National Alliance on Mental Illness

January 22, 2021

The Honorary Norris Cochran
Acting Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

RE: Georgia Postpartum Extension Section 1115 Demonstration Waiver Application

Dear Acting Secretary Cochran:

NAMI, the National Alliance on Mental Illness, appreciates the opportunity to comment on Georgia's Postpartum Extension Section 1115 Demonstration Waiver Application that would extend postpartum Medicaid coverage from 60 days to 180 days. NAMI is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI uniquely recognizes the important role Medicaid plays in helping people with mental illness successfully manage their condition and get on a path of recovery, including supporting the mental health needs of postpartum mothers. As such, NAMI urges the Department of Health and Human Services (HHS) to approve Georgia's waiver, while also encouraging the state to take additional steps to ensure that women have the mental health care they need before, during and after pregnancy.

Medicaid is Critical for Addressing Mental Health Needs of Postpartum Mothers

The days and weeks following birth are a vital period for a woman and her infant, setting the stage for long-term health and well-being. Yet mental illness and substance use disorder can be a common part of pregnancy or the postpartum period. For example, women are more likely to develop depression during the first year following childbirth than at any point in their lives,[i] impacting at least one in nine new mothers.[ii] Likewise, women with substance use disorder are also at greater odds of experiencing a relapse and overdose 7-12 months postpartum.[iii]

Yet national figures show that untreated perinatal mental health conditions are often underdiagnosed and untreated. Less than 20 percent of women get treated for such conditions postpartum[iv] even when they do screen positive.[v] Unfortunately, when left untreated, mental health conditions are the second leading cause of pregnancy-related death that occur within 43 days to one year after the end of pregnancy.[vi]

In Georgia, Medicaid covers half of all births.[vii] Under federal law, pregnant women are eligible for Medicaid coverage up to 60 days postpartum, at which time they must transition to other insurance or become uninsured. While some women can successfully transition to other sources of coverage at this time, some may struggle to find an alternative, and many are left in the untenable position of being uninsured shortly after a major medical event.[viii,ix] Others may successfully find other forms of coverage but might need to switch providers and have their continuity of care disrupted as a result.

This abrupt cutoff can thrust new mothers into the ranks of the uninsured or underinsured, limiting their access to essential services and medications. When new mothers go off and on coverage – called "churn" – their mental and physical health suffers. Specifically, when individuals with mental health conditions "churn"

they are less likely to receive outpatient mental health services.[x] This experience is sadly not unique: it is estimated that more than half of women with Medicaid coverage at the time of delivery experience at least one month of being uninsured in the six months after delivery.[xi]

Georgia's proposal would reduce the likelihood of new mothers becoming uninsured and without care by extending Medicaid postpartum coverage for eligible women from 60 days postpartum to 180 days postpartum. This policy change would mean additional coverage for more than 12,500 Georgian mothers. Through an extended coverage period, women would be able to maintain prescribed treatments and recommend check-ups with little to no disruption of care. Importantly, Medicaid coverage would also reduce the frequent financial barriers to care. This will not only help new mothers' mental health but help support their physical health needs during this time as well.

This proposal would also help support the health needs of women's families. A mother's untreated mental health conditions can have adverse effects on a child's cognitive, behavioral, and socioeconomic development.[xii] Conversely, when moms have Medicaid health coverage, their children are more likely to be insured[xiii] and use behavioral health services.[xiv] Keeping women covered also presents the opportunity to address health concerns unrelated to pregnancy before any subsequent pregnancies. This is especially important for women on Medicaid who are more likely to have had a prior preterm birth, low birthweight baby, and experience certain chronic conditions.[xv] Addressing these concerns will help avoid long-term costs due to untreated conditions that may impact future pregnancies. For all these reasons, NAMI supports Georgia's waiver to extend postpartum coverage.

Georgia Can Support New Mothers' Help Through Greater Medicaid Coverage

While NAMI encourages prompt approve of this waiver, we also hope that your staff will encourage Georgia to take additional steps to improve women's access to mental health care. Specifically, we believe state should fully expand its Medicaid program so that women with incomes up to 138 percent of the federal poverty level would have improved coverage options before, during and after pregnancy. Additionally, we believe the state should also consider extending its request for postpartum coverage from six months to twelve months. An extension of coverage up to 12 months has been recommended by maternal mortality review committees in many states, including Georgia.[xvi]

NAMI supports the mental health and wellness of new mothers and is grateful that Georgia is electing to expand access to this vital source of coverage. We urge HHS to approve the waiver application and encourage the state to explore additional steps to improve affordable, adequate, and accessible health care coverage in its Medicaid program. Thank you for the opportunity to provide comments. If you have any questions or would like to discuss the benefits of expanded coverage, please contact Jodi Kwarciany, Manager of Mental Health Policy at jkwarciany@nami.org.

Sincerely,

/s/

Jennifer Snow
Director of Public Policy
NAMI, National Alliance on Mental Illness

CC: The Honorable Elizabeth Richter, Acting Administrator,
The Centers for Medicare and Medicaid Services

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