

The Legislature Should Finish the Job and Pass 12-Month Health Coverage for New Moms

Testimony to the House Appropriations Committee

Last session, with leadership from Speaker Phelan, Chair Frank, Rep. Rose and others, the Texas House passed HB 133 to provide 12 months of health coverage for new moms after childbirth, as recommended by the Maternal Mortality and Morbidity Review Committee and other experts.

The Senate reduced the bill to six months, and the Governor signed the bill. The bill has not been implemented because it requires a Medicaid waiver to obtain federal funds, always a slower and uncertain option. As a result, when Texas restarts Medicaid disenrollments at the end of the Public Health Emergency, Texas moms will once again be removed from health coverage when their baby turns two months old. Many experts expect that to start on February 1, 2023.

We urge the Legislature to finish the job and pass the 12-month maternal coverage option now available to states through a simple Medicaid State Plan Amendment (SPA). Since the federal government made this option easier than the waiver option that Texas pursued, two thirds of all states — including other southern states like Florida, Alabama, Georgia, and South Carolina — have either passed or implemented this option.

We urge budget-writers to include any necessary funding for 12-month postpartum coverage in the base budget for the next biennium.

Extending postpartum Medicaid coverage will promote health for mothers and babies.

A healthy childhood starts with healthy mothers and healthy pregnancies — and continues with access to postpartum care to catch medical issues early and promote wellbeing for parents and infants. Texas leaders across the political spectrum have focused on the first year after childbirth because it is so critical for the health of moms as well as their babies' health and development.

The Texas Maternal Mortality & Morbidity Review Committee (MMMRC) appointed by Governor Abbott has been sounding the alarm for years. One-third of maternal deaths in Texas occur between 43 days and one year

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after pregnancy, and the vast majority of maternal deaths are preventable. Pregnancy complications — such as postpartum depression, cardiac event, hemorrhage, infection, and dangerous blood clots — remain a serious concern in Texas, leading to long-term health issues for mothers and babies, pricey hospital stays or procedures, and higher costs to Medicaid and the state. In fact, the Texas MMMRC found that that "[m]ental disorders, including those associated with substance use disorder (SUD), were a leading underlying cause of pregnancy-related death and occurred most frequently between 43 days to 1 year postpartum."¹

When women cannot get the medical and mental health care they need, there are ripple effects and costs for the state, families, employers, and entire communities. One in four women of childbearing age is uninsured in Texas, which is a major barrier to health care access. Texas women with low incomes can get Medicaid coverage while they are pregnant, but before House Bill 133 was passed, Medicaid would cut off 60 days after pregnancy, leaving new moms uninsured at a pivotal time for their health and their baby's healthy development. Postpartum depression is one of the most common complications of pregnancy, and when left untreated, maternal mental health conditions are costly and have devastating impacts on parents and children. A 2021 Mathematica study found that failing to treat maternal mental health conditions costs Texas \$2.2 billion for one year of births due to productivity losses, child and behavioral and developmental disorders, and maternal health expenditures.²

Access to health insurance is key to addressing these challenges – and House Bill 133, 87th Legislature, Regular Session, 2021 sought to improve access by extending Medicaid health insurance for six months after pregnancy.

Extended postpartum coverage is <u>not</u> a reality for Texas mothers right now — and the timing and likelihood of an approved waiver to implement HB 133 is unclear.

Texas HHSC developed an amendment to the Texas Healthcare Transformation and Quality Improvement Program (THTQIP) under section 1115 of the Social Security Act to extend Medicaid eligibility for qualified pregnant women for a total of six months postpartum coverage. We endorsed this waiver amendment as an important first step.

However, recent reports suggest that the federal government is not expected to approve the Texas Medicaid waiver to implement HB 133 for six-month postpartum health coverage, although federal officials note they have not made a formal decision on the waiver. Texas chose the hard way to do this, applying for a Medicaid waiver. There is a much easier way to do it, called a State Plan Amendment (SPA).

The American Rescue Plan Act (ARPA) made it easier for states to implement 12-month postpartum coverage legislation through a SPA that doesn't require the long negotiation with the federal government. Under the easy SPA option, states request 12-month coverage and follow basic federal policy, and then it is essentially a quick, automatic approval by the federal government.

Dozens of other states, including southern states Florida, South Carolina, Georgia, and Louisiana, are doing the easy option, and Texas should too.

The Public Health Emergency may be ending soon — meaning Texas women will once again lose health coverage two months after pregnancy.

Fortunately, Texas has not restarted its policy of kicking moms off health coverage two months after the pregnancy. Under the COVID Public Health Emergency, states are receiving billions of dollars from the federal government and letting moms and kids stay enrolled in Medicaid health insurance³.

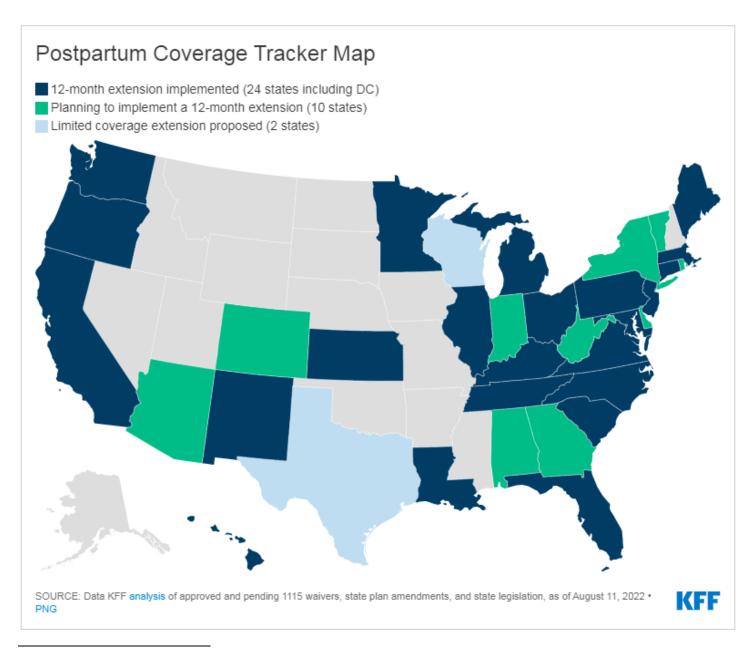
The federal government has signaled that it will continue the public health emergency until January, but many national partners believe that will be the final extension. Under that timeline, on February 1, 2023, HHSC can begin unenrolling new moms from Medicaid.

Texas leaders should extend Medicaid coverage to a full year after pregnancy.

At the time House Bill 133 was being debated, only a handful of states were seeking to extend postpartum coverage and had 1115 waiver requests pending before the Centers for Medicare & Medicaid Services (CMS). The American Rescue Plan Act of 2021 had just created a new option to extend Medicaid postpartum coverage to a full year via a SPA. That option became available on April 1, 2022.

The state landscape has changed enormously since 2021. Today, <u>over two thirds of states</u> have extended or are working to extend postpartum Medicaid coverage for <u>a full year</u> after pregnancy, including Alabama, South Carolina, Florida, Louisiana, Kentucky, Ohio, West Virginia, Tennessee, among others.⁴ While Georgia initially pursued six-month postpartum coverage, state lawmakers recently enacted legislation to extend coverage for a full year after pregnancy. Texas is one of only two states known to be seeking a postpartum Medicaid coverage extension for less than one year.⁵

Regardless of the outcome of the six-month postpartum waiver amendment, we urge Texas leaders to come back next session and extend Medicaid coverage for new mothers to one year postpartum, as recommended by Texas' Maternal Mortality & Morbidity Review Committee and as proposed by most states.



¹ Texas Maternal Mortality and Morbidity Review Committee and Department of State Health Services. Joint Biennial Report. (Sept. 2020).

² Mathematica. "Untreated Maternal Mental Health Conditions in Texas: Costs to Society and to Medicaid." (March2020).

³ Kaiser Family Foundation. "Fiscal and Enrollment Implications of Medicaid Continuous Coverage Requirement During and After the PHE Ends". (May 10, 2022).

⁴ Kaiser Family Foundation. <u>Medicaid Postpartum Coverage Extension Tracker</u>. (August 11, 2022).

⁵ Following legislative direction to seek an 1115 waiver, <u>Wisconsin</u> is proposing to extend postpartum Medicaid coverage to three months.