

# NEWS RELEASE



Contact: Lynne High  
UnitedHealthcare  
(952) 992-5708  
[Lynne\\_m\\_high@uhc.com](mailto:Lynne_m_high@uhc.com)

## **For immediate Release**

### **UNITEDHEALTHCARE LAUNCHES EFFORT TO HELP REDUCE NEONATAL INTENSIVE CARE ADMISSIONS**

- *Studies show newborns delivered via elected C-sections prior to 39 weeks are two-times more likely to end up in the Neonatal Intensive Care Unit*
- *Pilot program with obstetricians helps decrease NICU admissions by 46 percent*

**MINNEAPOLIS – (Sept. 10, 2008)** – UnitedHealthcare is launching an effort to help physicians in its network reduce neonatal intensive care unit admissions by sharing data highlighting the increased risk of neonatal complications for babies delivered by scheduled C-sections.

The data, based on review of claims data for mothers and their newborns, showed that 48 percent of newborns admitted to the neonatal intensive care unit (NICU) were from scheduled – many before 39 weeks’ gestation – admissions for delivery, a practice that is discouraged by the American College of Obstetricians and Gynecologists (ACOG).

Medical research<sup>[1][2][3][4]</sup> shows the greatest growth in the rate of C-sections is among women and their attending physicians who are opting for elective procedures, many before 39 weeks’ gestation. Also, a growing body of recent research<sup>[5]</sup> reveals that newborns delivered prior to 39 weeks are two-times more likely to end up in the NICU than babies born at 39 to 42 weeks.

In a recent pilot study in a market in the Southwest, UnitedHealthcare reviewed mother and newborn records and physician and hospital processes based on ACOG guidelines and identified a variation in NICU admission rates. After sharing its findings, physicians and hospitals in the pilot altered practice patterns and realized a 46-percent decrease in NICU admissions in the first three months – a decline that has held stable for the subsequent five quarters.

UnitedHealthcare is releasing reports and communications based on this model to physician groups and hospitals nationwide. While adherence to evidence-based guidelines around maternity care varies across the country, several hospitals have established delivery protocols based on ACOG guidelines and review processes to ensure adherence or required approval by a review committee. Upon review, UnitedHealthcare observed that NICU admission rates for these hospitals have typically been lower.

“Reducing the overall number of elective caesarean sections would significantly decrease health risks for mothers and their newborns,” said Tina Groat, M.D., national medical director of Women’s Health for UnitedHealthcare, a UnitedHealth Group (NYSE: UNH) company. “Following our work with select physicians and hospitals we have seen a marked reduction in NICU admissions, and we are confident that these evidence-based methods can make a positive impact in further reducing NICU admissions nationwide. Also, by enhancing our efforts to educate expectant mothers, we have the opportunity to make a positive impact in the care mothers and their children receive.”

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UnitedHealthcare/NICU Admissions  
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In addition, UnitedHealthcare is expanding its Healthy Pregnancy Owner's Manual to help educate more expectant women about elective deliveries, including risks to mothers and their babies for elective C-sections prior to 39 weeks' gestation. Available at [www.healthy-pregnancy.com](http://www.healthy-pregnancy.com), the Healthy Pregnancy Owner's Manual provides expectant parents with access to important information on scheduling delivery, and key things to consider about elective deliveries such as:

- waiting until 39 weeks helps ensure a baby's lungs are fully developed;
- babies born before 39 weeks can be at increased risk for respiratory problems and other conditions that might require special care;
- women who have labor induced are more likely to need a C-section or experience other labor complications.

Currently, more than 1.2 million C-sections are performed annually in the United States – often at an increased risk to newborns – at a cost of more than \$14.6 billion per year, according to the federal Agency for Healthcare Research and Quality (AHRQ). While some women may need medical intervention as a result of fetal distress and other medical issues, more than half of all C-sections are medically unnecessary, according to the AHRQ.

#### **About UnitedHealthcare**

UnitedHealthcare ([www.unitedhealthcare.com](http://www.unitedhealthcare.com)) provides a full spectrum of consumer-oriented health benefit plans and services to individuals, public sector employers and businesses of all sizes, including more than half of the Fortune 100 companies. The company organizes access to quality, affordable health care services on behalf of more than 25 million individual consumers, contracting directly with more than 560,000 physicians and care professionals and 4,800 hospitals to offer them broad, convenient access to services nationwide. UnitedHealthcare is one of the businesses of UnitedHealth Group (NYSE: UNH), a diversified Fortune 50 health and well-being company.

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#### **Sources:**

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<sup>3</sup> Martin JA, Hamilton BE, Sutton PD, Ventura SJ, Menacker F, Kirmeyer S, Munson ML. Births: Final Data for 2005. *National Vital Statistics Reports*, Vol. 56, No. 6, December 5, 2007, pp.20-21.

<sup>4</sup> Laye MR, Dellinger EH. Timing of scheduled cesarean delivery in patients on a teaching versus private service: Adherence to American College of Obstetricians and Gynecologists guidelines and neonatal outcomes. *Am J Obstet Gynecol*. 2006 Jun 12, 195, 577-84.

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