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Testimony in Support of LD 265, An Act To Provide Women Access to Affordable Postpartum Care

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Good afternoon Senator Claxton, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services. My name is Kathy Kilrain del Rio, and I am the Director of Campaigns and Healthcare Advocacy for Maine Equal Justice, a nonprofit legal aid provider working to increase economic security, opportunity, and equity for people in Maine. **Today I am testifying in support of LD 265, An Act To Provide Women Access to Affordable Postpartum Care.**

The importance of postpartum care cannot be overstated—quite simply it can save lives. And the need for that care doesn't end after two months. In a CDC Morbidity and Mortality report that looked at pregnancy-related deaths in the United States from 2011-2015, 11.7% of pregnancy-related deaths occurred between 43 and 365 days postpartum.ⁱ Of those deaths in the study that were evaluated for preventability, 61.9% of those which occurred between 43 and 365 days were found to be preventable.ⁱⁱ

It's also important to note there are significant racial disparities when it comes to pregnancy-related deaths and infant mortality.ⁱⁱⁱ And those disparities are also reflected in the deaths which occurred between 43 and 365 days postpartum. For example, a greater proportion of the deaths of Black women (14.9%) occurred in that period compared to the proportion of deaths among white women (10.2%) in that period. This bill would help address some of those disparities.

Postpartum care is needed for many reasons. For those with mental health issues or postpartum depression, which can manifest anytime in the year following pregnancy, this would provide vital support. Postpartum care is recommended by the American College of Obstetricians and Gynecologists (ACOG) for people with substance use disorders because this period can make them particularly susceptible for relapse. Indeed, the loss of insurance and an interruption in access to care is considered a potential trigger for relapse.^{iv} New parents can also get needed support with family planning options, which may vary for them during that first year after birth.

Infants also benefit from their parents having postpartum coverage. Aside from the obvious benefits of ensuring the health of their mother during their first year of life, we know that when parents have health care coverage, children are more likely to be brought to their wellness visits. Regular medical care increases rates of breastfeeding and can help identify potential health or developmental concerns for infants.

We do urge you and the Department to keep in mind that women are not the only people who need postpartum care. Transgender men, nonbinary people, and those who identify in ways other than as a woman who have given birth should be able to access this needed coverage and care. Language used in statute, rulemaking, and any communications about this type of care should keep those gender dynamics in mind.

Finally, while there may be options on the ACA Marketplace for coverage for people who fall into the income gap between the expansion category and pregnancy category, there are a number of reasons why people may not be able to access or afford that coverage when their Medicaid coverage ends after 60 days. This bill removes a barrier to accessing the full range of coverage they need during this vulnerable period for themselves and their infants.

It is clear to medical experts that postpartum care is needed beyond 60 days. We should be doing all we can to end preventable maternal and infant deaths and all we can to ensure that people have adequate care to meet their physical and mental health needs during the year following pregnancy so that they and their infants can get off to the strongest start possible. For these reasons, we ask you to support LD 265.

ⁱ https://www.cdc.gov/mmwr/volumes/68/wr/mm6818e1.htm?s_cid=mm6818e1_w

ⁱⁱ Ibid.

ⁱⁱⁱ <https://www.cdc.gov/media/releases/2019/p0905-racial-ethnic-disparities-pregnancy-deaths.html>

^{iv} <https://www.kff.org/wp-content/uploads/2019/09/Testimony-Medicaid-and-Health-Coverage-for-Low-Income-Women-in-Pregnancy-and-After-Childbirth-1.pdf>