

The Honorable Charles Schumer
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Minority Leader
U.S. Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, DC 20515

May 20, 2021

Dear Majority Leader Schumer, Speaker Pelosi, Minority Leader McConnell, and Minority Leader McCarthy:

We are many of the major Medicaid managed care organizations (MCO) in the nation, along with our Medicaid MCO trade associations. As you know, the American Rescue Plan passed in March included a temporary five-year Medicaid state option for pregnant women to receive care for 12 months postpartum. We urgently request that Congress pass legislation this year to make this state option permanent. This provision, from the Helping Moms Act of 2020 (H.R. 4996), passed the House in 2020 with vast bipartisan support.

A major reason to make this Medicaid state option permanent is to improve health equity and address health disparities in maternal mortality. According to the U.S. Center for Disease Control's Pregnancy Mortality Surveillance System, considerable racial/ethnic disparities in pregnancy-related mortality exist. During 2014–2017, the pregnancy-related mortality ratios were:

- 41.7 deaths per 100,000 live births for non-Hispanic Black women.
- 28.3 deaths per 100,000 live births for non-Hispanic American Indian or Alaska Native women.
- 13.8 deaths per 100,000 live births for non-Hispanic Asian or Pacific Islander women.
- 13.4 deaths per 100,000 live births for non-Hispanic White women.
- 11.6 deaths per 100,000 live births for Hispanic or Latina women.

Permanent extension of this legislation is needed to address these massive disparities. Also, the improvement in health coverage will result in improved health outcomes and reductions in maternal mortality. In findings published in the journal *Women's Health Issues*, states that increased access to health coverage had 7.01 fewer total maternal deaths per 100,000 live births relative compared to states that did not have the increase in health coverage. Further,

when stratifying by race/ethnicity, increased coverage was significantly associated with 16.27 fewer maternal deaths among non-Hispanic Black women relative to their counterparts in states that did not increase coverage. Effects are additionally significant among Hispanic mothers, with increased coverage associated 6.01 fewer deaths per 100,000 live births relative to Hispanic women in states that did not extend coverage.

We applaud CMS' recent actions to approve Medicaid 1115 waivers in this area, but we believe that a permanent state plan option will provide states with a much easier and shorter administrative process to achieve the same goal.

We urge you to enact a permanent Medicaid state option for 12-month postpartum coverage for pregnant women to reduce disparities in maternal mortality, reduce maternal mortality, and improve health outcomes.

Sincerely,

Association for Community Affiliated Plans (ACAP)

America's Health Insurance Plans (AHIP)

Blue Cross Blue Shield Association (BCBSA)

Medicaid Health Plans of America (MHPA)

AlohaCare

AmeriHealth Caritas

Anthem, Inc.

CareFirst Blue Cross Blue Shield

CareOregon

Centene Corporation

Children's Community Health Plan (Milwaukee, WI)

Gateway Health

Health Plan of San Mateo (CA)

Health Care Service Corporation (HCSC)

Kaiser Permanente

L.A. Care

Tufts Health Plan