Keeping Care Close to Home

RURAL MATERNAL HEALTH CASE STUDY

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Maniilaq Health Center | Kotzebue, Alaska

Caring for Families Across the Arctic

The Landscape

Located more than 500 air miles north of Anchorage and above the Arctic Circle, Maniilaq Health Center serves some of the most geographically isolated communities in the U.S. Across Northwest Alaska, 11 villages rely on Maniilaq Association, a tribally-governed health system representing 12 Alaska Native tribes, as the region's sole provider of healthcare. Approximately 85% of the population served is Alaska Native Inuit, with some villages having more than 95% of their population identifying as Alaska Native Inuit. The Maniilaq Health Center, a 17-bed critical access hospital, in Kotzebue serves as the healthcare hub for the area, providing primary care, behavioral health, dental care, emergency services and public health programs throughout the region.

Maternal care here presents unique challenges, particularly for women in remote villages. These villages are only reachable by plane, which makes access to outside care dependent on weather conditions, available flights and coordination across multiple care teams.

Families consistently express a desire to receive care closer to home from a healthcare system that understands their language, culture, traditions and communities. That trust forms the foundation of Maniilaq's maternal care strategy.

Maniilaq has built a model that emphasizes strong prenatal care, close partnerships with village-based providers and seamless coordination with higher levels of care when needed. Leaders believe that preserving local maternity services is essential to sustaining the broader maternal care infrastructure that supports families throughout pregnancy and postpartum.



At a Glance

- **Health System:** Maniilaq Association
- **Hospital:** Maniilaq Health Center
- **Beds:** 17
- **Counties served:** Northwest Arctic Borough
- **Annual births:** 27
- **Unique Factor:** No road system connecting villages; transportation relies primarily on air travel

A Workforce Built for Remote Care

Certified nurse-midwives (CNMs) are the cornerstone of maternal care at Maniilaq. Women's health and obstetric services are provided almost entirely by CNMs working in partnership with village-based primary care providers and specialists at Alaska Native Medical Center (ANMC) in Anchorage.

Their role extends well beyond prenatal visits. CNMs provide gynecologic care, manage early pregnancy complications, coordinate postpartum follow-up and serve as a 24-hour clinical resource for providers across the region. When questions arise in one of the remote villages, local clinicians can quickly connect with a Maniilaq CNM for guidance on pregnancy and women's health concerns. Women receive specialized

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support throughout pregnancy regardless of where they live, while village providers have access to the expertise needed to provide safe, coordinated care close to their patients' homes.

Sustaining this model requires a workforce prepared for remote practice. Maniilaq recruits experienced CNMs who are comfortable practicing independently while collaborating closely with specialists hundreds of miles away. Many work on rotational schedules, spending several weeks in Kotzebue before returning home, while others are based in Kotzebue full time.



In Northwest Alaska, providing care depends as much on logistics as it does on clinical expertise.

Partnerships with ANMC further strengthen this workforce model. CNMs and nurses periodically rotate through Anchorage's higher-volume obstetric units to maintain clinical skills and gain experience managing complex cases. This reciprocal relationship helps clinicians gain competencies while ensuring rural patients continue to benefit from experienced providers.

In addition to strong partnerships among providers, trusting relationships between patients and clinicians are fundamental to high-quality maternal care. Those relationships are built on a deep understanding of the communities being served — their culture, communication styles, traditions and lived experiences. Positive patient relationships help providers build trust and tailor care to local needs while encouraging women to seek and remain engaged in care throughout pregnancy and postpartum.

Coordinating Care in the Arctic

To complement its hub-based model, Maniilaq brings maternal care directly into the communities it serves. CNMs routinely travel to villages throughout the region to provide prenatal care, gynecologic services and women's health screenings. Smaller villages receive outreach visits at least twice each year, while larger communities are served more frequently.

These visits rely on strong partnerships with community health aides and local clinic staff. Local healthcare professionals maintain trusted relationships with families and communicate pregnancy-related care back to the Maniilaq maternal health team. This connection allows women to receive much of their care close to home while remaining linked to Maniilaq's broader network of maternal health expertise.

In Northwest Alaska, providing care depends as much on logistics as it does on clinical expertise. Dedicated maternal health case managers help make this possible by tracking every pregnancy across the region, coordinating travel and specialty appointments, communicating with village clinics and helping locate patients when phone service or other communication is unreliable.

Case managers help ensure women remain connected to prenatal services throughout pregnancy by anticipating logistical barriers before they become missed appointments or delayed care. Together, village outreach and care coordination create a comprehensive maternal care model that reaches women where they live.

Connecting to Higher Levels of Care

Maniilaq has designed its maternal care around ensuring women receive the right care in the right place at the right time. Because Maniilaq does not have surgical obstetric services, patients with prior cesarean deliveries, significant medical conditions or anticipated complications are assessed early on and referred to ANMC in Anchorage for delivery. Of the

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approximately 150 pregnancies managed across the region each year, about 20% result in local deliveries. The remainder receive prenatal care close to home before transitioning to Anchorage when higher-level services are needed.



Women at increased risk are identified early through multidisciplinary maternal health huddles, where care teams coordinate referrals, specialty consultations, travel and lodging weeks before delivery. Many relocate to Anchorage around 36 weeks gestation, allowing them to establish care before labor begins while avoiding emergency transfers later in pregnancy. Alaska Medicaid covers the cost of medically necessary travel and lodging for the expectant moms, which is crucial for them to access the appropriate level of care. "So many critical access hospitals stand as an island … and don't have that connectedness with the higher level of care like we have," said Robert Onders, M.D., chief medical officer at Maniilaq Medical Center. Many patients also view Maniilaq and ANMC as part of a single, trusted system of care rooted in their communities.

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The close relationship between Maniilaq and ANMC comes from longstanding partnerships with specialists. CNMs at Maniilaq and primary care providers consult with obstetric specialists at ANMC throughout pregnancy, transfer patients when appropriate and continue collaborating after referral. Specialists also provide ongoing teleconsultations and travel to the region for quarterly in-person clinics, strengthening relationships with local providers, building local expertise and helping women remain connected to coordinated care across the maternal care continuum.

Sustaining Access

Maintaining local delivery services is a critical mission for Maniilaq. While only about 1 in 5 women deliver in Kotzebue, Dr. Onders believes preserving even a modest local delivery program strengthens the overall maternal care infrastructure. Local deliveries respect maternal choices through shared decision making, help sustain prenatal care engagement, preserve provider expertise and reinforce the relationships and systems that support women throughout pregnancy. The organization has built a system tailored to the realities of the Arctic — one that relies on trusted CNMs, community-based prenatal care, coordinated referrals, reliable transportation and strong partnerships across the continuum of care. These strategies have enabled Maniilaq to sustain local maternal care despite low birth volumes, extreme geographic barriers and persistent workforce challenges.

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Explore the **Keeping Care Close to Home: A Rural Maternal Health Toolkit** and more case studies at **www.aha.org/ruralmaternal**

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