

November 6, 2020

VIA ELECTRONIC SUBMISSION

Attn: Lynnette Rhodes  
Georgia Department of Community Health  
2 Peachtree Street, NW  
Atlanta, GA 30303

Re: Georgia Section 1115 Demonstration Waiver application to extend postpartum Medicaid coverage

Dear Ms. Rhodes:

Thank you for the opportunity to comment on Georgia's "Extension of Postpartum Services" Section 1115 Demonstration Application. Georgians for a Healthy Future appreciates the attention that the Georgia General Assembly and the Department of Community Health have brought to the issue of Georgia's high maternal mortality rate and the urgent need to address it through state policy.

Georgians for a Healthy Future (GHF) is a statewide, non-profit consumer health advocacy and policy organization. Our organization's vision is of a day when all Georgians have access to the quality, affordable health care they need to live healthy lives and contribute to the health of their communities. We believe that continuous, quality health coverage is an important resource that promotes the health and wellness of Georgians, especially for those who are low-income and populations who experience disparate health outcomes.

**We submit these comments in qualified support of the state's proposal with some additional suggestions.**

There is a critical need in our state to improve maternal mortality and morbidity. The proposal aims to achieve this goal by extending Medicaid coverage from 60-days postpartum to six months for women with incomes at or below 225% of the federal poverty level (FPL), providing greater continuity and access to care through the postpartum period. However, we are concerned that the proposal does not go far enough, especially given our state's failure to expand Medicaid up to 138 percent FPL.

As Georgia's leading non-partisan statewide health policy and advocacy organization, we support the extension of postpartum coverage to six months, and urge the state to consider extending coverage further to twelve months as well as expanding Medicaid in order to optimize the benefits and access to care for women throughout the postpartum period and beyond.

**The proposal would improve access to necessary care and work to reduce Georgia’s high maternal mortality rates especially among women of color.**

Medicaid plays a vital role in ensuring the health of mothers and their babies by providing coverage to pregnant women before, during, and up to 60-days after delivery. In Georgia, over half of births are covered by Medicaid.<sup>1</sup> However, the needs of women extend beyond delivery, and even beyond the current 60-day cutoff for postpartum coverage. The 60-day cutoff that women with Medicaid pregnancy coverage experience may affect their ability to receive necessary postpartum care.

With limited health coverage options, low-income women face uninsurance or more expensive coverage after the 60-day cutoff which may reduce their access to important treatments, appointments, and medications. A recent study tracking insurance rates in the six months after childbirth found 55 percent of women with Medicaid or CHIP coverage at time of delivery experience at least one month of uninsurance in that time period.<sup>2</sup> These gaps in coverage are more likely in Georgia where the parent eligibility level is only 35 percent FPL (\$634 per month for a family of three); this means once low-income women reach the 60-day cutoff they are at risk of having no insurance, especially those who fall in the Medicaid coverage gap (between 35 percent and 100 percent FPL).

By eliminating the 60-day cutoff, the proposal increases the likelihood of women receiving postpartum care and reduces the chances of becoming uninsured in the six months following delivery. Women would experience a greater continuity of care, allowing them to maintain recommended check-ups and necessary treatments for a longer period when they are still at risk for postpartum complications. Complications, which include cardiomyopathy and embolism, can occur up to a year after giving birth.

While postpartum visits can help to reduce the risk of pregnancy-related complications, approximately 40 percent of women with Medicaid coverage do not receive a postpartum visit.<sup>3</sup> With four additional months to access postpartum care, women will be more likely to receive their necessary check-ups and may also have an opportunity to address other health needs that could result in complications. Furthermore, the proposal would enable the state to align with the recommendations for postpartum care from the American College of Obstetricians and Gynecologists and other health professional, which emphasize the importance of the “fourth trimester” and care beyond the standard 6-week check-up.<sup>4</sup> The state should also make sure that care management organizations (CMOs) are held accountable to ensure they are meeting federal requirements and high performance for postpartum women.

The proposal’s extension of postpartum coverage is particularly significant given the high number of maternal deaths nationally and in Georgia. Pregnancy-related deaths, or a death that occurs within one year of the end of pregnancy from pregnancy complications, occur up to a year after delivery. Data from the Centers for Disease Control (CDC) indicate one third of

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<sup>1</sup> Kaiser Family Foundation, “Births Financed by Medicaid,” <https://www.kff.org/medicaid/state-indicator/births-financed-by-medicaid/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>.

<sup>2</sup> Jamie R. Daw, *et al.*, “Women in the United States Experience High Rates of Coverage ‘Churn’ in Months Before and After Childbirth,” *Health Affairs*, April 2017, <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2016.1241>.

<sup>3</sup> Alison Stuebe *et al.*, “Extending Medicaid Coverage for Postpartum Moms,” *Health Affairs Blog*, May 2019, <https://www.healthaffairs.org/doi/10.1377/hblog20190501.254675/full/>.

<sup>4</sup> The ACOG Committee on Obstetric Practice, “Optimizing Postpartum Care: Committee Opinion,” May 2018, <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2018/05/optimizing-postpartum-care#s8>.

pregnancy related deaths happened one week to one year postpartum.<sup>5</sup> Of all pregnancy-related deaths, almost 12 percent occurred between 43 days and one year postpartum – 62 percent of these were determined to be preventable.

Georgia has similarly alarming maternal mortality rates, which are even worse in the postpartum period than the national trend. Our state had 101 pregnancy-related deaths in a two-year period from 2012-2014. Of these, 27 percent occurred 43 days or more after delivery.<sup>6</sup> By extending postpartum coverage to six months, the state would ensure no disruption of care and a lower likelihood of women experiencing insurance “churn” or becoming uninsured, which helps address Georgia’s high maternal mortality.

The proposal would also help address the stark racial disparities in maternal outcomes that persist in our state. Nationally, black women are three to four times more likely to die from pregnancy-related complications than white women. Black women face similarly high maternal mortality rates in Georgia, with 60 percent of pregnancy-related deaths occurring among black, non-Hispanic women between 2012 and 2014; this means black women are over three times more likely to die from a pregnancy-related cause than white, non-Hispanic women.<sup>7</sup> The proposal to extend postpartum coverage for a longer period would improve the number of maternal deaths, which disproportionately affect women of color, by ensuring access to necessary care throughout the postpartum period.

### **The proposal would be beneficial for Georgia’s children as well.**

Improving coverage for mothers by removing the 60-day cutoff ensures healthier parents, which positively impacts their children. Ample evidence has shown maternal depression is a significant health issue, affecting mothers and their entire family. According to Pregnancy Risk Assessment Monitoring System (PRAMS) data, one in eight women in Georgia reported having postpartum depressive symptoms.<sup>8</sup> Postpartum depression symptoms can last well beyond 60 days after delivery. A recent study from the National Institute of Health (NIH) found that postpartum symptoms may persist up to three years after giving birth.<sup>9</sup>

Untreated postpartum depression can result in a number of long-term health consequences for mothers and their children. Postpartum depression can affect parent-child bonding as well as increase the likelihood of missing routine pediatric and well-child visits.<sup>10</sup> Research shows healthy parents are critical for children’s healthy cognitive and social-emotional including reducing the effects of adverse childhood experiences.<sup>11</sup> The proposal to extend postpartum

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<sup>5</sup> Emily E. Petersen, *et al.*, “Vital Signs: Pregnancy-Related Deaths, United States, 2011-2015, and Strategies for Prevention, 13 States, 2013-2017,” *MMWR and Morbidity and Mortality Weekly Report*, May 2019, [https://www.cdc.gov/mmwr/volumes/68/wr/mm6818e1.htm?s\\_cid=mm6818e1\\_w](https://www.cdc.gov/mmwr/volumes/68/wr/mm6818e1.htm?s_cid=mm6818e1_w).

<sup>6</sup> Georgia Department of Public Health, “Maternal Mortality Report 2014,” March 2019, <https://dph.georgia.gov/document/publication/maternal-mortality-2014-case-review/download>.

<sup>7</sup> *Ibid.*

<sup>8</sup> Centers for Disease Control, “Prevalence of Selected Maternal and Child Health Indicators for Georgia, PRAMS, 2016-2017,” <https://www.cdc.gov/prams/prams-data/mch-indicators/states/pdf/2018/Georgia-508.pdf>.

<sup>9</sup> Diane L. Putnick, *et al.*, “Trajectories of Maternal Postpartum Depressive Symptoms,” *Pediatrics*, October 2020, <https://pediatrics.aappublications.org/content/early/2020/10/12/peds.2020-0857>.

<sup>10</sup> Mental Health America of Georgia, “Screening for Perinatal Depression: A Quick Reference Guide for Healthcare Professionals,” <https://dbhdd.georgia.gov/document/publication/screening-perinatal-depression-quick-reference-guide-healthcare-professionals/download>.

<sup>11</sup> Georgetown University Center for Children and Families, “Healthy Parents and Caregivers are Essential to Children’s Healthy Development, December 2016, <https://ccf.georgetown.edu/wp-content/uploads/2016/12/Parents-and-Caregivers-12-12.pdf>.

coverage to six months allows women to continue to receive Medicaid services including services for mental health as well as breastfeeding support and chronic disease management which result in healthier parents. In addition, research has found that parents having Medicaid coverage is associated with an increased probability of their children receiving annual well-child visits.<sup>12</sup>

**The proposal does not fully address the coverage gaps that exist for women in the postpartum period and beyond.**

While extending postpartum coverage to six months it's a positive step towards reducing maternal mortality and improving maternal health, the proposal does not go far enough in addressing the gaps in coverage that exist in the postpartum period and beyond. Expanding Medicaid to 138 percent FPL would best serve the state, and more specifically, the problems that the proposal aims to address. Currently, Georgia's parent eligibility limit is 35 percent FPL. This means that once women reach six months postpartum, many are likely to lose Medicaid coverage and become uninsured, despite postpartum care needs that extend up to a year.

By expanding Medicaid, the state would provide mothers with greater continuity of care to enable receipt of critical postpartum care and would ensure fewer coverage gaps after six months of delivery, resulting in healthier parents, healthier children, and healthier families. At a minimum, however, the state should consider extending postpartum coverage to 12 months. The American Medical Association, among other health professionals, support extending Medicaid coverage to 12 months postpartum.<sup>13</sup> Extending postpartum coverage to 12 months would better ensure women receive all essential and recommended care up to a year after delivery.

Thank you for the consideration of our comments. If you have any questions, please contact Laura Colbert, Executive Director, at 404-890-5804 or lcolbert@healthyfuturega.org.

Sincerely,



Laura Colbert  
Executive Director  
Georgians for a Healthy Future

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<sup>12</sup> Maya Venkataramani, Craig Evan Pollock, and Eric Roberts, "Spillover Effects of Adult Medicaid Expansions on Children's Use of Preventative Services," *Pediatrics*, December 2017, <https://pediatrics.aappublications.org/content/140/6/e20170953>.

<sup>13</sup> American Medical Association Policy Directive, "Extending Medicaid Coverage for One Year Postpartum," 2019, <https://policysearch.ama-assn.org/policyfinder/detail/Extending%20Medicaid%20Coverage%20for%20One%20Year%20Postpartum%20D-290.974?uri=%2FAMADoc%2Fdirectives.xml-D-290.974.xml>; American College of Obstetricians and Gynecologists, "Policy Priorities: Extend Postpartum Medicaid Coverage," <https://www.acog.org/advocacy/policy-priorities/extend-postpartum-medicaid-coverage>.