

Centering Healthcare Institute works collaboratively with the state and three philanthropic foundations to address racial disparities in maternal child health by expanding patient access to Centering.

# Expanding Access to Centering

Public – Private  
Partnership in New  
Jersey

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Prepared by  
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## Summary

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Working collaboratively with the New Jersey Department of Health and three philanthropic foundations, Centering Healthcare Institute (CHI) developed and implemented a program to expand patient access to CenteringPregnancy® and CenteringParenting® to address racial health disparities in New Jersey.

## Background

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The New Jersey Department of Health's (NJDOH) 'Healthy Women, Healthy Families' (HWHF) initiative was launched to improve maternal and infant health outcomes for women of childbearing age and their families, while reducing racial, ethnic and economic disparities in those outcomes through a collaborative coordinated community driven approach<sup>1</sup>. Under the HWHF initiative, NJDOH identified six community-based grantees to implement innovative maternal child health programs in 12 regions of the state. Three grantees specifically selected the CenteringPregnancy model of group prenatal care as the preferred choice of an innovative program for implementation. The CenteringPregnancy model, which has shown to reduce racial disparity in preterm birth between African American women & white women<sup>2</sup>, aligned well with equity goals of the HWHF initiative. Around the same time as the launch of HWHF, CHI began working with The Burke Foundation on a separate proposal to expand Centering® in central New Jersey.

Recognizing the shared goal of expanding access to CenteringPregnancy® across the state, CHI decided to explore opportunities to collaborate with the NJDOH and three philanthropic foundations (The Burke Foundation, The Nicholson Foundation, and The Henry and Marilyn Taub Foundation) to improve alignment and streamline expansion efforts. Through the resulting public-private partnership, CHI received two years of funding to implement CenteringPregnancy® at four community health centers and CenteringParenting® at one community health center in New Jersey. CHI will provide implementation and support services to the health centers as they launch and/or expand the Centering model across their practices. The funding includes Centering promotional materials, patient notebooks, site licensing, facilitation training, implementation support, and site accreditation from CHI. In addition, CHI has hired a New Jersey Centering Program Manager to support the New Jersey expansion program. The NJDOH invested additional funds directly to the grantee organizations and selected Centering® sites to support additional program expenses (i.e. medical supplies, .2 FTE Centering Coordinator salary, group snacks, etc.).

In parallel to the Centering expansion project, a bipartisan bill was signed into law in August 2019 to expand the New Jersey State Medicaid program to cover group prenatal care services. The law, sponsored by Senator Joe Vitale and Senator Thomas Kean, expands the New Jersey Medicaid program to include coverage for group prenatal care services under the CenteringPregnancy® model at practices accredited or engaged in an active implementation contract by CHI.

These complementary initiatives strengthen New Jersey's efforts to implement an aggressive strategy to improve maternal and infant health in the state.

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<sup>1</sup> <https://www.nj.gov/health/fhs/maternalchild/outcomes/index.shtml>

<sup>2</sup> Picklesimer A., Billings D., Hale J., Blackhurst, D., and Covington-Kolb, S. (2012) The effect of CenteringPregnancy group prenatal care on preterm birth in a low-income population. *American Journal of Obstetrics & Gynecology* Vol 206: 415. e1-7.

## Key Players

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- [New Jersey Department of Health, Division of Family Health Services, Maternal & Child Health Services](#)
  - Grantee Organizations: Partnership for Maternal and Child Health of Northern New Jersey, Greater Newark Healthcare Coalition, Central Jersey Family Health Consortium
- [The Burke Foundation](#)
- [The Nicholson Foundation](#)
- [The Henry and Marilyn Taub Foundation](#)
- [Centering Healthcare Institute](#)

## Success Factors & Lessons Learned

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- Developing a system of collaborative decision-making to identify practices ready for Centering early in the process (via the Centering Readiness Assessment) ensures sites have the support and infrastructure in place to successfully implement Centering; long-term sustainability of the sites may also be improved.
- Leveraging CHI's expertise (i.e. site selection/readiness assessment, CHI services, implementation process and timeline, training modules and workshops, outcomes measurement/reporting, sustainability factors, etc.) adds value to the program development process and provides an opportunity to secure buy-in from key stakeholders.
- Transparency across partners is crucial and ensures alignment within the project.
- Relationships developed under this collaborative partnership have the potential to influence and positively impact future expansion efforts.

## Program Scope (04/01/2019 – 03/31/2021)

Scale and spread CenteringPregnancy® & CenteringParenting® to five community health centers in New Jersey

Funding Distribution	
NJDOH Funding (per expansion site)	Direct funds to HWHF Grantees to support expansion site implementation costs, including a portion of Centering Coordinator salary
The Nicholson Foundation The Henry and Marilyn Taub Foundation The Burke Foundation	CHI Implementation, Training and Support Services Start-up & Implementation Support for expansion sites Centering Facilitation Training Workshops for expansion sites New Jersey State Program Manager & Implementation Consultant

Deliverables	
Centering Implementation Plan and Training for Expansion Sites	<ul style="list-style-type: none"> <li>The Implementation Team, including the New Jersey Centering State Program Manager, Centering Implementation Specialist, and Technical Assistance Manager, will provide support and technical assistance to practices.</li> </ul>
State Centering Program Manager	<ul style="list-style-type: none"> <li>The State Centering Program Manager is a newly created role funded through this partnership. The Program Manager is a CHI employee and will on-board and train in Year 1, taking over site support duties in Year 2.</li> </ul>
New Jersey Centering Consortium	<ul style="list-style-type: none"> <li>Expansion sites will meet quarterly through the New Jersey Centering Consortium, which will serve as a learning community for the expansion project. The Consortium will provide an opportunity for the expansion sites to share best practices and lessons learned.</li> </ul>
Data Collection and Reporting	<ul style="list-style-type: none"> <li>NJDOH site-specific health outcome metrics captured by Community Health Workers</li> <li>CHI CenteringCounts will be leveraged to capture Centering process, demographic and outcome metrics (de-identified), including patient engagement (enrollment &amp; visit completion), patient &amp; facilitator satisfaction, and health outcomes (preterm birth, low birth weight, breastfeeding at discharge &amp; postpartum continuation, birth method, NICU utilization, BMI, and screening completion for postpartum depression, intimate partner violence, family planning method, etc.)</li> </ul>
Monitoring/Evaluation	<ul style="list-style-type: none"> <li>Monthly stakeholder calls and quarterly reports will monitor expansion progress.</li> <li>Partners will determine if there is an opportunity for additional expansion (model &amp; geographic)</li> </ul>
Accreditation	<ul style="list-style-type: none"> <li>Following implementation, practices are eligible to apply for site accreditation. Accreditation recognizes that a practice meets standards for Centering model fidelity and sustainability.</li> </ul>