



Department of Health Services, Division of Medicaid Services  
PO Box 309  
Madison, Wisconsin 53703-0309

Attn: Wisconsin 1115 Postpartum Coverage Waiver

To Whom it May Concern:

The American College of Obstetricians and Gynecologists – Wisconsin Section is in support of the draft waiver request to the Centers for Medicare & Medicare Services to extend postpartum Medicaid coverage for an additional 30 days, as required under 2021 Wisconsin Act 58. We are encouraged by this first step. We strongly support full 12-month extension. Thirteen states have implemented 12-month extension and 14 more states and DC are in the process of implementation. We look forward to achieving the goal of 12-month extension together.

The postpartum period is a medically vulnerable period. Complications during pregnancy, such as eclampsia, infection, or hemorrhage require intensive care, lengthy hospital stays, or hysterectomy; and pregnancy-related complications can surface up to a year after delivery. New parents may also be dealing with postpartum depression or a host of other underlying medical conditions, all while caring for a newborn. The health and wellness of a parent has important implications for a baby's overall health including cognitive and social-emotional development. Disruptions in health care coverage can adversely affect access to medically necessary health care. Continuous health care coverage is important in managing pregnancy related complications, but also to maintain access to mental health treatment, breastfeeding support, chronic disease management, and prescription drugs.

The United States loses 700 lives to pregnancy-related death each year and most of these deaths are preventable. This statistic does not include deaths that result from suicide or substance use disorder, leading causes of maternal death in a growing number of states. In Wisconsin, there were 80 pregnancy-associated deaths in 2016–17, according to an April 2022 Maternal Mortality Review Team (MMRT) report. This means 80 Wisconsin residents lost their lives during pregnancy or within one year of pregnancy, regardless of the cause. The Maternal Mortality Review Team (MMRT) determined that 33 of those deaths were pregnancy-related (41%). Most pregnancy-associated deaths occurred postpartum in 2016–17 (75% overall, including pregnancy-related deaths), with approximately 73% of pregnancy-related deaths occurring postpartum. Extending Medicaid coverage during the postpartum period is a critical strategy to address disparities in maternal morbidity and mortality.



The stark racial inequities in maternal health outcomes have been well documented. Data from the Centers for Disease Control and Prevention's Pregnancy Mortality Surveillance System shows that Black, American-Indian, and Alaska Native women are two to three times more likely to die from a pregnancy-related complication than non-Hispanic White women. Disparities in Wisconsin are in many cases worse than national trends. According to the Department of Health Services, the rate of maternal morbidity in Wisconsin is higher than the national average and Black women in Wisconsin are 1.75 times more likely to experience maternal morbidity. The rate of maternal mortality is lower in Wisconsin than the national average, but the disparity between Black and white women is greater in Wisconsin than the nation at large. A Black woman in Wisconsin is 5 times more likely to die of maternal mortality than a white woman in Wisconsin.

Despite a modern healthcare system, maternal morbidity and mortality in the United States is still a serious public health concern and has considerable short-and long-term individual, family, and societal impacts. Medicaid plays an important role in maternal health. Extending Medicaid coverage during the postpartum period is emerging as a key strategy to address disparities in maternal morbidity and mortality. Extension of Medicaid during the postpartum period will have a positive impact on the rates of maternal morbidity and mortality, begin to address racial, ethnic and geographic health disparities, and ultimately serve to benefit and strengthen families in Wisconsin. In a modern healthcare system, pregnancy-related deaths should never occur.

Respectfully submitted,

A handwritten signature in black ink that reads "Ann Marie Winkler". The signature is written in a cursive, flowing style.