



## CHILDBIRTH EDUCATION

*Although there are many types of prepared childbirth classes that teach the skills of birth utilizing many different techniques and philosophies, the goals of these classes are essentially the same--to have a happy, healthy, and safe childbirth experience. Although different methods may vary in philosophy or how they present the material, all childbirth education classes teach basic concepts of relaxation, breathing, and other coping skills that can help a woman work with labor contractions and gain a sense of mastery over the birth experience.*

# policy brief

### What are the Benefits of Childbirth Education Classes?

- Enhances a woman's confidence in her innate ability to give birth.
- Fosters positive feelings toward the birth, caregivers and the infant.
- Decreases the use of drugs during labor--including costly epidurals.
- Offers an opportunity for social support during pregnancy--leading to reduced lengths of labor and obstetrical complications.
- Facilitates positive birth outcomes, including reduction of cesarean births.
- Sets the stage for the successful initiation of breastfeeding and adjustment to new parenthood.

### What Does it Cost?

Childbirth education classes vary in cost throughout the state according to where they are taught, how many sessions they involve, and philosophy of instructor. Generally, classes are minimal in cost, ranging from \$25 to \$50 at most hospitals.

### Are Childbirth Education Classes Currently a Covered Benefit of Medicaid?

No, although some of the Managed Care plans in Missouri do cover it. On September 1, 1995, the state of Missouri introduced a new health care delivery program called Managed Care Plus, or MC+. MC+ operates by enrolling eligible Medicaid recipients in health plans that contract with the state to provide a specified scope of benefits to each enrolled recipient in return for a payment made on a per member, per month basis. **The MC+ health plan must provide the same benefits as Medicaid; however, it may also provide additional benefits besides those required.** Currently, only five of the available thirteen health plans offer childbirth preparation classes as a covered benefit.

## **What Impact Does This Have on Women in the State of Missouri?**

In 1997, 40.4% of all Missouri live births were to women receiving Medicaid. Of the 13,734 pregnant women who **currently** receive Medicaid in Missouri, 82%, or 11,267 pregnant women, **do not have access** to childbirth education classes as a covered benefit of pregnancy.

## **What Impact Does This Have on Taxpayers in the State of Missouri?**

- Childbirth Education classes can save taxpayers money by reducing the need for medical interventions, lengthy hospital stays, and excessive pain medication.
- The median cost for an uncomplicated vaginal delivery in the State of Missouri is \$3427 and requires 48 hours of hospitalization.
- Those births that require an epidural incur on the average an additional \$220 of Medicaid reimbursable costs.
- The median cost for a C-section without complications in the State of Missouri is \$5945, while a C-section with complications averages \$7130. The required hospital stay after a C-section is 96 hours.
- For every C-section avoided, taxpayers may save between \$2518 and \$3703, depending on the complications involved.

**Given the proven benefits of childbirth education classes, it seems indisputable that childbirth education classes are a low-cost way to improve labor experiences and outcomes for mother and child alike.**

**The inclusion of childbirth education classes as a provision for all pregnant Medicaid recipients in the state of Missouri is a cost effective way to ensure that all pregnant women have the opportunity to avail themselves of the classes, while at the same time lowering birth costs for taxpayers.**

### **Selected References:**

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- Nichols, F. & Zwelling, E. (1997). *Maternal-Newborn Nursing: Theory and Practice*. Philadelphia, PA: W.B. Saunders Company.

(Compiled by Michelle Jackson, 1999)

***For a complete list of references or more information, contact the Center for Family Policy & Research***

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