Meet Carly Salamone…
Carly is the Assistant Director of the Northwest Ohio Pathways HUB. Carly provides a series of services for pregnant women including assisting them with applications for Medicaid, cash assistance, food, and housing support. She assists them in accessing medical care and transportation to medical appointments and works with them to secure care for their newborns.

What is a HUB?
The Northwest Ohio Pathways HUB is a regional care coordination system created to combat infant mortality in Lucas County. Statistics show Black babies in Lucas County die at three times the rate of white babies, similar to the abysmal state rates. Since its opening in 2007, the HUB has connected low-income pregnant women to community health workers (CHW) and helped them access the medical care and social services they need to have full-term, healthy weight babies. Low birth weight and preterm births are leading infant mortality indicators.

CHWs work as a team with clients on their care coordination plans, addressing each need one by one. Resulting data is tracked by the Hospital Council of Northwest Ohio, which also provides training for CHWs and supervisors, secures funding for the care coordination system, and facilitates the network of care coordination agencies and community resources. HUBs are funded by a mix of Medicaid payments and grant opportunities.
**Expectant Moms and Babies**
During the early spring of 2020, the COVID-19 pandemic forced the closure of provider offices. Many OB/GYN appointments transitioned to telehealth. Carly worked with physicians and the Ohio Department of Medicaid to get fetal Doppler monitors and blood pressure cuffs into the homes of each of the expectant moms she works with.

**Well-Child Care**
Pediatricians stopped seeing children over the age of 2 months out of an abundance of caution until safety plans could be implemented. Carly observed that moms who had older children began canceling well-child appointments because they were uncomfortable taking their children into the office, even when safety protocols were in place and older children were allowed to return. The well-child visit is crucial in that it’s an opportunity for pediatricians to make sure that children are healthy physically, mentally, behaviorally, cognitively, and socially. These visits provide for early intervention when needed to get children the care and support to avert later complications or more acute conditions. Further, it’s a chance for the pediatrician to also see how the parents are doing - especially during this time of high stress where the whole family may be suffering.

**Immunization Challenges**
The Toledo Lucas County Health Department operates an immunization clinic called *Shots 4 Tots N Teens*. The clinic began in 1992 with the goal of increasing immunization rates among Lucas County children. Their efforts have made a difference with the immunization rates increasing from 33% in 1992 to 73% in 2019 for Toledo children and from 43% to 82% for suburban children in Lucas County during that same time period.

The clinics are open to children from birth through 18 years of age, regardless of ability to pay. Pre-COVID, the clinics were available at 13 community locations each month, however, the pandemic forced changes to the program’s availability. The clinics that were held by the Toledo Lucas County Health Department were closed for a short time because some of the health department’s COVID response team became ill with COVID, requiring *Shots 4 Tots N Teens* team members to be redeployed. The *Shots for Tots* program is operating again, however all clinics are currently by appointment only and all immunization clinics are being held at the health department until further notice.

**Chronic Care**
The Pathways HUB expanded in 2015 to address diabetes, heart disease and other chronic conditions in Lucas County through a three-year Partnerships to Improve Community Health grant from the Centers for Disease Control and Prevention. Additional expansions have followed elsewhere in northwest Ohio – including to Henry and Erie counties – and to other vulnerable Lucas County populations, such as low-income women of childbearing age and people with abnormal mammogram results.

**Barriers**
Carly observed several barriers to parents seeking care for their young children. First, parents are hesitant to bring their children to the doctor. During the spring and summer when schools were closed and because of social distancing requirements, parents thought their children were not being exposed to communicable diseases against which they need to be vaccinated. Second, the absence of childcare during the pandemic is a barrier to accessing well-child care. Many times, a doctors’ office will only allow
the child with the appointment to come to the office, so if there is no one to watch the other children, the well-child appointment is often cancelled. Thirdly, those who rely on Medicaid funded transportation, which may be furnished by Uber, Lyft or cab, must wear a mask and many moms don’t have access to masks.

CDF-Ohio Recommendations

1. **Address transportation challenges.** This is especially important in rural areas where there is no mass transit available. Community health workers can use home visiting and telehealth to keep in touch with clients, and can provide them with prepaid cards that can be used for cab or bus fare if it is available.

2. **Protect funding and increase accessibility for Ohio’s evidence-based home visiting and infant vitality programs.** We need to encourage early prenatal and well-baby care and provide timely check-ins on the mother’s health.

3. **Support Legislative Efforts to Improve Healthcare for Infants and Mothers:**
   - SB327/HB485 are efforts to improve maternal healthcare and address cultural competency training,
   - SB328/HB611 would require Medicaid to cover doula services, and
   - HB11 which seeks to improve prenatal and maternal health outcomes through education.

4. **Extend Medicaid coverage to 12 months post-partum to support maternal and infant health.** Today, though the state of Ohio has the ability to extend postpartum care for 12-months, the state hasn’t yet implemented this policy.

5. **Make the telemedicine expansion permanent.** Telemedicine helps address the issues of transportation and access to populations in underserved areas. Further, telemedicine should also be expanded to allow reimbursement for certain aspects of well-child visits when appropriate.

6. **Expand outreach programs by pediatricians and other health professionals.** We need to extend the types of settings where healthcare professionals can see parents and children to remove barriers to access. We should further support parents by letting them know it’s safe for them to schedule well-child visits and the importance of keeping up with scheduled immunizations.

7. **Protect Ohio Medicaid.** The regional care coordination centers such as Northwest Ohio Pathways HUB depend on a mix of Medicaid funding and outside grants to fund the important work they do in the community. Protecting Medicaid protects their access to critical healthcare.

*Children’s Defense Fund-Ohio thanks the individuals, families, and health practitioners who have shared their stories for the Child Watch Ohio series and the funders of the Ohio Finish Line project for their support. For more information, please contact Kelly Vyzral, Senior Health Policy Associate at kvyzral@childrensdefense.org.*