



## Supporting Mothers and Families in an Evolving Landscape

Jane van Dis, MD  
*Medical Director*

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## Meet Jane van Dis, MD - Maven Medical Director!

Jane van Dis, MD is a board certified ObGyn practicing in Burbank, California. She is Maven's Medical Director, and was most recently, Chair of the Department of ObGyn at the hospital where she practices.

Dr van Dis has authored many articles, and a recent book chapter, on maternity care and maternal mental health; and has been active in digital health for over 9 years. She is a single mom to 11-year twins, Brooke & Miles, and recently adopted a puppy.



## Agenda

1. The Shifting Landscape in Family Benefits
2. Unmet Needs on the Journey to Parenthood
3. Implications for Employers
4. Solutions for Employers
5. Success Stories

The family benefits landscape  
is shifting dramatically





## Four key trends are driving the rapidly evolving family benefits market

### 1. Inclusion & diversity in the workforce

Millennials are 75% of today's workforce<sup>1</sup> and 90% of new parents<sup>2</sup>. Great health benefits – including fertility – drive talent attraction and retention of both men and women.

### 2. Mental health is a top priority

20% of pregnant women/new moms will develop a perinatal mood or anxiety disorder<sup>3</sup>. Getting care – ob-gyn, pediatric, mental health – in one place increases the chances that a woman will get screened.

### 3. High fertility & maternity costs

Women incur health expenses that are 80% higher than men because of their need for reproductive services<sup>4</sup>. There is an opportunity to reduce costs and drive better outcomes for women and families.

### 4. Current solutions are lacking

Carrier maternity management programs have low utilization and are being abandoned. Employers are investing in pieces of the puzzle, but lack a unifying platform, furthering low utilization.

#### Sources:

(1) The Brookings Institution. May 2014, (2) Goldman Sachs Global Investment Research 2015, (3) Seleni Institute, March 2018, (4) U.S. Department of Labor Employee Benefits Security Administration



Many patient needs remain unmet

**INFERTILITY /  
ADOPTION / SURROGACY**

1 in 8 couples;  
stigmatized; lack of good  
information; no lifestyle support

**PREGNANCY /  
POSTPARTUM**

C-Section rate 20 points higher  
than WHO recommends

**MISCARRIAGE**

1 in 4 pregnancies;  
stigmatized, without real  
support or grief counseling

**BREASTFEEDING**

WHO recommends for first 6 months  
(massive health benefits for mom & baby);  
Return to work is #1 reason why women stop

**MATERNAL  
MENTAL HEALTH**

1 in 5 new moms have postpartum  
mood disorders; more than half  
aren't screened

**RETURN  
TO WORK**

43% of new moms leave job  
after giving birth; 75% want to stay  
but can't make it work

“

Our carriers are not delivering on maternity—they don't meet expectations, they don't do what they say, and there is a total lack of engagement. I also think about pregnancy, not just as an expense, but also a lifestyle. How do you treat it all, including the behavioral issues? This is critical for return-to-work and family life.

SVP, GLOBAL BENEFITS,  
FORTUNE 50 COMPANY, MAVEN CLIENT

Today's journey to parenthood is  
complicated, with major gaps in care





## Case study - IVF

*Simone had fertility issues related to PCOS and, at 41 years old, hadn't been able to conceive after years of trying. She and her partner went through 4 rounds of IUI with injectables, but each attempt was unsuccessful or ended in a miscarriage. IVF is the next step on her infertility journey and her last hope of having a biological child.*

### PLANNING & PREPARATION

- Looking for a new fertility clinic
- Seeks guidance on nutrition and diet
- Weekly online forum visits to hear IVF stories from other women

### THE IVF PROCESS

- Second opinion from a different RE
- Emotional wellness struggles, but lacks a mental health provider
- Anxiety about work absences and impact on her career

### POST- PROCEDURE

- Seeks advice on C-section avoidance
- Ongoing perinatal and postpartum mental health issues



## Case study - *high risk pregnancy*

*Jane had an unplanned C-section at 35 weeks with her first daughter five years ago due to preeclampsia. She just discovered she's 8 weeks pregnant and would like to try for a VBAC so needs to find a new doctor as her existing one does not do VBACs. She also has a history of bipolar disorder and is afraid of developing it during this pregnancy.*

### PREGNANCY

- Word-of-mouth research for OB-GYN with VBAC specialty and low C-section rate
- Self-managing anxiety throughout pregnancy
- Concerned about preparing for return to work transition

### POST-PARTUM

- Breastfeeding struggles, including poor latch and undersupply
- Postpartum pelvic pain unaddressed
- Experiencing symptoms of a mood disorder prior to 6 week postpartum check-up

### RETURN TO WORK

- Anxiety about pumping at work
- Stress impacting relationship with partner
- Unable to continue breastfeeding due to work travel
- Feeling isolated as a working mother





## Case study - *dad as primary caregiver*

Being a two-career household with a baby on the way, Michael and his wife decide that he'll take advantage of his company's generous paternity leave while she makes a quicker return to her high-demand job with lots of travel. Michael needs to learn to navigate his new reality as a first-time dad, full-time employee, and lead parent.

### PARTNER'S PREGNANCY

- Anxiety about parental leave
- Lacking resources for supportive partnering
- Word-of-mouth to find pediatrician

### POST-PARTUM

- Significant time spent researching childcare options
- Sleepless nights with the baby waking frequently
- Partner in denial about postpartum mood disorder

### RETURN TO WORK

- Stress about returning to work after taking full parental leave
- Partner struggles with breastfeeding and pumping after returning to work

What are the implications  
for employers?





## Inclusive fertility benefits are a growing priority

### **IVF, Adoption and Surrogacy are continuing to increase in popularity**

- In addition to impact on wellbeing, employees face financial, legal and time management burdens
- Support is core to meeting diversity and inclusion goals

### **Infertility is the silent epidemic**

- Physical, mental and emotional toll affects resilience and productivity
- Coordination of care, mental health support, and supportive manager training are essential services

### **Millennials are planning ahead with egg freezing**

- Investing in egg freezing support attracts and retains young talent and can reduce IVF costs down the line



## Modern maternity care is a team effort

### **High risk pregnancies require high touch care**

- Team-based care model – including high-risk OB-GYNs, nutritionists, doulas and other specialists – along with better patient education, can improve outcomes

### **More than half of women experience a maternal mood disorders**

- Postpartum depression screenings essential
- Perinatal and postpartum mental health support is core to a quality care experience

### **Specialty care is more accessible via telehealth**

- Women can access quality specialty care in rural “healthcare deserts”





## Employers need to be all in on supporting working parents

### **Successful return-to-work transition begins at pregnancy**

- Employees need access to resources such as manager communication and leave planning
- Mental health specialists and career coaches can alleviate stress and anxiety

### **Managers can have a major impact on employee retention**

- Manager training should focus on communication and planning for every stage of family planning, pregnancy, leave and return to work

### **Workplaces should be breastfeeding-friendly**

- Employers need ensure lactation areas are clean and accessible
- Leadership sets the tone for creating a welcome culture for pumping mothers
- Breastmilk shipping is an important benefit for traveling mothers

Modern solutions to meet the needs of  
an evolving workforce





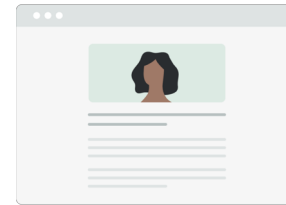
Maven has a three-pronged approach  
to drive best-in-class engagement and outcomes



On-demand  
practitioners



24/7 care  
coordinator



Community  
and content





**Kaitlyn Hamilton, Maven Care Coordinator**

## 24/7 Care coordinator:

*Listens and steers you in the best direction*

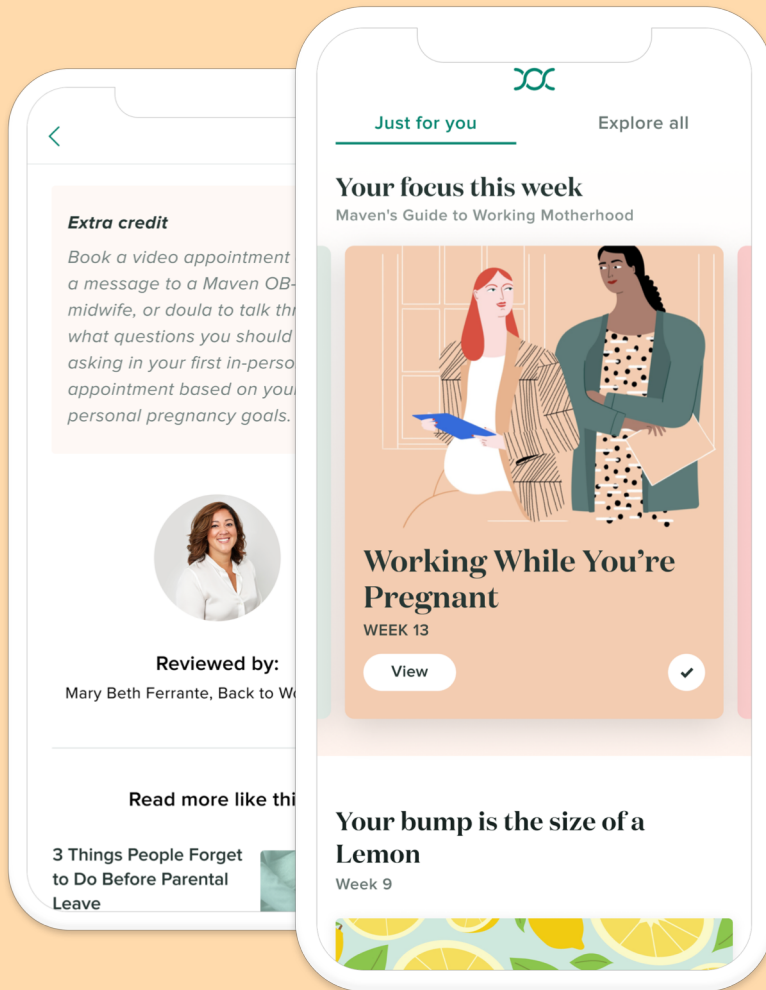
- Compassionate care: Master's degrees in social work or patient advocacy background.
- Steer patients to quality care on and off Maven, reducing downstream costs:
  - Referrals to high quality fertility clinics (single embryo transfer, low number of cycles) and OB-GYNs (low C-section and NICU rates)
  - Recommendations to care that is often missed at doctor's visits (mental health, physical therapy)
- Unlock value from existing benefits
  - Seamless handoffs between benefit programs



## On-demand practitioners:

*Every type of care in one place*

- Largest custom network in women's health:
  - 1400+ providers in more than 20 specialties
  - 44+ languages spoken
  - Specialized in LGBTQI+ health
  - 4.9/5 star rating across 75,000+ appointments
- Unlimited access, on your schedule:  
Video chat or message with practitioners anytime you need to, day or night

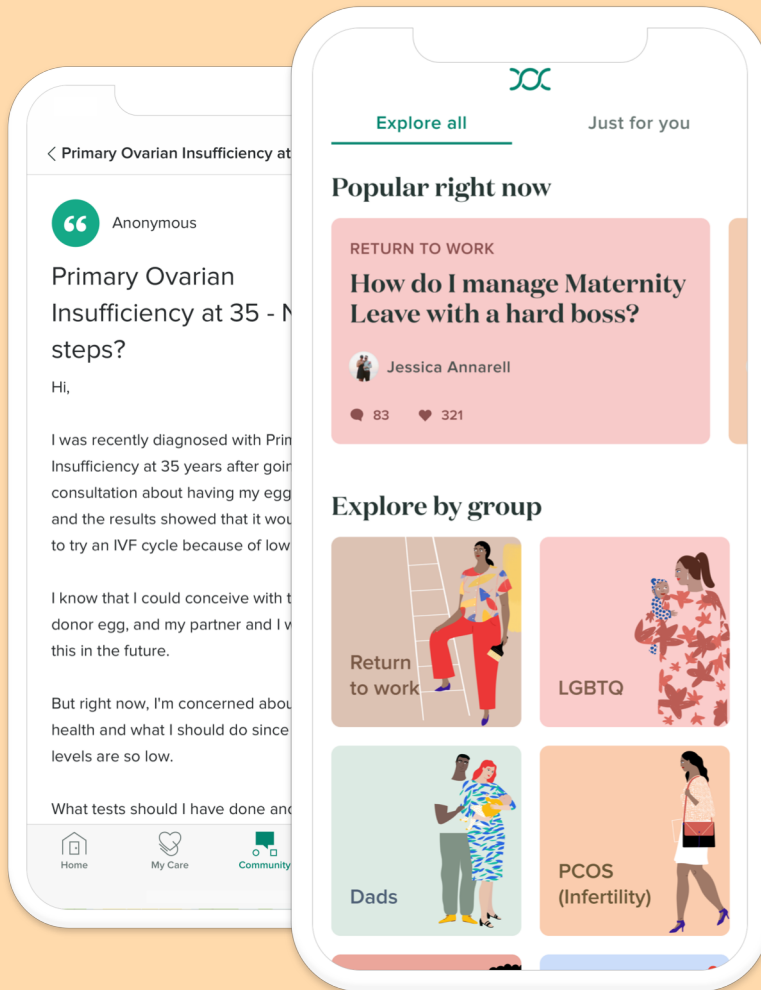


## Content:

### *Weekly programming to prep employees for working motherhood and fatherhood*

#### A 61-WEEK PREP COURSE WRITTEN BY MAVEN PRACTITIONERS

- Covers 9 months of pregnancy and 6 months of postpartum/return to work
- Targeted content based on health profile, including high risk
- Written by practitioners who you can then book appointments with, creating a holistic experience
- Covers topics often missed at doctor's appointments: Postpartum depression screenings, childcare support, manager communication, and much more



## Community:

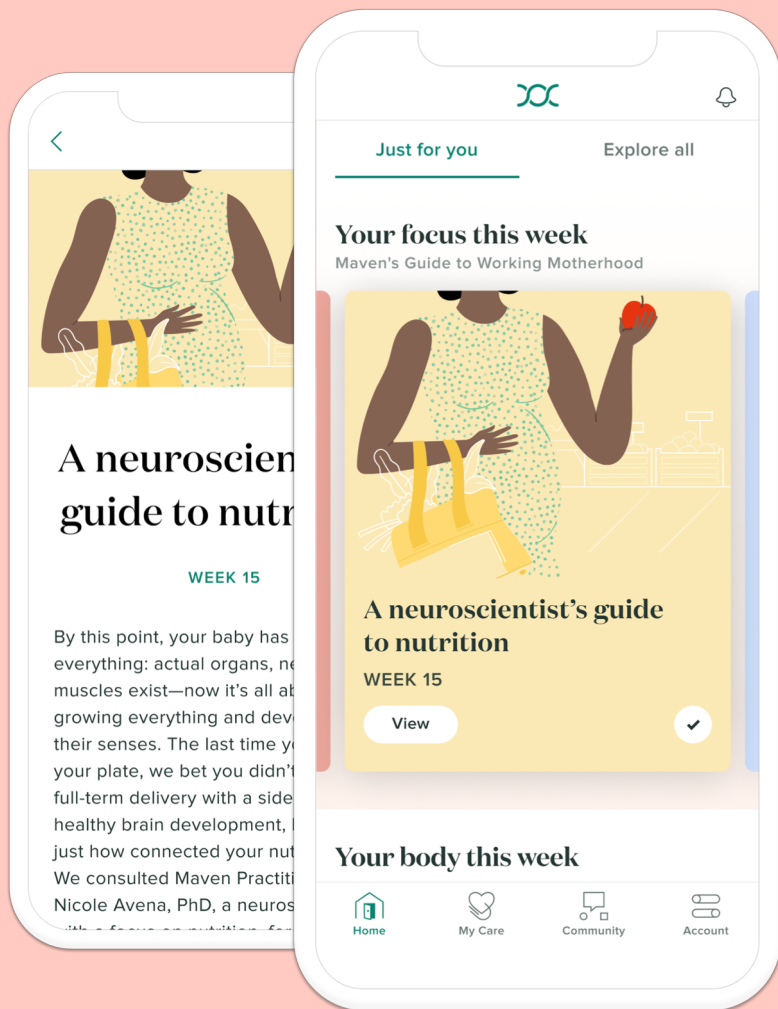
*A powerful combination of people just like you and practitioners so that members get the most honest and accurate support*

- Community forums tailored to your personal journey
- Ask a question and get honest responses from others who have experienced something similar
- Search for a specific topic to see what others have posted
- All communities are moderated by Maven practitioners so that only the most accurate information is given

Better support drives  
better outcomes







Maven sees high engagement and satisfaction from members

75%

Average program enrollment in year 1

70+

Average in-app touch-points per member

3+

Average provider network interactions per month

70

NPS score

## Maven's high-touch clinical services model reduces costs, retains talent

90%

**Maven members had the delivery experience they wanted**

Promote healthy births, reduce C-sections, identify high-risk pregnancies

90%

**Maven members returned to work on time**

Reduce attrition and improve employee resiliency

1 in 4

**Maven members sought mental health support**

Reduce in-person mental health visit, improve productivity and emotional wellness

## Maven delivers quantifiable value to its clients



### CASE STUDY: SNAP INC.

#### SITUATION

In a war for talent, Snap Inc. wanted the market to understand their focus on family values. Also, with so many millennials, they wanted to introduce a fertility benefit and were concerned about rising maternity costs.

#### ACTION

Maven rolled out in Feb 2017 and helped Snap Inc. support working parents. They started with maternity-only, and as Maven innovated, Snap was able to bring all products onboard to stay ahead: Maven Fertility, Maven's International offering, Maven Breastmilk Shipping

#### RESULT

- 95% enrollment
- 120 avg touchpoints per user per program (n=95 members)
- 20 provider-member interactions

"The team at Maven took time to understand our population and geared their communication and outreach programs accordingly. We really care about our employees and **Maven really cares about delivering amazing service, so it was a good match.**"

**SNAP INC, HEAD OF HR**

Thank you!

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