

MaineHealth lands grant for rural maternal healthcare

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By Nicole Carter

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NORWAY — The U.S. Health Resources and Services Administration (HRSA) has announced a one million dollar grant – that would be renewable over four years – for MaineHealth to expand rural maternal healthcare in Maine. The announcement was made during a joint press conference between HRSA and MaineHealth at Stephens Memorial Hospital Monday afternoon.

HRSA is an agency of the U.S. Department of Health and Human Services.

“This program serves to retain maternal healthcare services in rural communities,” said Carole Johnson, HRSA administrator. “It will focus on critical needs like telehealth and using modern technology to get support services to rural folks. And it will help tackle underlying health issues that make pregnancy even more challenging, like diabetes and hypertension.”



MaineHealth's Chief Health Improvement Officer Dr. Dora Mills displays a Maine map showing hospital locations in the state. The blue spots represent hospitals that provide maternal and delivery services and the red spots are hospitals that do not. Also pictured, Maine Department of Health and Human Services Commissioner Jeanne Lambrew. *Nicole Carter / Advertiser Democrat*

MaineHealth Chief Health Improvement Officer Dora Mills said Maine's largest healthcare system applied for the grant to improve outcomes for expectant mothers and infants in rural areas who live far distances from hospitals with maternity services.

"There are two issues in Maine that we are challenged with," Mills said. "First, we are the most rural state in the country. Sixty-one percent of people in Maine live in rural areas, compared to 19% nationally. Our pregnant women are at higher risk than the rest of the country. The second issue is one-third of Maine's rural hospitals have closed to maternal delivery."

Mills cited long distances between rural communities and specialty care as a significant risk to maternal health. The distance from Houlton to Eastern Maine Medical Center in Bangor is 117 miles. There are two hospitals closer to the eastern Maine city but neither provide delivery services.

"I do not believe there is another stretch this long the I-95 corridor from Houlton to Miami (Fla.) without labor and delivery, along this major interstate highway," Mills noted. "Across the state we have pregnant women driving hours for specialty care to either Portland or Bangor."

Expectant mothers in Calais, where local maternity hospital care was discontinued five years ago, now must travel about 100 miles along Route 9 to reach EMMC.

Routine maternal and delivery care requires that many women drive hours from their home. The goal of the program is to build a statewide telehealth system across rural Maine to connect obstetric providers and patients with experts at hospitals that provide higher levels of care.

"We will also be able to improve the continuum of care to address issues such as hypertension, obesity, tobacco addiction and diabetes [cases], which are higher in rural Maine than they are in urban Maine," Mills said. "We are partnering with a number of organizations including all of our delivery hospitals across the state, with statewide organizations particularly with Maine Department of Health and Human Services and the Maine Center for Disease Control, as well as other groups."

According to Dr. Liz Erekson, Maine Medical Center's obstetrics and gynecology department chair, the chances of a mother delivering a baby pre-term or having an adverse event during pregnancy is doubled when she lives in a community with no inpatient obstetrical care. The chance of not delivering a baby at the hospital also significantly increases the further away a mother has to be driven while in labor.

Among the new services will be the ability for maternal experts at Maine's larger hospitals to remotely attend patient ultrasounds conducted by their regular provider. All healthcare systems and hospitals will collaborate in the program.

The HRSA \$1 million grant is the first in a four-year period, reliant on annual renewal by Congress. During year one, two-thirds of the funds will be allocated to telehealth equipment and one-third towards training. The total amount of the grant will be \$4 million by the end of the four-year period.

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