



January 28, 2021

To the members of MACPAC,

EverThrive Illinois strongly supports making twelve months of postpartum Medicaid coverage mandatory with the support of a 100% FMAP. Ensuring coverage for all pregnant people during the full perinatal period is a goal that we have worked toward as a maternal and child health organization for over 30 years.

In Illinois, the most severe morbidity cases occur after 43 days postpartum, and the loss of coverage at 60 days impacts continuity of care and limits access to life saving health insurance for birthing parents and their families.¹ **Black birthing parents in our state are six times more likely to experience maternal mortality and morbidity compared to white birthing parents.** Nationally, the disparity of maternal health outcomes for Black birthing parents compared to white birthing parents has been a consistent rate of three times higher for Black birthing parents. People with Medicaid coverage are more likely to experience severe morbidity and death, and Black birthing parents are more likely to have Medicaid coverage compared to white birthing parents.² The maternal health outcomes in our country are unacceptable and swift action must be taken immediately.

Mandating coverage for people through the full 12-month postpartum period is the first step to ensuring the safety and health of all people. Not only will a mandatory expansion provide lifesaving coverage for parents, but insurance coverage of a parent is a predictor of insurance coverage and health outcomes of children. Children will have better health outcomes with healthier parents by their side.

In addition to mandating postpartum coverage under state Medicaid programs, we encourage the MACPAC to explore ways that states can cover all birthing parents for twelve months, regardless of their immigration status. Current Medicaid policy excludes people who are undocumented from many types of coverage and forces willing states to provide coverage with state funds without any federal support. This results in less coverage for parents, added stress on emergency and charity care, and exacerbates health care disparities between citizens and non-citizens.

Thank you for the opportunity to submit this written comment. Please send any questions to klanders@everthriveil.org.

Sincerely,

Kelsie Landers, LMSW
Policy and Advocacy Director
EverThrive Illinois

¹ October 2018. Illinois Department of Public Health. Illinois Maternal Mortality and Morbidity Report. <https://dph.illinois.gov/sites/default/files/publications/publicationsowhmaternalmorbiditymortalityreport112018.pdf>

² *ibid*

BOARD OF DIRECTORS

CHAIRPERSON

Ariel Thomas, MS
Northwestern University's
Feinberg School of Medicine

VICE CHAIRPERSON

Courtney Jones
University of Chicago

SECRETARY

Betsy Covell, MS
Nokia

TREASURER

Jesse Meyer, MBA
Northwestern University's
Feinberg School of Medicine
Northwestern Medical Group

Anna Assenmacher
Department 11

Anita Chandra-Puri, MD
Northwestern Medicine
Ann & Robert H. Lurie Children's
Hospital of Chicago

Mary Driscoll, MPH, RN

Sarah Flanagan
AAR Corp

Robin Hannon, MSN, RN

Dr. Brenda Jones, DHSc,
MSN, WHNP, LSSGB
TiER1 Healthcare

Loretta Lattyak, RN, MEd
Ann & Robert H. Lurie Children's
Hospital of Chicago

Andrew Martin
United Healthcare

Ellen Mason, MD
John H. Stroger, Jr. Hospital of
Cook County

Marci May
Jasculca Terman Strategic
Communications

Ankit Patel
Ventas, Inc.

Cindy San Miguel, MPH
Siani Urban Health Institute

Michael S. Taitel, PhD
Walgreens

Amy Thomasson, DES
American College of Medical
Quality

EXECUTIVE DIRECTOR

Chi Chi Okwu, MPH