

GEORGIA: MATERNAL MORTALITY

WHAT YOU SHOULD KNOW

The **Maternal Mortality Review Committee (MMRC)** reviews maternal deaths that occur during pregnancy or within a year of the end of a pregnancy **to determine cause, contributing factors, and to recommend interventions to prevent maternal deaths** in Georgia.

THE NUMBERS

(2012- 2015)

67

MATERNAL DEATHS

PER 100,000 LIVE BIRTHS

28

PREGNANCY-RELATED DEATHS

PER 100,000 LIVE BIRTHS

2/3

WERE PREVENTABLE

PREGNANCY-RELATED

2.7x

BLACK WOMEN

NON-HISPANIC

MORE LIKELY TO DIE FROM PREGNANCY-RELATED CAUSES THAN

WHITE WOMEN

NON-HISPANIC

PREGNANCY-ASSOCIATED, BUT NOT RELATED:

The death of a woman while pregnant or within one year of the end of pregnancy due to a cause unrelated to pregnancy.

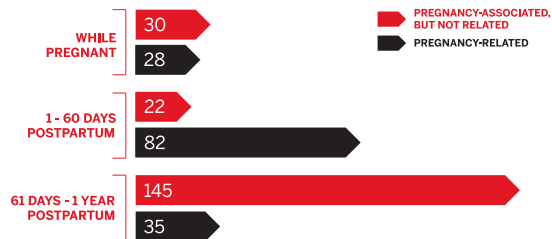
PREGNANCY-RELATED:

The death of a woman while pregnant or within one year of the end of pregnancy from any cause related to or aggravated by pregnancy or its management.

THE LEADING CAUSE OF DEATHS (PREGNANCY-RELATED)

- Cardiomyopathy • Cardiovascular / Coronary • Hemorrhage • Embolism
- Preeclampsia + Eclampsia

MATERNAL DEATHS BY RELATEDNESS + TIMING OF DEATH IN RELATION TO PREGNANCY IN GEORGIA



MATERNAL DEATHS OCCURRING AFTER DELIVERY (WITH A KNOWN PRIMARY PAYOR), BY PAYOR



MEDICAID



NON-MEDICAID

RECOMMENDATIONS

- Medicaid should **extend coverage** up to **one year postpartum**.
- Make **autopsy investigations mandatory** for every maternal death.
- All birthing hospitals **should implement patient safety bundles**.
- Insurers should **provide case management** for pregnant and postpartum women.