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**Ohio Senate  
Health Committee  
House Bill 110  
Melissa Bacon  
Groundwork Ohio  
May 5, 2021**

Chairman Huffman, Ranking Member Antonio and members of the committee, my name is Melissa Bacon and I am the Policy and Advocacy Director at Groundwork Ohio. Thank you for the opportunity to provide testimony on House Bill 110, the Ohio FY 2022-2023 biennial budget bill, as it relates to the Ohio Department of Medicaid.

Groundwork Ohio is a statewide, nonpartisan advocacy organization that champions high-quality early learning and healthy development strategies from the prenatal period to age five, that lay a strong foundation for Ohio kids, families and communities. Our vision is to make Ohio the best place to be a young child so that all children have the opportunity to reach their full potential. Groundwork is led by Executive Director, Shannon Jones, and governed by a robust steering committee of child-focused health and education experts from across the state.

At Groundwork, we know that healthy moms are the foundation of healthy babies. Whether infants are born healthy and with the potential to thrive as they grow greatly depends on their mother's well-being. To have a healthy pregnancy and positive birth outcomes, women and their infants require access to appropriate health care services before, during, and after birth. More than half of all babies in Ohio are born to women who receive Medicaid and 49% of infants and toddlers in Ohio receive health coverage through Medicaid and Healthy Start.

When a mother dies as a result of childbirth, it is a tragedy for both families and communities. In the context of the nation's growing and persistent maternal and infant health crises, many have sought policy and delivery system changes that will improve outcomes for women and their babies. A key opportunity identified and shared by many is to extend the postpartum coverage period in Medicaid from the current 60 days to a full year in line with clinical evidence. Our state's rate of maternal mortality is rising, and a growing body of evidence shows that many of these deaths, particularly from preventable causes, occur during the period after pregnancy-related Medicaid coverage ends.

A pregnancy-related death is defined as the death of a woman during pregnancy or within one year of the end of pregnancy from a pregnancy complication, a chain of events initiated by pregnancy, or the aggravation of an unrelated condition by the physiologic effects of pregnancy.<sup>1</sup>

Between 2008 and 2016, pregnancy-related deaths in Ohio occurred at a ratio of 14.7 per 100,000 live births. Of the pregnancy-related deaths that occurred statewide, 57% were considered preventable. Additionally, Black women in Ohio died at a rate of more than two and a half times that of white

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*Groundwork Ohio is a fiscally-sponsored project of Community Initiatives*

women, making up 34% of deaths but only 17% of births.<sup>ii</sup> This is an urgent crisis for our families, our communities, and our state.

As the largest payer of maternity care in Ohio, Medicaid has a critical role to play in addressing Ohio's infant and maternal mortality crisis. Currently, our state Medicaid program is available to pregnant women in families with income up to 200% of the Federal Poverty Level (FPL) for 60 days. After the 60 days, if a woman is at or below 138% of the FPL, she maintains Medicaid coverage. However, if she is above 138% of the FPL, she loses her health care coverage at 61 days. Just like their babies, Medicaid eligible women need one-year postpartum coverage, including coverage for services such as case management and outreach, substance use disorder treatment, and mental health screening and treatment. Extending postpartum coverage also ensures continuity of health care for postpartum women experiencing costly – and sometimes fatal – complications from pregnancy or childbirth.

In the last biennial budget, the Ohio Department of Medicaid secured funding and permission to seek a 1115 waiver to extend postpartum coverage for a small, targeted population of 2,500 mothers with substance use disorders. Due to the pandemic, this project was paused to address the increased demand for Medicaid coverage.

For the last year during the pandemic, Medicaid has continuously covered postpartum women as disenrollment is prohibited under the federal emergency health order. Once the federal emergency health order ends, current state plan policy will resume and women will be covered again for only 60 days postpartum. The federal American Rescue Plan Act affords states the authority and the federal match needed to provide 12-months of continuous postpartum coverage to Medicaid-eligible women. **Groundwork Ohio is seeking an amendment to HB 110 to leverage this benefit, extending postpartum coverage to 12 months for women up to 200% of the FPL. We estimate that this extension would apply to nearly 6,000 women in Ohio.**

Extending postpartum coverage to 12 months will ensure continuity of health care, support behavioral health and substance use disorder treatment, and keep moms healthy and engaged in parenting. This policy also affords women the flexibility to focus on family, maintain their health so that they can make plans to return to work or school, and help save Ohio money from costly health interventions down the road.

Governor Mike DeWine, the Ohio Department of Medicaid and Ohio Department of Health, and members of the Ohio General Assembly have all expressed their commitment to addressing the state's devastating infant and maternal mortality crisis. In order to eradicate preventable maternal deaths and improve outcomes for moms and babies, Ohio must leverage every tool at our disposal. This includes ensuring that all individuals whose pregnancies are covered by Medicaid can keep their Medicaid coverage for at least one year postpartum.

Groundwork Ohio requests your support of this important amendment and Mr. Chairman I would be happy to answer any questions.

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<sup>i</sup> [Pregnancy-Related Deaths | CDC](#)

<sup>ii</sup> [A Report on Pregnancy-Associated Deaths in Ohio 2008-2016+website+version.pdf](#)