



12 Months Continuous Care Postpartum Supports Infants & Mothers



Every year, women in Ohio die preventable deaths due to complications in pregnancy or in the weeks and months after giving birth. The United States is the only industrialized nation with a maternal mortality rate that is rising - increasing 26% between 2000 and 2014. According to CDC figures, the death rate between 2012 and 2016 for pregnant women in Ohio was 19.2 out of 100,000 births, ranking Ohio 27 out of 47 states that report this data. In Ohio, the Black infant mortality rate in 2015 was 2.6 times the rate for White babies, and Black women in the United States are 3 times as likely to die from pregnancy-related causes as their White counterparts. This, combined with the disproportionate impact the COVID-19 pandemic is having on

communities of color, underscores our current system is not working for all Ohio mothers and children. In fact, Ohio's Pregnancy-Associated Mortality Review Panel (PAMR) recently published a report showing that over half the deaths of women who were pregnant or who died within one year of pregnancy were preventable from 2008-2016.

Factors that contributed to each death were broken down into three categories:

- Provider level factors such as inadequate screenings or risk assessments, and lack of continuity of care;
- System of care which includes, barriers to access, such as insurance, provider shortages, or transportation; and

- Patient or family factors like chronic disease, lack of knowledge, non-adherence to medical advice, substance use disorder, and mental health conditions.

Each of these factors could be positively impacted by allowing new mothers to continue to access Medicaid benefits for 12 months after giving birth. Ensuring that women who have lower incomes have continuous coverage after pregnancy support improvements in infant and maternal outcomes.

Quick Ohio Medicaid Facts:

Covers pregnant women up to 200% of Federal Poverty Level (FPL) for prenatal care, childbirth and delivery services, and other medical care.

2017, 52% of Ohio births were covered by Medicaid.

Medicaid provides services like transportation to appointments, referral to the WIC (Women, Infants, and Children) program, the Help Me Grow program, education on baby care, and referrals to other services.

However, federal Medicaid law only requires this coverage be available until 60 days after the end of pregnancy. After that period, states can choose whether to extend coverage.

12 Months Continuous Care Cont'd



Currently, Ohio cuts off Medicaid eligibility and access to new moms 60 days after birth.

According to a study by the Urban Institute, roughly half of all uninsured new mothers reported that losing Medicaid or other coverage after pregnancy was the reason they were uninsured. Another one-third of new moms who lost Medicaid were recovering from a cesarean section, and just over 25% reported being depressed in the months after giving birth, with higher rates among women of color and women who have low-incomes.

This time of pandemic has created a unique opportunity to study the impact of continuous coverage for new mothers. Due to the public health emergency, states are keeping individuals enrolled in Medicaid. At this point in time, women who have given birth in

Mid-March, who may have otherwise been disenrolled in May have continued their participation in the program. This Department of Medicaid can leverage this situation to study health outcomes of these new moms and babies and the associated expenditure data.

Medicaid is in a unique position to impact the long-term physical and mental health of new mothers. States across the country are taking action to ensure that all mothers are able to access the care they need in the first year of their baby's life.

California: Currently considering legislation to extend Medicaid coverage for a year for any individual who is pregnant and diagnosed with a mental health condition.

Missouri: Policymakers submitted a 1115 waiver request that grant a one

year Medicaid extension for postpartum women in need of opioid treatment services (similar to Ohio). The postpartum period can also be a particularly vulnerable time for women to relapse, due to compounding pressures of being a new mother paired with the loss of insurance and access to care.

North Carolina: A new pilot program allows the use of Medicaid funds to pay for non-medical interventions, such as food or housing assistance for some beneficiaries including high-risk, pregnant women.

Given Medicaid's large role in covering women while they are pregnant, an extension of Medicaid coverage to women for the full year after birth could fill some of the gaps in health care that new mothers face.

Further, there is a growing body of research that Medicaid coverage of children, and of their mothers during pregnancy and in the months after birth, is associated with improved health, reduced disability, greater educational attainment, and better financial outcomes when they grow up to be adults.

Children's Defense Fund-Ohio recommends Ohio expand Ohio's Medicaid program to allow women to maintain health coverage for 12 months postpartum to improve their health and that of their newborns.

For more information, please contact Kelly Vyzral, Senior Health Policy Associate kvyzral@childrensdefense.org