

# **HCS HBs 2280, 2120, 1468 & 1616**

## *Postpartum Coverage Extension*

### **Sponsor**

HB 1468 – Rep. Martha Stevens (D-Columbia)

HB 1616 – Rep. Cora Faith Walker (D-St. Louis)

HB 2120 – Rep. Jay Barnes (R-Jefferson City)

HB 2280 – Rep. Marsha Haefner (R-St. Louis)

### **Bill Status**

The four bills relating to the expansion of postpartum Medicaid benefits were rolled into a Committee Substitute, and HB 2280 is now the lead bill. It passed the House Health and Mental Health Policy Committee by a 9 to 0 vote and was referred to the Committee on Rules – Administrative Oversight.

### **Bill Summary**

As originally filed, the four bills contained varying benefit packages and extension lengths and covered different populations. Below are brief summaries of each piece of legislation.

- HB 1468 – Extends postpartum coverage through the Medicaid and Show Me Healthy Babies programs to one year. This bill is expected to cost the state over \$44 million by SFY 2021.
- HB 1616 – Provides a year of postpartum coverage for substance use treatment under the Show Me Healthy Babies program. The fiscal note for state funds is \$367,000 in SFY 2021.
- HB 2120 – Provides two years of postpartum coverage for substance use treatment for women under 185% FPL. The measure is expected to cost the state over \$4.8 million in SFY 2021.
- HB 2280 – Provides one year of postpartum substance use treatment for Medicaid-eligible women. The fiscal note is \$2.4 million general revenue for SFY 2021.

The House Committee Substitute provides a year of postpartum Medicaid coverage for MO HealthNet-eligible women receiving substance use treatment within 60 days after birth. The Committee extended full benefits rather than only substance use treatment services, which was originally proposed in HB 1616, HB 2120, and HB 2280. An updated cost estimate is not yet available.

In discussing the bill, Committee members said substance use services alone may not be sufficient. Access to medical care, non-emergency medical transportation, and behavioral health services may be needed in conjunction with substance use treatment. Substance use is linked to a variety of physical conditions, including changes in blood pressure, heart attacks, and hepatitis. Individuals with mental illness are more likely to suffer from alcohol or substance use disorders, according to the Substance Abuse and Mental Health Services Administration. The Committee narrowed the population to women in treatment within the first sixty days after pregnancy to target the highest-risk women whose next child may be born with withdrawal symptoms from maternal drug use. Limiting the population will also help reduce the anticipated cost.

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The Appropriations Subcommittee on Health, Mental Health, and Social Services recommended an increase of \$1.72 million in the Department of Social Services budget (HB 2011) for postpartum coverage extension. The full Budget Committee will begin reviewing subcommittee recommendations the week of February 26.

### **Issue Summary**

Missouri Medicaid's income eligibility limit for pregnant women is 201% of the Federal Poverty Level (FPL), and coverage ends 60 days postpartum. The income limit for parents is only 22% FPL. The Show Me Healthy Babies program was created in 2014 to cover unborn babies and their mothers between 201% and 305% FPL. Pregnancy-related and postpartum coverage for the mother extends through the last day of the month that includes the sixtieth day after the pregnancy ends. Women under 201% FPL can access women's health services, including contraception and sexually transmitted disease testing, through the Uninsured Women's Health Program.

A study published in the Maternal and Child Health Journal found pregnant women on Medicaid reported higher rates of smoking, physical abuse, and postpartum depression symptoms. When women gain Medicaid coverage during pregnancy, it can open access to physical and mental health services. If coverage ends after 60 days, the woman may lose access to care, even though the conditions identified or exacerbated during the pregnancy continue.

Postpartum depression symptoms impact one in nine US women, according to research by the Centers for Disease Control and Prevention. Missouri data from 2011 indicates 16.7% of women on Medicaid experienced symptoms of postpartum depression, compared to 7.3% of other women. Postpartum depression symptoms include feelings of guilt, anger, and anxiety. Symptoms can emerge up to a year after the end of pregnancy. According to the American Addiction Centers, 15% of women who experience postpartum depression symptoms within a year after pregnancy binged on alcohol, and 9% misused drugs. These rates are higher than women without postpartum depression.

A study published in the journal of Infant Behavior and Development found babies of women with postpartum depression are more likely to use acute care services and less likely to receive preventative healthcare. Thoughts of harming children are more common in mothers with depression, and postpartum depression is linked to harsher punishments. A Northwestern researcher found almost 20% of women with postpartum depression considered self-harm, with suicide accounting for about 20% of postpartum deaths.

Texas passed legislation in 2017 to allow new mothers covered by Medicaid or with an infant in the Children's Health Insurance Program (CHIP) to be screened for postpartum depression during a follow up visit for their child within 12 months of birth.

Substance use treatment can also be interrupted for women when postpartum Medicaid coverage ends. An increasing number of babies in Missouri are born with withdrawal

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symptoms due to maternal drug use. According to the Missouri Department of Health and Senior Services, neonatal abstinence syndrome (NAS) discharges increased 64% from 2010 to 2014. The rate of increase was 84% in rural regions and 53% in urban areas. The Missouri Hospital Association reported south central Missouri and St. Louis City had the highest rates of NAS births. According to the National Institute on Drug Abuse, NAS births cost an average of \$66,000 and require 16 days in the hospital, compared to \$3,500 and 2 days for babies without NAS. Nationally, 81% of NAS costs are borne by Medicaid programs. Supporters of extending postpartum coverage argue continued substance use treatment for women after birth will reduce the likelihood of her next child being born with withdrawal symptoms.

### **Documented Support**

The four bills were heard at the same hearing, and following organizations testified in support of HB 1468.

- American Congress of Obstetricians and Gynecologists – Missouri Section
- Campaign Life Missouri
- Generate Health
- March of Dimes
- Missouri Association of Rural Health Clinics
- Missouri Catholic Conference
- Missouri Chapter of the American Academy of Pediatrics
- Missouri Coalition for Community Behavioral Health
- Missouri Family Health Council
- Missouri Healthcare for All
- Missouri Nurses Association
- Missouri Rural Crisis Center
- Missouri State Medical Association
- NARAL Pro-Choice Missouri
- Nurses for Newborns
- Our Lady's Inn
- Planned Parenthood Advocates in Missouri
- SSM Health
- St. Louis Children's Hospital
- Women's Children's Hospital

### **Documented Opposition**

There is no documented opposition at the time of writing.