

Maternity: The 'C' Change

The ideal threshold prescribed by World Health Organisation (WHO) for caesarean section deliveries is between 10-15%. While WHO guidelines clearly state that C-section, as a medical procedure, should be conducted only in complicated pregnancies, in India, like many other developed and developing countries, caesarean births have become increasingly common. According to research published in the medical journal Jama Network Open in March 2019, the rate of caesarean births is increasing in India and has already crossed the WHO advisory threshold of 15%. According to the report, in 2018-19, India conducted 20% of total institutional deliveries through C-section against 18.7% in the previous year.



20% INDIA C-SECTION RATE

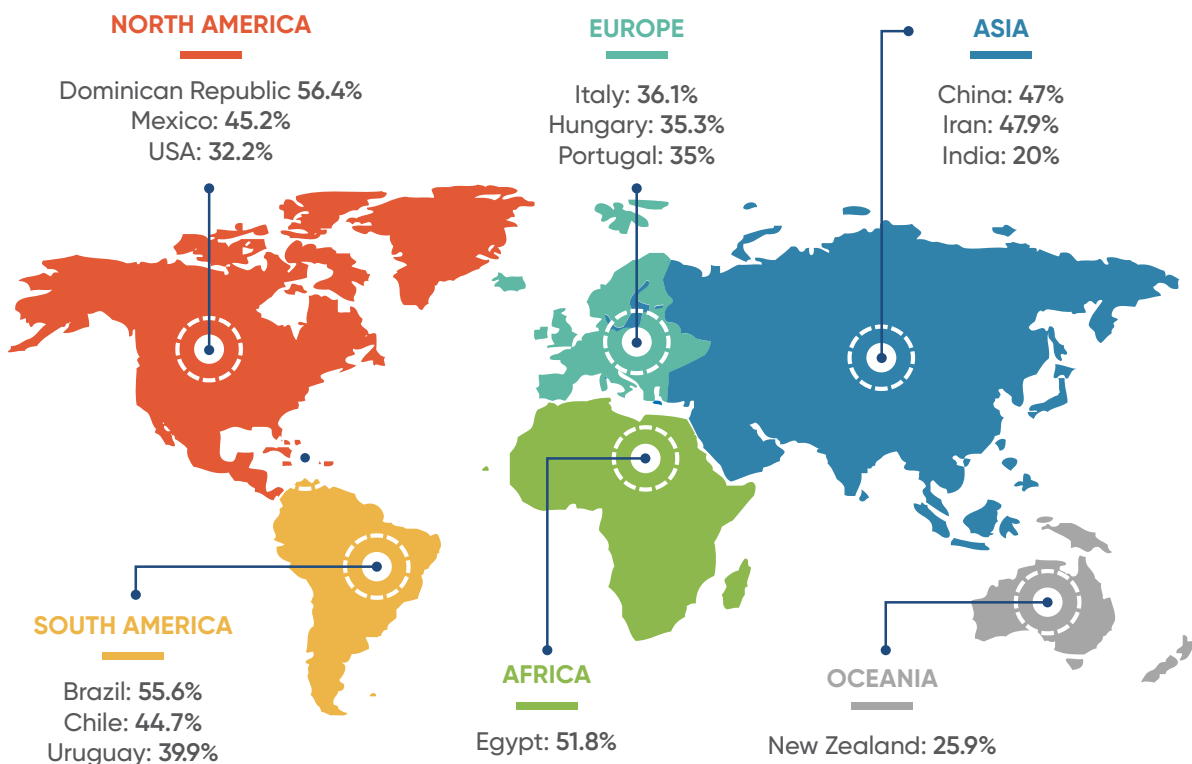
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33.80% C-SECTION ACCOUNTS FOR 33.8% OF ALL DELIVERIES IN PRIVATE HOSPITALS

70% C-SECTION CONTRIBUTION BY CORPORATE INSURANCE

Typically 70% of the maternity claim amounts are spent on C-section deliveries

C-Section Delivery Rate Worldwide



Source: bellybelly.com

While in India, the c-section rate is currently at 20%, the number is growing at an alarming rate of 300% in public hospitals and 400% in private hospitals.

Source: Health Management Information System (HMIS)

Side Effects of C-section:

- a. Women whose first birth is by Caesarean, are less likely to have a subsequent pregnancy than women whose first birth is a spontaneous vaginal delivery, as this might lead to other health complications including diabetes-related disorders, abnormalities of organs and soft tissues of the pelvis, hypertensive disorders, and other maternal health problems
- b. Longer ambulatory recovery period post-surgery
- c. Scar complications including hysterectomy scar pregnancy, numbness, and incisional endometriosis

Apart from the impact on the health of the mother, it is important to note that 40% of the total claimed amount is contributed by maternity and maternity-related treatments. Out of the total maternity-related cost, typically 70% of the amount is spent on C-section deliveries.

The average claimed amount for Maternity is up to INR 60,000 with an average length of stay of 4 days in the hospital. In comparison, the normal delivery average claimed is up to INR 40,000 with the average length of stay being 3 days.

Unless the employer focuses on educating employees to opt for normal deliveries and getting the split closer to WHO guidelines, the maternity-related outgo will never be addressed and is likely to worsen.

Source: Caesarean Section in Low-, Middle- and High-Income Countries By Josaphat Byamugisha and Moses Adroma

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*Source: WHO guidelines on "Ideal rate" for Caesarean sections

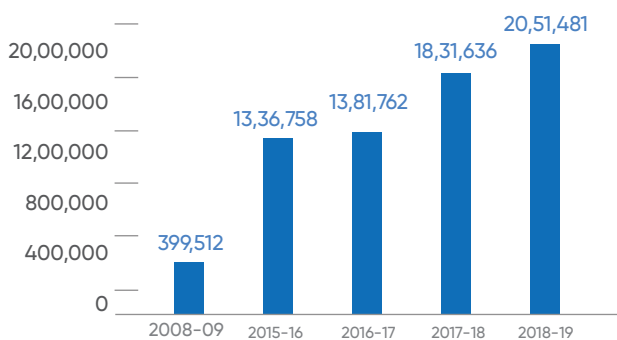
According to Prudent's study of 26,000 maternity claims across India, the birth through caesarean procedure was 54%.



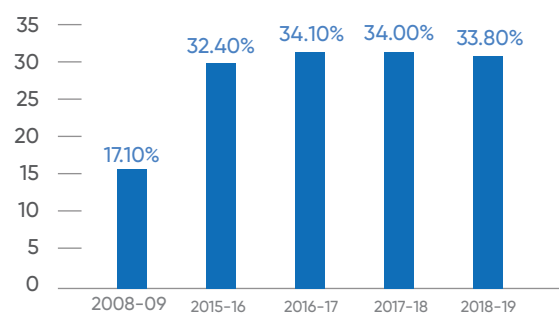
Top Hospitals Opted for Caesarean Births

India has registered an over 400% jump in C-section deliveries in private hospitals in the last decade. In private hospitals, C-sections have gone up from 4 lakh* in 2008-09 to 20.5 lakh in 2018-19. Ten years ago, C-section accounted for 17% of the total births at private hospitals; and has now doubled to 33.8%.

C-Section Deliveries in Private Institutions



Percentage of C-Section Conducted at Private Facilities



Source: Health Management information System (HMIS)

There are very few hospitals left where C-section rates are less than 20% of all deliveries. In some private hospitals, the rate goes as high as 86%.

>50%	50-30%	< 30%
<ul style="list-style-type: none"> • ONP Leela (Maharashtra) • Bhagirathi Neotia (West Bengal) • Ankura Women & Children (Telangana) • Cosmopolitan (Kerala) • Max Super Specialty (Various) • Rainbow Children (Telangana) • Apollo (Various) • Jupiter (Maharashtra) 	<ul style="list-style-type: none"> • Manipal (Various) • Fortis (Various) • Deenanath Mangeshkar (Maharashtra) • Asian Institute of Medical Sciences (Haryana) • Yashoda (Various) • Maharaja Agrasen (Delhi) • Bangalore Baptist (Karnataka) • Rangadore Memorial (Karnataka) 	<ul style="list-style-type: none"> • St. Stephens (Delhi) • Sundaram Medical (Tamil Nadu) • Rajagiri (Kerala) • Ernakulam Medical (Kerala)

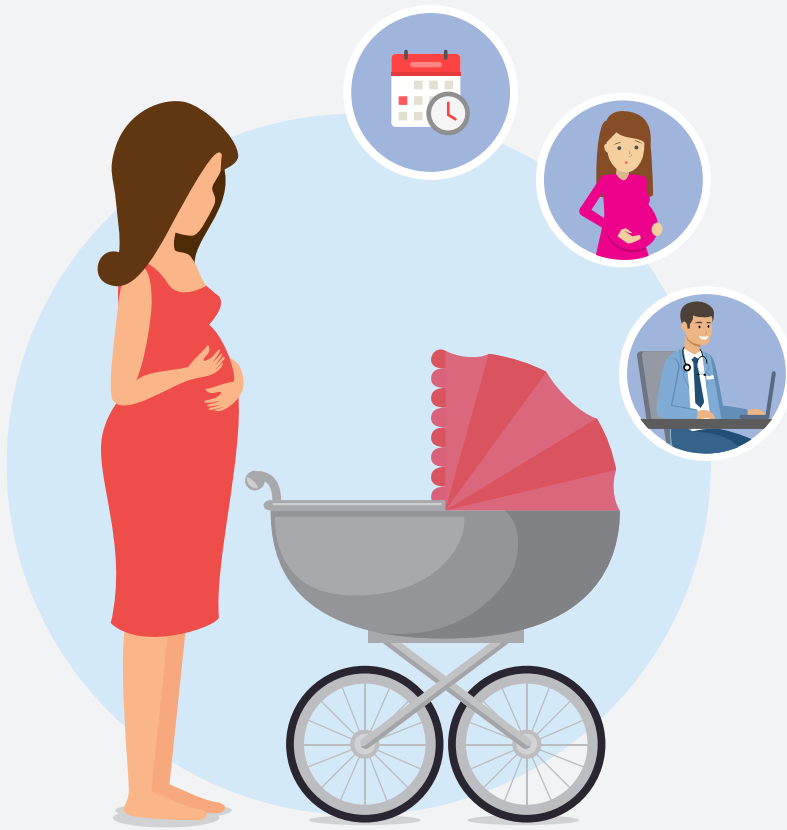
*Source: Prudent Internal Claim Data (PAN-India)

For the same hospitals, the average claimed amount for normal deliveries is at least 20% lower than C-section amounts; the average number of days is also reduced by at least a day, overall number of maternity claims reported on PAN India basis.

*1 Lakh = 100,000

*Source: Prudent Internal Claim Data (PAN-India)

Some of the Major Reasons for Rise in C-Section Deliveries are:



Voluntary Demand of C-Section:

Patients either want to deliver on auspicious dates or want to avoid labour pain.

Lack of Education on Mode of Delivery:

Educating pregnant women and their families on the risks of a Caesarean delivery vis-à-vis the risks of a normal delivery may empower women to choose a safer option for themselves in consultation with their gynaecologist.

Rising Age of Childbearing:

In most developed and developing economies, social, educational, and demographic changes have led to an increasing number of women postponing their pregnancies to later years of fertility. This social trend combined with accessibility to birth control and infertility treatment has increased the proportion of women experiencing their first pregnancy after 35 years of age.

High Incentive for Doctors/ Hospitals

Better incentives is one of the major reasons for the high C-section rate in India. Regulations are not fully enforced: doctors get commissions for referring patients to diagnostics labs, and similarly get paid more when they conduct C-sections.

Upswing in Gestational Diabetes

Incidence of Gestational Diabetes has gone up manifold to almost 30% of urban pregnancies, thus increasing the size and, typically head circumference of the baby, making normal delivery more challenging.

Possible Solutions for Better Health of Mother and Child:

Benefits Design:

Employers may influence hospital/doctor behaviour through maternity coverage design. For example, setting the same limit for both normal and C-section, or more disruptively, setting a lower limit or having some cost-control measures for C-section delivery, etc.

Counselling by Doctors:

Providing education about the normal delivery process and ways of maximizing chances of a natural delivery, explaining the risks associated with C-section and its impact on subsequent pregnancies, and offering Lamaze, Maternity Yoga, and meditation classes to expecting mothers, can all contribute to informed choices that lead to better outcomes for the mother and the baby.

Pregnancy-Friendly Workplace Environment:

Employers could look at more supportive chairs, more frequent breaks, and footrests, or work out ways with the human resources department to structure leaves of absence (separate from maternity leave) to address health concerns.

Organizations need to work with their broker partner to have a holistic solution addressing benefits plan design along with a wellness strategy to address the high C-section rate for a healthier outcome.

Pregnancy Care Program: A Holistic Prudent Approach



Sourcing pregnancy nutrition programs: Offering nutritional counseling activities as part of a wellness program can help expecting mothers keep weight gain in check during pregnancy. It can also help them keep a check on blood sugar, gestational diabetes, etc.



Encouraging pregnancy-appropriate exercise: Developing and maintaining a regular exercise routine throughout pregnancy will help employees stay healthier and feel better. It can even reduce some common pregnancy discomforts like backaches, fatigue, stiffness, and swelling.



Creating education material: Counselling and preparing women for normal delivery through testimonies and expert advice can help them make the right choice and feel encouraged.



One-on-one coaching for expecting mother and father: It is always beneficial to involve dads-to-be as well in the pregnancy coaching as they also play a crucial role in the decisions of the delivery process. Typically, consulting doctors will be busy with other patients and, hence, having access to a coach who can answer all their doubts goes a long way in addressing their fears.



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