

# WISCONSIN MATERNAL MORTALITY REVIEW TEAM (MMRT)

## May 2025 Meeting Summary

**Cases Reviewed:** 11

**Preventability:** 91% preventable

**Pregnancy-Relatedness:** 18% pregnancy-related

**Causes of Death\*:** sepsis, postpartum cardiomyopathy

**MMRT Recommendations\*:** (#) = number of cases

### For Providers:

- Providers should complete laboratory evaluation for any pregnant patients with elevated blood pressures when pregnant patients are admitted to the hospital or seen in an outpatient facility. (1)
- Primary care and outpatient providers should make a follow-up plan for any abnormal vital signs for pregnant patients and communicate with their obstetric providers whenever pregnant patients interact with their system. (1)

### For Facilities:

- Delivery facilities should ensure that birthing people are connected back to primary care, especially those with complex or chronic health conditions. (1)

### For Systems:

- Hospital care teams should employ a process for providing home blood pressure monitoring devices to all patients with hypertension or cardiovascular disease upon any discharge from postpartum or antepartum admission. (1)
- Hospital care teams should provide information and comprehensive counseling for families and pregnant patients to understand red-flag symptoms of hypertension and cardiovascular disease on any hospital or emergency department discharge. Counseling should be tailored to patients' conditions and learning level. (1)
- Medicaid should increase access to and payment for care coordination for medically complex pregnant persons (on report of each new pregnancy). (1)

\* Pregnancy-related only

## **MMRT Recommendations Continued:**

- Medicaid and private insurers should provide pregnant persons with chronic hypertension (or new diagnosis of hypertension) with home blood pressure monitoring systems and care coordination/follow-up. (1)
- Organizations providing prenatal education and obstetric clinics should include teaching on warning signs of cardiovascular and hypertensive diseases of pregnancy and postpartum during their scheduled classes. (1)
- Insurance payors should support organizations providing prenatal education to include additional support and education, including virtual options and additional individual support for those with learning needs throughout the duration of the pregnancy. (1)