportunity for further dissemination of important preconception care information. In addition, with the increasing use and availability of smart phone technology, “apps” available free of charge that provide preconception health information and tips are another mechanism to reach this population with vital preconception health information. As an example, an “app” currently available from WhatToExpect.com includes preconception health information from the popular What to Expect Before You’re Expecting.14

CONCLUSION

Due to their access to women of childbearing age, along with considerable expertise in health care delivery, public health and community interventions, and marketing strategies, health plans/foundations are poised to be an important partner in promoting preconception health in the U.S. Health plans recognize the potential for preconception health care to prevent prematurity and, in turn, to decrease health care costs for employers, consumers and society as a whole. The influence of plans in this domain will only grow as more women of childbearing age are expected to gain access to private insurance in the coming years.

ENDNOTES

4 Ibid.
5 Ibid.
9 CDC, 2006.
10 Ibid.
12 CDC, 2006.
13 CDC, 2006.
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<tr>
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<td>HealthNow New York</td>
<td>Right Start Maternity Program</td>
<td>Offers members telephonic access to registered nurses equipped with a preconception health assessment to guide discussions with members on the importance of preception health.</td>
<td>Jacqueline M. DeMarco, BSN, CCM Corporate Specialist - Case and Disease Management 257 West Genesee Street Buffalo, NY 14202 6 North Office: 716-887-8887 Fax: 716-887-7913 <a href="mailto:demarco.jacqueline@healthnow.org">demarco.jacqueline@healthnow.org</a></td>
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<td>The Horizon Foundation for New Jersey</td>
<td>Optimal Health Training Program</td>
<td>The Horizon Foundation for New Jersey grants funds to ChoiceOne Pregnancy and Sexual Health Resource Center to deliver the Optimal Health Training Program to increase women's understanding of critical preconception health issues.</td>
<td>Joan K. Hollendonner Senior Program Officer <a href="mailto:Joan_Hollendonner@Horizon-Blue.com">Joan_Hollendonner@Horizon-Blue.com</a></td>
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<td>Blue Cross and Blue Shield of Florida</td>
<td>Healthy Additions</td>
<td>Registered nurses are available to discuss preconception health with members who call into the hotline.</td>
<td>Julyn Brisson BSN, RN, CCM Manager, Healthy Addition® Prenatal Program Health Promotions &amp; Wellness Programs 8400 NW 33 Street, Miami, FL 33122 Phone: (305) 921-7307</td>
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<td>Maria E. Moutinho, MD Care Management Medical Director Blue Cross Blue and Shield of Florida 4800 Deerwood Campus Parkway, Bldg. 9-5 Jacksonville, Florida 32246 Phone: 904-905-9253 Fax: 904-301-1640 <a href="mailto:Maria.Moutinho@floridablue.com">Maria.Moutinho@floridablue.com</a></td>
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<td>Kathy H. Bingham</td>
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<td>President and CEO Girls Inc. of Chattanooga</td>
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<td>Health Care Service Corporation</td>
<td>BeSmartBeWell</td>
<td>Website and social media presence that delivers real-life video stories, information and clinically reviewed resources that are intended to educate the visitor in a simple, easy-to-understand way.</td>
<td><a href="mailto:Greg_Thompson@hcsc.net">Greg_Thompson@hcsc.net</a></td>
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About NIHCM Foundation

The National Institute for Health Care Management Research and Educational Foundation is a non-profit organization whose mission is to promote improvement in health care access, management and quality.

About This Brief

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