

# What is SCBOI?

Healthier moms.  
Healthier babies.

## Goals and Programs

Since infant mortality and low birth weight babies are two of the state's most pressing health problems, the South Carolina Birth Outcomes Initiative (SCBOI) was launched in July 2011. SCBOI's goal is to address these issues and reduce health care costs, while improving the health outcomes of moms and babies in South Carolina. This multi-stakeholder collaborative led by the South Carolina Department of Health and Human Services (SCDHHS) has allowed the state to be recognized as a national leader in birth outcomes and reduce the number of low birth weight infants.

SCBOI programs include: Early Elective Deliveries (EEDs), Screening Brief Intervention and Referral to Treatment (SBIRT), Baby-Friendly USA certification, CenteringPregnancy, long-acting reversible contraceptives (LARCs) and Supporting Vaginal Birth (SVB).

## Contact Information

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# Did you know?

South Carolina excels in birth outcomes.

## The truth is in the numbers.

- Eleven birthing hospitals are Baby-Friendly-certified, meaning 36% of all South Carolina babies are born in a Baby-Friendly hospital. The national average is 17%.
- Nineteen physician practices across the state offer CenteringPregnancy.
- Non-medically necessary early-elective inductions at 37 to 38 weeks gestation in South Carolina reduced by 73% from 2011 to 2014.
- Seventy-six percent of birthing hospitals in our state boast a rate of zero percent for non-medically necessary, early elective inductions between 37 and 38 weeks.
- Secured commitment from all South Carolina birthing hospitals to reduce C-sections in first-time, low-risk moms.
- The state's infant mortality rate has dropped from 6.9 out of every 1,000 births in 2013 to 6.5 out of every 1,000 births in 2014.
- Launched in April 2015, the Mother's Milk Bank of South Carolina received over 60,000 ounces of human milk donations in its first year.



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# South Carolina Birth Outcomes Initiative (SCBOI)

Working together for healthier moms  
and babies in South Carolina.



*Better Care. Better Value. Better Health.*

# How does SCBOI help moms and babies?

## Big ideas. Big solutions.

### Early Elective Deliveries (EEDs)

In August 2011, SCBOI successfully secured a commitment from all birthing hospitals in the state to help end non-medically necessary inductions between 37 and 38 weeks gestation as part of the Early Elective Deliveries (EED) initiative.

In 2013, SCDHHS and BlueCross BlueShield of South Carolina (BCBSSC) stopped reimbursement to hospitals and physicians for elective inductions or non-medically indicated deliveries before 39 weeks gestational age. This collaborative approach made South Carolina the first state in the nation in which the Medicaid agency and a commercial insurer joined forces to establish a policy of nonpayment.

### Long-Acting Reversible Contraceptives

SCBOI is working to increase postpartum access to birth control. In 2012, SCDHHS changed their policy to allow for the immediate inpatient insertion of long-

acting reversible contraceptives (LARCs) with the reimbursement for the device being fully covered to the hospitals



outside the DRG, including sales tax. South Carolina is the first state in the nation to enact such a policy. SCBOI collaborated with ChooseWell to create a LARC toolkit to inform healthcare professionals about this inpatient contraception and coverage. Also, SCBOI hosts webinars and presentations at meetings and the annual symposium to offer additional training opportunities on LARCs.

### Screening, Brief Intervention and Referral to Treatment (SBIRT)

In 2012, SCDHHS, with the support of SCBOI, began incentivizing doctors to screen pregnant women for risk factors such as substance abuse, domestic violence and depression.

SCDHHS, BCBSSC and South Carolina State Health Plan providers are reimbursed once per fiscal year for screenings and twice per fiscal year for brief interventions for each patient receiving these services.

### CenteringPregnancy

CenteringPregnancy is a national model of group prenatal care maintained by the Centering Healthcare Institute (CHI) that is shown to decrease pre-term birth. This program, focused on the mother, empowers participants to become



more involved in their own health care by acquiring the skills, knowledge and confidence to take care of themselves and their babies, while providing a community for support. It consists of 10 prenatal care sessions and three major components: assessment, education and support. SCDHHS, BCBSSC and South Carolina State Health Plan all reimburse physicians for CenteringPregnancy.

### Baby-Friendly USA

Hospitals recognized nationally as Baby-Friendly promote breast milk as the standard for infant feeding and demonstrate best practices in the care of mothers and newborns. Baby-Friendly hospitals also support mother-baby bonding by keeping mothers and babies together, putting babies in skin-to-skin contact right after birth, educating families on best infant feeding practices and training staff on procedures to better support families.

### Supporting Vaginal Birth Initiative

As a second phase of the EED initiative, SCBOI is focused on reducing the number of cesarean sections performed on first-time, low risk moms in South Carolina. This program, the Supporting Vaginal Birth (SVB) initiative, is using multiple strategies to attain this goal including a signed commitment from all birthing hospitals in the state, mobile simulation education training, webinars and provider education.