Severe Maternal Morbidity in New York State (2017-2022)

What is Severe Maternal Morbidity?

Severe maternal morbidity refers to a group of **potentially life-threatening health conditions or complications** that occur unexpectedly during childbirth. Severe maternal morbidity can result in **short- and long-term consequences** for the health and wellbeing of birthing people beyond pregnancy.

Severe Maternal Morbidity Rates Have Increased in New York State

- During 2017-2022, the severe maternal morbidity rate was **103.2 per 10,000 deliveries**
  - This means that on average, about **1 in 100 New Yorkers** experienced severe morbidity when they gave birth during this time, affecting roughly **2,144 birthing people each year**
  - The most common types of severe complications were **hemorrhage (severe bleeding) and kidney-related complications**
- Rates **increased by 50%** between 2017 and 2022, affecting 1 in 120 New Yorkers in 2017, compared to **1 in 80** in 2022

1 in 100 birthing people during 2017-2022

There Were Stark Racial and Ethnic Disparities in Severe Maternal Morbidity

- **Black (non-Hispanic) and Native Hawaiian or Other Pacific Islander (Hispanic and non-Hispanic)** birthing people experienced the highest rates at **more than two times** the rate of White, non-Hispanic people
- Severe maternal morbidity rates **increased** during 2017-2022 for **nearly all racial and ethnic groups**

>2x

Severe Maternal Morbidity Varied By Other Health and Social Factors

- Severe maternal morbidity was more common among people with:
  - **Medicaid** insurance versus those with private insurance or who paid out-of-pocket for their deliveries
  - **Health conditions** (like diabetes, hypertension, or heart disease)
- Except for teens, rates **increased for birthing people in every age group** between 2017-2022, including New Yorkers in their 20s

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Severe Maternal Morbidity Rates Varied By Region

- During 2017-2022, severe maternal morbidity rates were highest among people living in:
  - **Downstate New York**, particularly in the **Mid-Hudson and New York City** health service areas
  - **Urban counties** compared to suburban or rural counties
- **Nine counties** (Bronx, Chautauqua, Chenango, Kings, New York, Putnam, Rockland, Sullivan, and Westchester) had **higher rates** among county residents than the 2017-2022 statewide rate
- During this time, **hospitals** located in:
  - **Downstate** health service areas (Mid-Hudson, New York City, and Nassau-Suffolk) had the **highest rates**
  - The **Western New York** service area had the **lowest rates**

Note: This is a New York State map of severe maternal morbidity rates by county of birthing persons' residence between 2017-2022. Darker purple shades indicate higher rates. Grey indicates too few cases to report.

County rates shown on map:
Clinton^ 42.7, Franklin^ 83.7, Saint Lawrence 72.4, Essex*, Jefferson 53.1, Lewis*, Hamilton*, Warren 87.5, Washington 78.1, Livingston^ 50.2, Seneca^ 67.0, Oswego 64.8, Oneida 74.1, Herkimer 100.4, Fulton 100.0, Saratoga 73.0, Schenectady 78.9, Niagara 62.6, Orleans^ 64.8, Monroe 85.6, Wayne 54.9, Montgomery 82.0, Genesee 73.3, Ontario 73.1, Onondaga 90.9, Madison 81.3, Schoharie 88.4, Albany 82.8, Rensselaer 91.1, Erie 75.6, Wyoming^ 61.6, Yates*, Cayuga 100.4, Cortland^ 62.4, Chenango 128.1, Otsego 97.4, Columbia 88.5, Schuyler*, Tompkins^ 48.6, Delaware^ 102.4, Greene*, Chautauqua 106.6, Cattaraugus 76.1, Allegany^ 61.7, Steuben 59.2, Chemung 57.9, Tioga*, Broome 82.0, Ulster 86.4, Dutchess 94.1, Sullivan 213.6, Putnam 125.3, Westchester 102.4, Orange 87.0, Rockland 107.2, Bronx 153.2, Suffolk 93.6, New York 107.2, Nassau 93.2, Richmond 89.8, Kings 127.9, Queens 102.4

Data Notes and Methodology

- Data presented in this document were obtained from the New York State Department of Health Statewide Planning and Research Cooperative System (SPARCS), an all-payer database of state inpatient hospitalizations in non-military hospitals.
- Findings are based on analyses of hospital discharge records for delivery hospitalizations occurring between January 1, 2017-December 31, 2022, among New York State residents identified as female and ages 12-55 years in the records.
- Severe maternal morbidity events were identified using diagnosis and procedure billing codes included in a standard, validated measure of 20 indicators developed by the Centers for Disease Control and Prevention (CDC). Blood transfusions were <u>not</u> included as an indicator, aligned with recent guidance from the CDC and the Maternal and Child Health Bureau.
- Rates were calculated as the number of severe maternal morbidity events divided by the number of delivery hospitalizations, multiplied by 10,000 (the rate indicates how many people experience severe maternal morbidity out of every 10,000 deliveries).
  - Unless otherwise specified, rates in this document refer to the combined rate across 2017-2022.

ADDITIONAL RESOURCE

This document is a summary of the New York State Department of Health Report *Severe Maternal Morbidity in New York State, 2017-2022*. Access the <u>full report here</u>.

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