

Overview

Like the rest of the nation, California is facing a maternal health crisis. Every five days, a Californian [loses](#) their life to pregnancy-related complications. Although the [state's pregnancy-related mortality ratio](#) is lower than the [national ratio](#), it has been rising in recent years, and the majority of these deaths are preventable. The [severe maternal morbidity rate in California](#) has also been rising and is higher than the [national rate](#).¹ This crisis disproportionately impacts Black, American Indian/Alaska Native, and Pacific Islander individuals.

With Medi-Cal covering 40 percent of births statewide, the California Department of Health Care Services (DHCS) is uniquely positioned to drive significant improvements in maternal health and birth equity. DHCS began developing the Birthing Care Pathway in 2023 to address the physical, behavioral, and health-related social needs of pregnant and postpartum Medi-Cal members with the goal to reduce maternal morbidity and mortality and address racial and ethnic disparities in outcomes. The Birthing Care Pathway, including contractor support for Medi-Cal member and partner engagement, policy development, and writing of the Report, is supported by the [California Health Care Foundation](#) and the [David & Lucile Packard Foundation](#).

A Comprehensive Roadmap

The [Birthing Care Pathway](#) coordinates and modernizes maternity care from conception through 12 months postpartum, with a focus on:

- » *Health Care:* Expanding access to maternity services and mental health and substance use care for pregnant and postpartum Medi-Cal members.
- » *Social Drivers of Health:* Addressing barriers such as unstable housing and inadequate nutrition for Medi-Cal members to achieve better health outcomes.

¹ Both the California Department of Public Health (CDPH) and the Centers for Disease Control and Prevention (CDC) report pregnancy-related mortality ratios. Both CDPH and the Health Resources and Services Administration (HRSA) report severe maternal morbidity rates. DHCS uses these terms to support comparability between state and national maternal health outcomes.

- » *Payment Modernization:* Rewarding value-based care and incentivizing best practices for maternity care.

Equity at the Core

The Birthing Care Pathway prioritizes equity, integrating culturally responsive, trauma-informed, and racially concordant care to address the disproportionate impact of poor maternal health outcomes on Black, American Indian/Alaska Native, and Pacific Islander communities.

Guided by Medi-Cal Members and Partners

Community engagement was critical to the design of the Birthing Care Pathway.

Medi-Cal Member Engagement. In fall 2023, DHCS engaged 30 members who were either currently pregnant or up to 24 months postpartum to share their lived birthing experiences while enrolled in Medi-Cal. Medi-Cal members were selected to represent a diversity of experiences, especially the lived experiences of groups that experience health disparities. Members participated in one of three activities – interviews, journaling, or a workgroup with other Medi-Cal members – and all were compensated for their participation.

Key findings from Medi-Cal members include:

- » Difficulty navigating health systems and coordinating care for themselves and their newborns.
- » Not feeling respected and heard by health care providers.
- » Experiencing discrimination in health care encounters.
- » Feeling like midwives and doulas listen to their needs and preferences.
- » Missed opportunities for trust-building, such as delays in receiving a breast pump and inadequate discussions about behavioral health screening results and referrals to services.
- » Feeling connected to health care providers and better supported when receiving racially concordant care.
- » Limited access to prenatal and postpartum mental health services.
- » Lack of awareness about benefits such as doula services, Women, Infants & Children Program (WIC), and Enhanced Care Management (ECM).

Partner Engagement. DHCS conducted key informant interviews; launched three workgroups focusing on clinical care, social drivers of health, and the postpartum period; and invited additional input on the Birthing Care with a diverse array of partners, including:

- » Providers, including obstetrician-gynecologists (OB/GYNs), family physicians, pediatricians, midwives, and behavioral health professionals.
- » Doulas, community health workers, and lactation consultants.
- » Tribes and Indian Health Program representatives.
- » County public health, behavioral health, and social service program representatives.
- » Medi-Cal managed care plans (MCPs).
- » Community-based organizations, state agencies, and birth equity advocates.

Policy Roadmap

The policy solutions and strategic opportunities for further exploration outlined in the Report were developed based on feedback from a diverse array of partners, including pregnant and postpartum Medi-Cal members whose lived experience is central to the design of the Birthing Care Pathway.

Policy Solutions. DHCS is implementing 42 Birthing Care Pathway policy solutions across eight focus areas, including:

- » **Provider Access and MCP Oversight:** Expanding access to a range of maternity providers – including doctors, midwives, and doulas; enhancing oversight of maternity services delivered through Medi-Cal MCPs; and improving communication to Medi-Cal members on available benefits and provider types.
- » **Behavioral Health:** Enhancing trauma-informed care and increasing access to mental health and substance use services.
- » **Risk Assessment.** Identifying pregnant and postpartum Medi-Cal members who are high risk and connecting them to needed services and supports; and strengthening intimate partner violence screening.
- » **Care Management and Social Drivers of Health:** Delivering whole-person care; addressing social needs, including housing and nutrition; and strengthening partnerships with community providers that have perinatal expertise.

- » **Justice-Involved Care:** Facilitating enrollment in Medi-Cal and ensuring access to services before and after release from prison or jail.
- » **Payment Redesign:** Increasing reimbursement rates for a range of maternity care providers and supporting value-based maternity care.
- » **Data and Quality:** Building integrated systems for data sharing; supporting cross-enrollment of Medi-Cal members into crucial safety net supports; and creating new performance metrics to improve the quality of Medi-Cal maternity care.
- » **State Agency Partnerships.** Coordinating across different California programs for maternal health – such as home visiting and Paid Family Leave – to boost member awareness and access; and partnering with the [California Department of Public Health \(CDPH\)](#), the [Office of the California Surgeon General \(OSG\)](#), and the [California Maternal Quality Care Collaborative \(CMQCC\)](#) to develop a statewide Maternal Health Strategic Plan, of which the Birthing Care Pathway serves as a foundational element, to reduce maternal mortality and morbidity.

Supporting and strengthening the implementation and sustainability of many of these policy solutions in the Medi-Cal program is their alignment with DHCS' Medi-Cal Transformation program areas currently being operationalized, such as [Population Health Management \(PHM\)](#), [Enhanced Care Management \(ECM\)](#), [Community Supports](#), and the [Justice-Involved Reentry Initiative](#).

Strategic Opportunities for Further Exploration. DHCS' engagement with Medi-Cal members and community partners identified a number of strategic opportunities for further exploration for the Birthing Care Pathway. These strategic opportunities include increasing access to maternity and behavioral health providers, strengthening MCP oversight and perinatal quality measures, and partnering with state agencies to improve maternal health. These opportunities are subject to additional assessment and planning and are contingent on external factors, such as legislative authority or additional state budget resources.

Transforming Maternal Health (TMaH) Model

In January 2025, the Centers for Medicare & Medicaid Services (CMS) announced California as one of 15 states selected for the federal ten-year [Transforming Maternal Health \(TMaH\) Model](#) and awarded DHCS \$17 million in federal funding to implement it. DHCS will implement TMaH in five Central Valley counties: Fresno, Kern, Kings, Madera, and Tulare. TMaH is a Medicaid and Children’s Health Insurance Program (CHIP) delivery and payment model designed to improve maternal outcomes and reduce health care expenditures through a whole-person approach to pregnancy, childbirth, and postpartum care. The TMaH Model will implement evidence-informed interventions within a value-based payment (VBP) framework, reimbursing providers based on patient health outcomes and quality of care, rather than the volume of services provided. DHCS will work with MCPs, providers, CBOs, and other partners to implement the TMaH Model, which is complementary and synergistic with the Birthing Care Pathway. While TMaH will be implemented in five counties, the Birthing Care Pathway is a statewide transformation effort designed to improve maternity care and outcomes in all 58 counties.

Looking Ahead

The Birthing Care Pathway is a multi-year initiative for DHCS to advance maternal health and birth equity in California. DHCS will continue working with maternity care and social services providers, state and local leaders, MCPs, birth equity advocates, and other partners to implement the Birthing Care Pathway using existing resources. DHCS is committed to reducing pregnancy-related mortality and morbidity in California and closing the significant racial and ethnic disparities in maternal health outcomes through the Birthing Care Pathway and also recognizes this will only be possible with the partnership, engagement and support of all of the individuals and organizations committed to the care of pregnant and postpartum Medi-Cal members.

For more information or to read the [Birthing Care Pathway Report](#), visit <https://www.dhcs.ca.gov/CalAIM/Pages/BirthingCarePathway.aspx>.