

## Reducing Low-Risk Cesarean Section (C-Section) Births in California

*Each year, about 4 million births take place in the United States, with California accounting for about 1 in 8 of all U.S. births, or 500,000 births annually. Childbirth is the No. 1 reason for hospitalization nationally and in California. Medi-Cal pays for about half of all births in the state. Between 1997 and 2015, California’s total C-section rate increased dramatically from about 1 in 5 births to nearly 1 in 3 births. While life-saving in certain cases, C-sections can pose serious risks to both babies and mothers, and once a woman has a C-section, she has a 9 in 10 chance of having a C-section for subsequent births, increasing her risk of major complications. [Smart Care California](#) is aligning stakeholders to reduce low-risk, first-birth C-sections in California hospitals to the federal Healthy People 2020 target of 23.9 percent.*

### C-Section Health and Financial Risks

C-sections can save lives in certain circumstances, but the procedure poses serious risks to mothers—higher rates of hemorrhage, transfusions, infection and blood clots—and babies—higher rates of infection, respiratory complications and neonatal intensive care unit stays. A woman’s first birth play significant importance because once a woman has a C-section, she has a 90 percent chance of having a C-section for subsequent births, leading to higher risks of major complications, such as hysterectomy and uterine rupture.

Along with potential health risks, C-sections cost about 50 percent more on average than vaginal deliveries. Therefore, unnecessary C-sections increase costs for patients, consumers, purchasers and taxpayers without improving outcomes and in some cases harming patients.

### Wide, Unwarranted Variation in C-Section Rates

Evidence suggests that a woman’s chance of having a C-section depends largely on the hospital where she delivers and the practice patterns of her clinical team. As in other states, the low-risk, first birth C-section rate varies widely among California hospitals, from less than 15 percent to more than 70 percent. In 2015, about [40 percent](#) of the 244 California hospitals providing maternity services in California met the Healthy People 2020 target of a 23.9 percent C-section rate for low-risk, first-birth deliveries. The fact that so many hospitals in the state have already reached this target indicates it is achievable. However, the fact that more than half have not underscores that there is still significant opportunity for improvement.

### California C-Section Resources

The [California Maternal Quality Care Collaborative](#) (CMQCC), based at Stanford University, is a nationally recognized leader in maternity care quality measurement and improvement. With funding from the California Health Care Foundation (CHCF), as part of the Foundation’s [statewide initiative](#) to reduce unnecessary C-sections, CMQCC released a [toolkit](#) in 2016 to assist hospitals and clinicians in

promoting vaginal birth and reducing unnecessary C-sections. In addition, CMQCC is working with California hospitals and their clinical teams to implement this toolkit through an 18-month [Supporting Vaginal Birth](#) quality improvement collaborative. For more information, contact Cathie Markow, CMQCC administrative director, at [cmarkow@stanford.edu](mailto:cmarkow@stanford.edu).

Reducing C-section rates starts with the culture of the hospital, involving changes to physician practice patterns, educating nurses and support staff, and implementing new policies within the facility. Collaboration and communication among each of these players is essential. Aligning payment and purchaser requirements to support clinical teams in providing only medically necessary C-section is also important. Smart Care California developed a [menu of payment and contracting options](#) that gives payers specific strategies to align payment with desired outcomes.

Consumer education is also critical to the above efforts. As part of efforts to advance improvements in health care, CMQCC, Consumer Reports and CHCF have partnered to launch [My Birth Matters](#), a statewide campaign designed to educate expectant mothers about C-section deliveries and encourage conversations between them, their doctor, and their care team. The campaign offers free educational materials in English and Spanish, including print materials and four short animated videos that educate women about c-sections and encourage them to share their birth preferences.

Many other partners in the state are engaged in reducing unnecessary low-risk, first-birth C-sections, including but not limited to: the Department of Health Care Services (DHCS), CalPERS, Consumer Reports, Covered California, the Hospital Quality Institute, the [Integrated Healthcare Association](#) (IHA), the Pacific Business Group on Health, and state and national specialty provider societies.

## Hospital Honor Roll

To spotlight the overuse and unwarranted variation of low-risk, first-birth C-sections, the California Health and Human Services Agency (CHHS), on behalf of Smart Care California, has publicly recognized maternity hospitals who have met or surpassed the Healthy People 2020 C-section target of 23.9 percent for low-risk, first-births. In October 2018, [122 hospitals](#) were publicly recognized by CHHS for their efforts to ensure mothers receive C-sections only when medically necessary; this marks the third release for this annual Hospital Honor Roll. Hospital C-section rates, along with other maternity care measures, may be found at [www.CalHospitalCompare.org](http://www.CalHospitalCompare.org).

## Smart Care California

Smart Care California is a public-private partnership working to promote safe, affordable health care in California. The group currently focuses on three issues: C-sections, opioids and low back pain. Collectively, Smart Care California participants purchase or manage care for more than 16 million Californians—or 40 percent of the state. Smart Care California is co-chaired by the state's leading health care purchasers: DHCS, which administers Medi-Cal; Covered California, the state's health insurance marketplace; and CalPERS, which manages pension and health benefits for California's public employees, retirees, and their families. IHA convenes and coordinates the partnership with funding from CHCF. Learn more about [Smart Care California](#).

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*Based in Oakland, Calif., the nonprofit Integrated Healthcare Association (IHA) convenes diverse stakeholders—including physicians, hospitals and health systems, purchasers, and health plans—committed to high-value, integrated care that improves quality and affordability for patients across California and the nation.*