



Maternity Depression Program

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WellPoint Inc.

Agenda

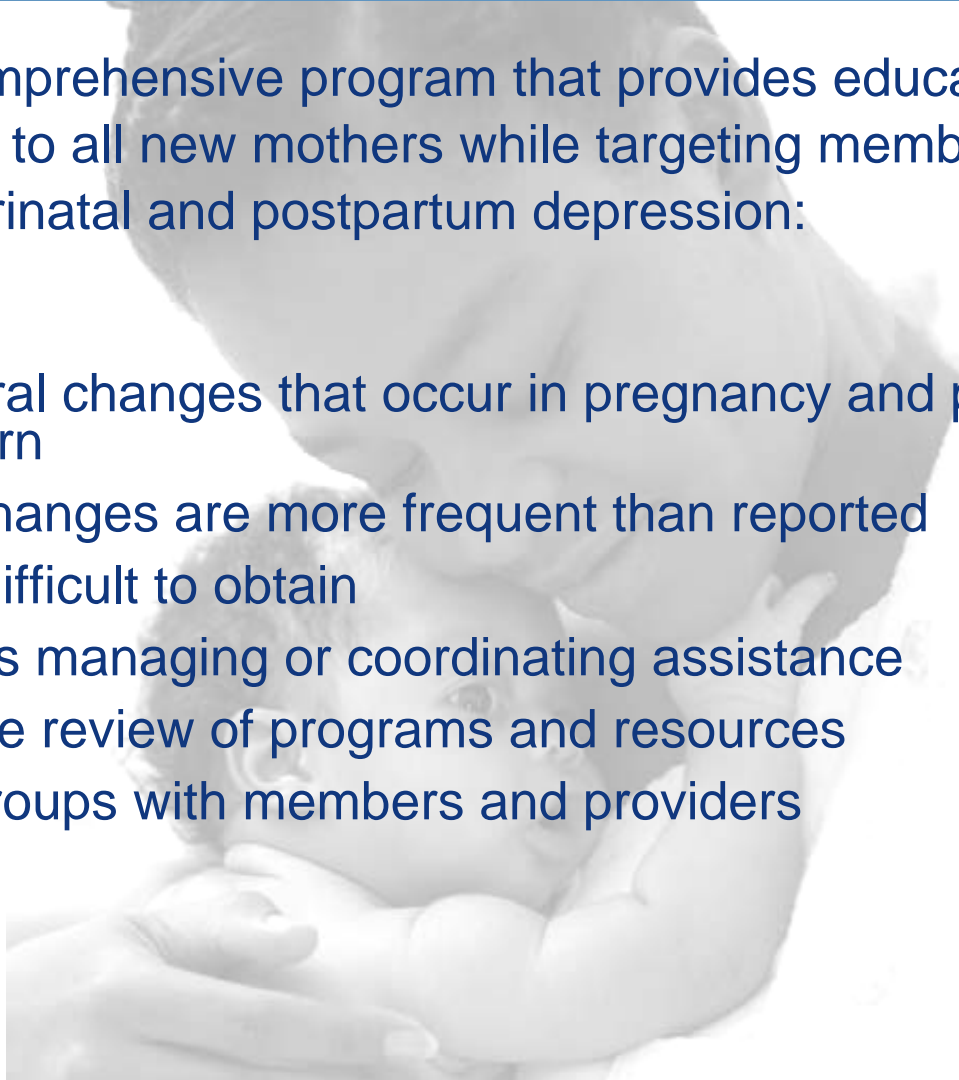
- How & why the program was developed
- Understanding the components of the program
- Unique care coordination between program & providers
- Connecting women with their benefits
- What employers can do
- Feedback from our members



How and why we developed the program

To create a comprehensive program that provides education and screening tools to all new mothers while targeting members who are at high risk for perinatal and postpartum depression:

- Behavioral changes that occur in pregnancy and post-partum are of concern
- These changes are more frequent than reported
- Help is difficult to obtain
- No one is managing or coordinating assistance
- Extensive review of programs and resources
- Focus groups with members and providers



Understanding components of the program

Comprehensive Maternity Depression Program

- Provider Toolkit
- Member Mailing
- Telephonic Outreach for High Risk Members



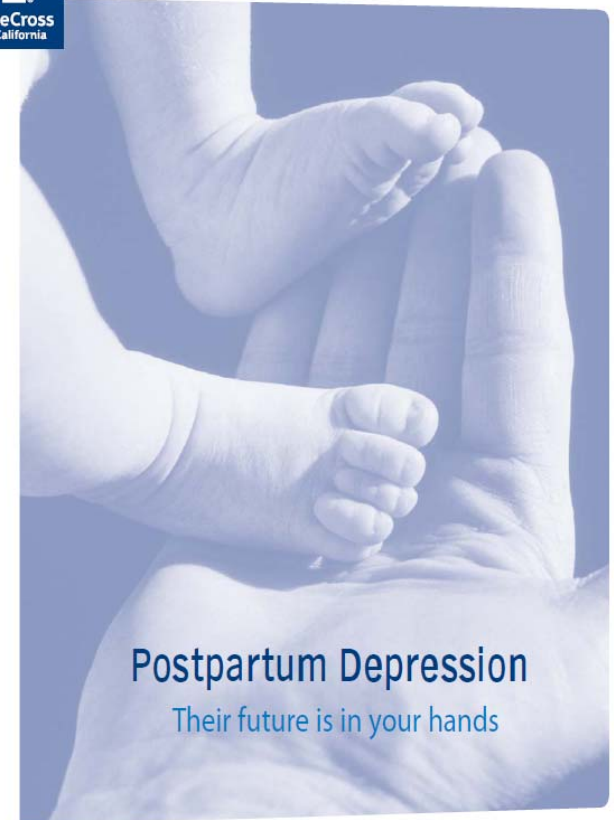
Provider toolkit

Educational materials and resources to help doctors and other providers recognize and refer moms who would benefit from support:

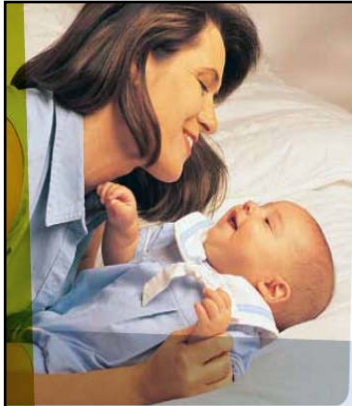
- Sample Patient Brochure
- Linkage to resources with free CME / CEU
- Screening and Assessment tools



P O Box 23330
San Diego, CA 92193



Continuing education and on-line resources



Free CE Credits

The mission of MedEdPPD.org is to increase awareness of perinatal mood disorders among medical professionals and consumers, thereby improving the quality of care provided to at-risk women. You can become part of that commitment. By successfully completing all nine of the following core learning modules, you become eligible for inclusion in the MedEdPPD.org Provider Network. Your name will have an asterisk next to it, indicating to patients and consumers that you have received basic training in the assessment and/or treatment of postpartum mental illnesses.

The following modules are accredited for CME/CE credit for physicians, nurses, and social workers.

Module 1

Responsible PPD Screening: Rationale, Timing, and Follow-up

Katherine L. Wisner, MD, MS

Dr. Wisner provides an overview of the epidemiology and risk factors for postpartum depression and outlines strategies for developing a responsible screening mechanism for depression intervention during the postpartum period. Also discussed are common barriers to instituting responsible screening.

Module 2

PPD Safety Assessment: Identifying Patients at High Risk for Psychosis, Suicide, and Homicide

Margaret G. Spinelli, RN, MD

Dr. Spinelli discusses the critical importance of identifying and treating mothers suffering from postpartum psychosis. Issues of bipolar disorder and schizophrenia are covered, as well as strategies to develop safety protocols for mothers and their children.

Module 3

Taking Antidepressants While Breastfeeding: Duration, Risks, and Long-term Effects

Ruth A. Lawrence, MD, FAAP, FACCT, FABM

Dr. Lawrence discusses issues regarding pharmacologic treatments for postpartum depression. She specifically addresses taking medications while breastfeeding, and provides data on breast milk and blood serum concentrations of drugs currently being used to treat postpartum depression.

Module 4

Non-drug PPD Interventions

June A. Horowitz, PhD, APRN, BC, FAAN

Incidence rates, risk factors, and intervention challenges are discussed, with an emphasis on screening that considers the full context of a woman's life.



Anthem. 
360Health

Screening and assessment

Care Pathways

Edinburgh Postnatal Depression Scale

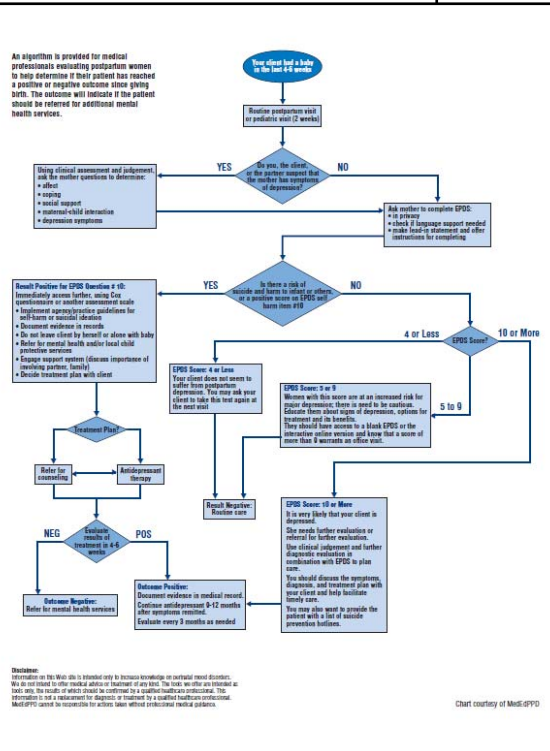
The Edinburgh Postnatal Depression Scale is used by mental health professionals to detect mothers suffering from postnatal depression. It is a self-rated questionnaire that is prolonged than the "blues" (which occur in the first few weeks after childbirth). Previous studies have shown that many depressed mothers remain untrusting of their ability to perform household tasks, but their enjoyment of life is reduced. The EPDS consists of ten short statements. The mother rates how she has been feeling during the past week. The scale takes less than 5 minutes. The validation study showed that many depressed mothers were likely to be suffering from a depressive disorder. The scale should not override clinical judgment. A caution is given that the scale indicates how the mother is feeling, but it does not make a diagnosis. The scale indicates how the mother is feeling, but it does not make a diagnosis. The scale indicates how the mother is feeling, but it does not make a diagnosis.

Instructions for users:

1. The mother is asked to choose the response that best describes her feelings over the previous 7 days.
2. All ten items must be completed.
3. Care should be taken to avoid the possibility of double counting.
4. The mother should complete the scale by herself, without reading.
5. The EPDS may be used at 6-8 weeks to screen for depression. A follow-up check-up or a home visit may provide support.

Guidelines for Evaluation:

Response categories are scored 0, 1, 2, and 3. Questions 3, 5, 6, 7, 8, 9, 10 are reverse scored. The total score is the sum of all items. Individual items are totaled to give an overall score. A score of 10 or more indicates depression, but not its severity. If any number is 2 or more, an assessment is required right away. The EPDS is a screening tool. Clinical judgment. Women should be further assessed before deciding on treatment.



Please UNDERLINE the answer that comes closest to how you have felt IN THE PAST 7 DAYS, not just how you feel today.

1. I have been able to laugh and see the funny side of things.
 - As much as I always could
 - Not quite so much now
 - Definitely not so much now
 - Not at all
2. I have looked forward with enjoyment to things.
 - As much as I ever did
 - Rather less than I used to
 - Definitely less than I used to
 - Hardly at all
3. I have blamed myself unnecessarily when things went wrong.
 - Yes, most of the time
 - Yes, some of the time
 - Not very often
 - No, never
4. I have been anxious or worried for no good reason.
 - No, not at all
 - Hardly ever
 - Yes, sometimes
 - Yes, very often
5. I have felt scared or panicky for no very good reason.
 - Yes, quite a lot
 - Yes, sometimes
 - No, not much
 - No, not at all
6. Things have been getting on top of me.
 - Yes, most of the time I haven't been able to cope at all
 - Yes, sometimes I haven't been coping as well as usual
 - No, most of the time I have coped quite well
 - No, I have been coping as well as ever
7. I have been so unhappy that I have had difficulty sleeping.
 - Yes, most of the time
 - Yes, sometimes
 - Not very often
 - No, not at all
8. I have felt sad or miserable.
 - Yes, most of the time
 - Yes, quite often
 - Not very often
 - No, not at all
9. I have been so unhappy that I have been crying.
 - Yes, most of the time
 - Yes, quite often
 - Only occasionally
 - No, never
10. The thought of harming myself has occurred to me.
 - Yes, quite often
 - Sometimes
 - Hardly ever
 - Never

Taken from the British Journal of Psychiatry June, 1987, Vol. 150 by J.L. Cox, J.M. Holden, R. Sagovsky

Member mailing

- All members with a childbirth claim receive educational materials and a copy of a self-scoring depression screening tool
- Members are encouraged to complete the survey and share their results with their physician or other healthcare provider
- Members are provided a toll-free number to call the Maternity Depression Program (MDP)
- Once members call the MDP they are offered enrollment in the telephonic outreach program

Maternal Mental Health Survey

We would like to know how you are feeling. Please circle the answer which comes closest to describing how you have felt IN THE PAST 7 DAYS, not just how you feel today. When finished, add up the numbers circled for each of the 10 responses you selected.

- | | |
|--|--|
| 1. I have been able to laugh and see the funny side of things.
0 As much as I always could
1 Not quite so much now
2 Definitely not so much
3 Not at all. | 6. Things have been too much for me.
0 No, I have been coping as well as ever.
1 No most of the time I have coped quite well.
2 Yes, sometimes I haven't been coping as well as usual.
3 Yes, most of the time I haven't been able to cope at all. |
| 2. I have looked forward with enjoyment to things.
0 As much as I ever did.
1 A little less than I used to.
2 Definitely less than I used to.
3 Hardly at all. | 7. I have been so unhappy that I have had trouble sleeping.
0 No, not at all.
1 Not very often.
2 Yes, sometimes.
3 Yes, most of the time. |
| 3. I have blamed myself unfairly when things went wrong.
0 No, never.
1 Not very often.
2 Yes, some of the time.
3 Yes, most of the time. | 8. I have felt sad or miserable.
0 No, not at all.
1 Not very often.
2 Yes, quite often.
3 Yes, most of the time. |
| 4. I have been anxious or worried for no real reason.
0 No, not at all.
1 Hardly ever.
2 Yes, sometimes.
3 Yes, very often. | 9. I have felt so unhappy that I have cried.
0 No, never.
1 Only once in awhile.
2 Yes, quite often.
3 Yes, most of the time. |
| 5. I have felt scared or panicky for no real reason.
0 No, not at all.
1 Hardly ever.
2 Yes, sometimes.
3 Yes, very often. | 10. I have thoughts of hurting myself.
0 Never.
1 Hardly ever.
2 Sometimes.
3 Yes, quite often. |

If you are having thoughts of harming yourself or someone else, go to the nearest emergency room, or contact your doctor or another health care professional immediately.

Total _____

A score of 12 or more MAY indicate that you are experiencing symptoms of depression. We, therefore, encourage you to share the results of this screening tool with your doctor and to follow his or her professional advice.

If you wish to obtain more information, please call the customer service number on the back of your health plan ID card. Tell a representative that you may be experiencing postpartum emotional changes.

Source:

The American College of Obstetricians and Gynecologists (ACOG) and The American Academy of Pediatrics, guidelines for Perinatal Care, 5th edition

Additional Resources:

The American College of Obstetricians and Gynecologists
1-202-638-5577
www.acog.org

Postpartum Support International
1-800-944-4PPD (4773)
www.postpartum.net

National Women's Health Information Center
1-800-994-9662
www.4women.gov



this information is intended for educational purposes only, and should not be interpreted as medical advice. please consult your doctor for advice about changes that may affect your health. trade names of commonly used medications and devices are provided for ease of education but are not intended as particular endorsements. your doctor may choose to use items not represented here. some services may not be covered under your health plan, please refer to your health plan group certificate and schedule of benefits for details concerning benefits, provisions and exclusions. anthem blue cross is not affiliated with or responsible for information provided by resources listed.

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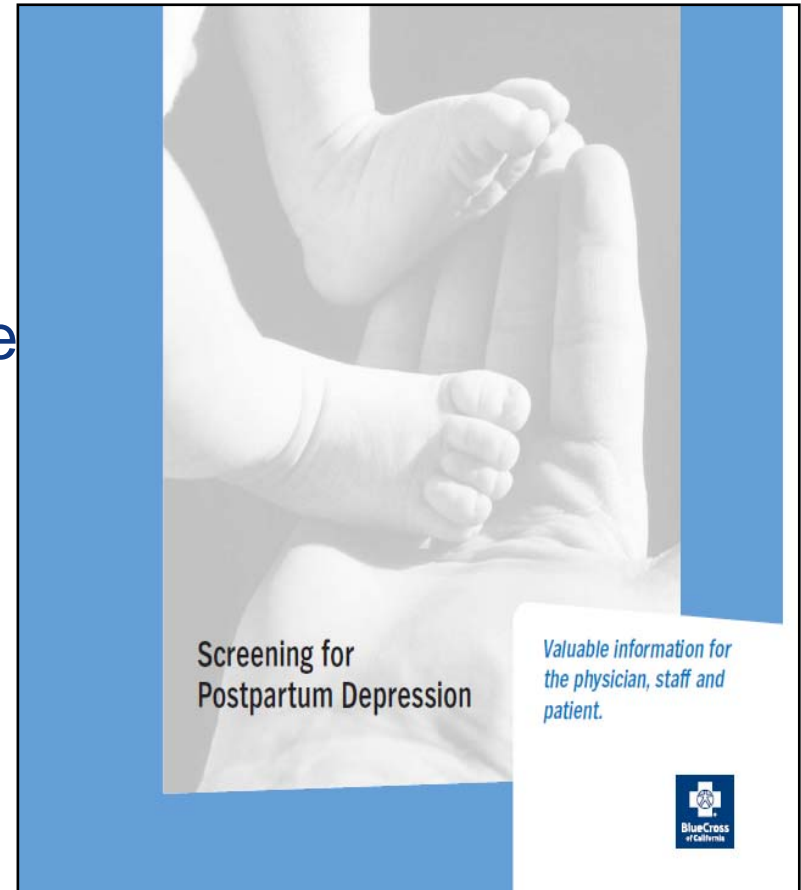
Adjusting to Life with Your New Baby...
Balancing your Emotions after Childbirth

Telephonic outreach for targeted population

- Referrals received from a variety of sources
- Licensed clinician provides member outreach and screening
- Depression education and treatment option discussion
- Support in obtaining behavioral health treatment and referrals
- Coordination with providers
- Clinical follow up and rescreen
- Satisfaction survey

Unique care coordination between program & providers

- Early and regular engagement with referral source
- Mail/Fax provider notification to OB/GYN/PCP for all positive prenatal and postpartum screenings
- Direct telephonic outreach to providers of members at highest risk



Connecting women with their benefits

- Direct linkage with customer service for benefit review and understanding
- Exploration and linkage with EAP benefits
- Identification of treating providers in the area
- Assistance with securing appointments
- Linkage with community resources



What employers can do to help

- Know what's offered & how to access services
- Target the population and raise awareness
- Promote benefits early and frequently
- Offer incentives

Feedback from our members

