MACPAC Public Comment on Postpartum Extension

Good Afternoon, my name is Sara Jann. I am the Director of Policy & Advocacy at Maternity Care Coalition in Philadelphia. I also lead the Maternal Health Campaign for Pennsylvania's Prenatal-to-Three Collaborative. I've come today to urge the Commission to take broad and bold action in your recommendations on Postpartum Coverage.

Just a few days ago Pennsylvania's Department of Health release a report on Pregnancy- Associated Death from 2013 to 2018. With this report we learned that 58% of maternal deaths during this period occurred 43 days to 365 days postpartum. We also learned of the pregnancy-associated deaths with payment information for the birth, (53%) of the births were paid by Medicaid. This is staggering considering that only 32% of all births in Pennsylvania during this period were paid for by Medicaid. Finally, we learned Racial and ethnic disparities persist among pregnancy-associated deaths- Black women accounted for 14% of the births in Pennsylvania between 2013 – 2018, 3 but represented (23%) of the pregnancy-associated deaths during this time period. As our Maternal Mortality Review Committee reviews continues to review cases, we will learn more about the contours of the maternal health crisis in Pennsylvania, but we can't wait for another report to act.

In Pennsylvania, the PA Prenatal-to-Three Collaborative is advocating for action at the state and federal level to extend postpartum coverage. We've advocated that the state submit a Section 1115 Waiver application to CMS to extend the postpartum period from 60 days to one year following the end of pregnancy. We also wrote to our U.S. senators this fall urging them, as members of the Senate Committee on Finance, to prioritize increasing access to coverage by extending pregnancy Medicaid for at least one year after the end of the pregnancy for post-partum care. We demonstrated in our letter the broad support for this policy in PA. Signers included the Pennsylvania Coalition of Medical Assistance MCOs, the Pennsylvania Chapter, American Academy of Pediatrics, the Children's Hospital of Philadelphia and Einstein Medical Center. Even our current Secretary of Human Services, Teresa Miller and our former Secretary of Health, Dr. Rachel Levine signed on.

As you can see, we have a broad base of support for this policy in Pennsylvania, but cost continues to be an impediment to moving forward in Pennsylvania. By recommending that Congress provide for the highest possible FMAP rate and provide clear expectations for states, this Commission can precipitate a necessary first step in addressing our maternal health crisis. In doing so, the Commission can help make an investment keeping moms alive, the health and prosperity of families and in a more equitable and effective health care system.