

September 22, 2020

The Honorable Charles Grassley
Chairman
Committee on Finance
United States Senate
Washington, DC 20510

The Honorable Ron Wyden
Ranking Member
Committee on Finance
United States Senate
Washington, DC 20510

Dear Chairman Grassley and Ranking Member Wyden:

Maternal mortality and morbidity is a problem that plagues America and must be confronted. At 17.4 maternal deaths per 100,000 live births, the United States ranks last among similarly situated countries. For Black mothers that rate rises to 37.1 deaths per 100,000 live births.¹ American Indian and Alaskan Native mothers also face their own unique challenges that lead to higher than average maternal mortality rates.² This is unacceptable. We can and must do better. We appreciate the effort that the Senate Finance Committee is undertaking to study what is currently being done to address the problem and examine what changes can be made to the Medicaid program to expand the coverage and care that pregnant people enrolled in Medicaid receive. Medicaid pays for over 40 percent of the births in America and the improvements the Finance Committee makes in this area can have a wide and profound positive impact. As you know, several Senators have introduced bills on this topic that we urge you to draw from in developing your policy recommendations.

One of the most important factors in access to care is coverage. It has been well documented that when people gained access to Medicaid when the program was expanded under the *Affordable Care Act*, maternal mortality was reduced and both mothers and their babies had better health outcomes.³ Several bills seek to expand coverage for pregnant and post-partum people under Medicaid. Senator Bob Casey's Improving Coverage and Care for Mother's Act (S. 3443) provides Medicaid coverage for any woman who is pregnant and for up to one year post-partum. Senator Cory Booker's Maximizing Outcomes for Moms through Medicaid Improvement and Enhancement of Services (MOMMIES) Act (S. 1343) and Senator Durbin's Mothers and Offspring Mortality and Morbidity Awareness (MOMMA's) Act (S. 916) both

¹ Hoyert, D. & Miniño, A. (2020, January 30). *Maternal Mortality in the United States: Changes in Coding, Publication, and Data Release, 2018*. <https://www.cdc.gov/nchs/data/nvsr/nvsr69/nvsr69-02-508.pdf>

² Centers for Disease Control and Prevention. (2019, September 6). *Racial and Ethnic Disparities Continue in Pregnancy-Related Deaths*. <https://www.cdc.gov/media/releases/2019/p0905-racial-ethnic-disparities-pregnancy-deaths.html>

³ Searing, A. & Cohen Ross, D. (2019, May). *Medicaid Expansion Fills Gaps in Maternal Health Coverage Leading to Healthier Mothers and Babies*. <https://ccf.georgetown.edu/wp-content/uploads/2019/05/Maternal-Health-3a.pdf>

expand Medicaid and CHIP to cover post-partum care for one year. Pregnant people must have continuous coverage for at least one year post-partum and we urge the Finance Committee to include this policy in any legislation it develops.

Equally important to coverage is access to services. Under Medicaid, at certain income levels, many states only give pregnant people access to pregnancy related services, not the full range of health care any individual should be receiving, especially when pregnant. In three states, the level of services does not even meet the standards of minimum essential coverage.⁴ This is unacceptable. Failing to cover all services prevents pregnant people from getting care for other health conditions and comorbidities that can directly impact maternal health and the health of the child. In conjunction with this, Medicaid reimbursement rates have long lagged behind Medicare and commercial payers. This has made it difficult for beneficiaries to find providers. It is past time to bring Medicaid reimbursement rates more in line with other payors. To help states cover the costs of increased reimbursement rates, it is important for the federal government to increase the Federal Medical Assistance Percentage (FMAP) that states receive. Senator Casey's Improving Coverage and Care for Mother's Act seeks to address this and we ask the Committee to ensure beneficiaries have access to all services, not just the bare minimum, that Medicaid reimbursement rates are increased for these services and to increase the Medicaid FMAP for these services to 100%.

Access to coverage and services are two essential parts of the equation. A third is enabling professionals such as doulas, midwives and lactation consultants to provide services to Medicaid beneficiaries and to be reimbursed for these services. It has been documented that access to a doula helps improve health outcomes for both mothers and babies, especially in areas that lack other health care resources.⁵ Senator Casey's Improving Coverage and Care for Mother's Act, Senator Booker's MOMMIES Act, Senator Durbin's MOMMA's Act and Senator Harris' Black Maternal Health Momnibus Act (S. 3424) all include policies to expand access to doulas and other non-clinical professionals. We recommend the Committee include policies that will increase access to these essential professionals in any legislation it develops.

Given the staggering racial disparities in maternal health outcomes, we also must confront the persistent biases in our health care system to ensure that women of color, particularly Black and Indigenous women, have equal access to high-quality, culturally-competent maternity care. We ask the Committee to consider policies that help ensure all employees in maternity care settings – from health care providers to front desk staff and schedulers – receive ongoing, evidence-based bias and anti-racism training. Senator Harris' Black Maternal Health Momnibus Act and Maternal Care Access and Reducing Emergencies (CARE) Act (S. 1600), and Senator Durbin's MOMMA's Act all include models for incorporating bias training in maternity care settings.

⁴ Chen, A. & Hayes, E. (2018, September). *Q&A on Pregnant Women's Coverage Under Medicaid and the ACA*. <https://healthlaw.org/resource/qa-on-pregnant-womens-coverage-under-medicaid-and-the-aca/>

⁵ March of Dimes. (2019, January 30). *March of Dimes Position Statement Doulas and Birth Outcomes*. <https://www.marchofdimes.org/materials/Doulas%20and%20birth%20outcomes%20position%20statement%20final%20January%2030%20PM.pdf>

As you know, for years our states and local communities have served as laboratories of democracy and created local demonstrations that have improved maternal health and reduced maternal mortality. It is imperative that any legislation the Committee puts forth includes opportunities for states to continue this role. Senator Booker's MOMMIES Act, Senator Durbin's MOMMA's Act and Senator Harris' Black Maternal Health Omnibus Act and Maternal CARE Act all include local examples, such as a maternity care home demonstration project, that the Committee should review and draw from.

Finally, as we have seen over the past six months, telehealth has proven to be essential for millions of Americans isolated in their homes and unable to go see their doctor due to safety concerns during the COVID-19 pandemic. It also has the potential to transform access to maternal care for millions of pregnant people across America, particularly those who live in rural and other underserved areas. We ask the Committee to provide additional support and resources to help states implement telehealth services for maternity care under Medicaid. This should include covering equipment and devices that are necessary for providing maternal health services via telehealth, especially for beneficiaries who face financial barriers to paying out-of-pocket for basic health monitoring equipment.

In closing, we again commend you for your focus on this important issue and urge you to seize the opportunity to transform access to coverage and care for pregnant and post-partum patients. If done right, this effort can have a truly positive impact and reduce the United States' dismal maternal mortality and morbidity rate. We look forward to working with you on this issue in the weeks and months ahead.

Sincerely,

/s/

Robert P. Casey, Jr.
United States Senator

/s/

Cory A. Booker
United States Senator

/s/

Kamala D. Harris
United States Senator

/s/

Richard J. Durbin
United States Senator