We want every person to have a healthy and safe pregnancy and delivery, leading to the best start for newborns.

Health Outcomes
We know that infants born at full term (at least 39 weeks) have the best health outcomes. For over thirty years, the American College of Obstetricians and Gynecologists has advised physicians not to perform “Early Elective Deliveries,” which is defined as a medically induced delivery prior to 39 weeks gestation for no medical reason. Despite this professional guidance, one in ten babies in the United States is born through an Early Elective Delivery, either by induction or Cesarean section.

Potential Risks
Data strongly suggest that Early Elective Deliveries carry significant risks for babies. Early Elective Deliveries increase the chance the baby will be admitted to the neonatal intensive care unit, resulting in longer stays and higher costs. According to the March of Dimes, babies continue to grow throughout the last weeks of a pregnancy, with brain, lungs, and liver continuing to develop in the last week. The final weeks of pregnancy are also essential for a baby to reach a healthy birth weight.

Additionally, an unsuccessfully induced labor can result in complications for the pregnant person, including the need for a Cesarean section, which can carry increased risk of infection, bleeding, and other medical complications.

Thirty-Nine Weeks
In order to keep babies as healthy as possible, it is important not to schedule delivery before thirty-nine weeks if there is no medical concern for the pregnant person or baby. Those final weeks of pregnancy are important for babies’ development.

In order to stop the practice of Early Elective Deliveries, New Jersey law now says that the State Health Benefits Program, School Employees Health Benefits Program, and New Jersey Medicaid will not pay medical providers and hospitals to deliver babies before thirty-nine weeks if there is no medical reason for the delivery. This does not include spontaneous early births or births that were scheduled for a medically-indicated reason.

For more information, please reach out to our Senior Policy Advisor, Kate Shamszad, at kshamzsad@njhcqi.org.