



**Testimony to the House Committee on Health and Mental Health Policy
in Support of HBs 1468, 1616, 2120, and 2280**

From Bridget McCandless MD, President/CEO

Dear Chairman and members of the committee,

The mission of the Health Care Foundation of Greater Kansas City (HCFGKC) is to provide leadership, advocacy and resources to eliminate barriers and promote quality health for the uninsured and underserved. Since our inception fifteen years ago, HCF has dedicated over \$250 million toward health in our community. Through our funding of the safety net health system, we support nonprofits as they provide services that will produce better health, better care, and lower costs. Ensuring that low-income Missourians have access to insurance coverage is a key part of this work.

We are unable to attend the Health Care Policy hearing on February 7, 2018. As such, we are pleased to submit this letter as our testimony in support of House Bills 1468, 1616, 2120 and 2280. These bills would extend MOHealthNet benefits to new mothers from the current policy of 60 days postpartum to 12 or 24-months postpartum.

What is Missouri Medicaid's current coverage for pregnant and postpartum women?

Missouri's Medicaid program provides coverage for very low-income pregnant women (less than 185% of the federal poverty level or \$38,443 annual income for a family of three). This coverage extends to 60-days postpartum. After this time, a new mother would only be able to continue accessing Medicaid coverage if she is eligible under another category (i.e. disabled or a custodial parent making less than 18% of the federal poverty level). Each year, approximately 24,000 women lose their MO HealthNet coverage at 60 days postpartum.

Right now, in Missouri, there are roughly 21,000 pregnant women receiving Medicaid benefits. This is about 2.2% of all Medicaid beneficiaries. The average annual cost of covering pregnant women on Medicaid is about 2.3% of overall Medicaid expenditures.

Why does Missouri need to extend this coverage?

The year after a woman gives birth is critical for her recovery and her child's wellbeing. Babies are healthy when their mothers are healthy. Mental health treatment, access to family planning, and substance abuse coverage are common needs for new mothers and our current Medicaid system doesn't offer eligibility long enough to meet these important needs.

Mental Health Access

Postpartum depression is the most common complication of childbirth, affecting 15 percent of new mothers. Postpartum depression can manifest at any point in the first year postpartum and interfere with daily life and infant caregiving. Research shows that extending postpartum coverage results in better health for both mother and child, more stable relationships, and lower rates of child abuse and delinquency.

Family Planning

Medicaid is the payor for half of all births in Missouri. Connecting new mothers with family planning tools is another important element of postpartum health care. When new mothers receive the reproductive health care they need, we see increased birth spacing and reduced risks for poor birth outcomes, such as preterm birth and low birth weight, in subsequent births.

Substance Abuse Treatment

The looming opioid crisis only heightens the importance of caring for our state's pregnant and new mothers. According to a recent Missouri Hospital Association report, Missouri has seen a 538 percent increase in babies born addicted to opiates over the last ten years. Taking care of new mothers by connecting them with substance abuse services will produce better birth outcomes in subsequent pregnancies.

Emergency Room Utilization

Some women, particularly those with medically complex pregnancies, need closer monitoring postpartum. For example, women with gestational diabetes, preeclampsia, and gestational hypertension often need continued obstetrical and primary care following birth. Absent access to health care coverage, these women are more likely to present in the emergency room to receive the care they need.

Extending Medicaid benefits for pregnant women to at least one-year postpartum will result in better health outcomes for new mothers and their children. We respectfully urge the committee to cover as many new mothers as possible, especially for full mental and behavioral health services.