### Theory of Change

**Closing Gaps in Maternal Mental Healthcare**

#### “15x30” 15 Aims for the Field by the Year 2030

- OBs (in large health systems) have adopted the AIM bundle screening protocol
- ERs in the US have adopted the AIM bundle screening protocol and Zero Suicide protocol
- Medicaid agencies/Private Insurers have 75% screening rates among contracted OBs (HEDIS)

- States meet ratio of outpatient MMH program(s)
- States meet ratio inpatient MMH program(s)
- States meet ratio of PMH-Cs per birth
- States meet ratio of MMH prescribers per birth
- States meet ratio of CBOs per birth rate
- States have mental health peer certification
- States increase utilization of certified MMH lay professionals (peers, doulas, CHWs)

- Medicaid agencies have published billing codes/guidelines on reimbursement of Obs for Dx/Tx
- Large insurers have published billing codes/guidelines on reimbursement of Obs for Dx/Tx
- Medicaid agencies address billing/reimbursement and Utilization Management (UM) criteria (including drug coverage re: zuluranolone) in contracts with MCOs
- Large insurers have published UM criteria (including re: zuluranolone)
- Medicaid agencies and/or large insurers have taken the pledge/action to integrate mental health into medical coverage

### Our Focus Areas

#### Adequate Screening
- Obstetric providers adopt a standard protocol for early, full spectrum, and routine screening, and they account for screening rates and health outcomes.

#### Access to Treatment
- A broad range of qualified maternal mental health providers are trained and accessible so that evidence-based care options are equally available to mothers in the U.S.

### Our Focus-Area Specific Inputs

- Develop/Refresh Screening/Diagnostic tools: issue brief, script*, diagnostic tool overview
- Creating new data on payment with ACOG
- Develop solutions with AHA/Zero Suicide Inst.
- Medicaid Core Set Workgroup
- Report on Medicaid & Large Insurers HEDIS Rates, positive press for those doing well*

- Research/Write Access to Care Issue Brief*
- Create Map/report of Resources/Risks
- Catalyze MH Certified Peer Support State Certification* through State Policy Change
- Develop inpatient/outpatient "Level of Care" framework with national partners*
- Provide TA to hospitals in building up MMH treatment (Whole Mom Standards)*
- Drive development of national MMH CoE
- Catalyze national OB-Psych Consult Program*
- Develop and support Community Based Org (CBO) Network & CBO "planting"*

### Cross-Cutting Activities

- MMH Report Card
- FORUM
- Congressional Briefings
- State of the Nation Report
- Blog posts
- Model State Legislation
- Agency/Constitutional letter writing
- Policy Fellows
- Meetings with key stakeholders

### Vision

**A U.S. healthcare system that routinely detects and treats maternal mental health disorders for every mother, every time.**

*Revised Nov. 2023*