



House Committee on Health Care Reform
Testimony of the Texas Women's Healthcare Coalition
In Support of House Bill 12
March 16, 2023

The **Texas Women's Healthcare Coalition (TWHC)** is a partnership of 88 healthcare, faith, and community-based organizations - dedicated to promoting access to preventative healthcare for women all across the state. We strive to ensure the health and wellbeing of Texas women, their babies, and their families - as we believe that giving women access to contraceptive services, prenatal care, breast cancer screenings, and so much more, will keep Texas families intact. **In alignment with this mission, we are in support of House Bill 12.**

When looking at this bill, one must remember that it merely expands a precedent set by the Texas legislature only two years ago. In 2021, the legislature voted to allow new mothers to receive six months of postpartum Medicaid coverage instead of two. This year, House Bill 12 would take this one step further - by allowing new mothers to receive one full year of postpartum Medicaid coverage. This change is small, but it would have a powerful impact. It will improve continuity of care for postpartum women, help reduce instances of maternal death, improve health outcomes for Texas mothers and babies, and benefit taxpayers all across the state.

Texas is facing a perfect storm in terms of maternal health. The state is facing alarmingly high rates of maternal death and pregnancy-related medical complications¹. At the same time, Texas has the highest percentage of uninsured women of childbearing age in the nation.²

According to a report released by Texas' Maternal Mortality & Morbidity Review Committee (MMMRC) in December of 2022 - the majority of pregnancy-related 2019 deaths in the state were preventable. And 27% of these deaths occurred between 43 days and 1 year postpartum. The number of severe medical complications from pregnancy and childbirth also increased significantly between 2018 and 2020 - rising from 58.2 to 72.7 cases per 10,000 deliveries in Texas. Various factors contributed to these deaths, with chronic disease being a top

¹ *Texas Maternal Mortality and Morbidity Review Committee and Department of State Health Services Joint Biennial Report 2022*. Dec. 2022,
<https://www.dshs.texas.gov/sites/default/files/legislative/2022-Reports/Joint-Biennial-MMMRC-Report-2022.pdf>.

² Searing, Adam, et al. "Medicaid Expansion Fills Gaps in Maternal Health Coverage Leading to Healthier Mothers and Babies." Center For Children and Families, 17 June 2019,
<https://ccf.georgetown.edu/2019/05/09/medicaid-expansion-fills-gaps-in-maternal-health-coverage-leading-to-healthier-mothers-and-babies/>.



patient-related factor. The MMMRC identifies the lack of access to care or financial resources as contributing factors to inadequate control of chronic disease³.

A 2019 study conducted by the Georgetown University Center for Children and Families found that, nationwide, 12.3 percent of women aged 18-44 do not have insurance. Yet in Texas, this rate stands significantly higher - at 25.5 percent. That is one in four women, sisters, and mothers, of childbearing age. This study also found that across the board, states without expanded Medicaid have roughly twice as many uninsured women as those *with* expanded Medicaid⁴.

Passing HB12 would give Texas families a fighting chance against these obstacles, by giving low-income women the time and comprehensive resources they need in one of the most vulnerable periods of their life.

Providing only 6 months of postpartum comprehensive healthcare coverage is not enough time for a woman to realize all of her needs, access care, and ultimately make a full recovery. For optimal health outcomes, postpartum care should be an ongoing process tailored to the specific needs of every woman rather than time limited access to care⁵. When a client's Medicaid coverage ends after 6 months postpartum, they might lose access to the specialty care needed to manage and treat any chronic conditions that they or their babies may suffer from. They may also lose access to the wide range of contraception options available to them, thus increasing their risk of becoming pregnant again. Numerous studies show that short birth spacing is associated with an increased risk of adverse pregnancy and childbirth outcomes - from preterm birth, to anemia, to premature rupture of membranes, and more.

Improving health outcomes for women, mothers, and their babies also has benefits for taxpayers all across the state. According to Mathematica, a national research organization, the failure to treat maternal mental health conditions, such as postpartum depression, across all childbirths in 2019 created an estimated \$2.2 billion in societal costs from conception through five years postpartum⁶. Other studies have shown that births due to unplanned pregnancies

³ Ibid at 1.

⁴ Ibid at 2.

⁵ "Optimizing Postpartum Care." ACOG, May 2018,

<https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2018/05/optimizing-postpartum-care>.

⁶ "Untreated Maternal Mental Health Conditions in Texas: Costs to Society and to Medicaid." Mathematica, 5 Mar. 2021, <https://www.mathematica.org/publications/untreated-maternal-mental-health-conditions-in-texas-costs-to-society-and-to-medicaid#:~:text=The%20total%20societal%20cost%20of,covered%20births%20was%20%24962%20million> .



cost nearly \$1.3 billion in Medicaid costs each year in Texas⁷. By providing mothers with comprehensive healthcare coverage for up to one year after giving birth, these extra costs incurred by the state could diminish, or even disappear completely. Healthy Texans, and healthy pregnancies lower costs by preventing potentially expensive interventions associated with maternal and infant complications.

Extending coverage to 12 months postpartum is recommended by Governor Abbott in his recent budget proposal, included in the Texas Republican Party platform, and is the top recommendation of the Texas MMMRC. It will improve continuity of care for postpartum women, help reduce instances of maternal death, improve health outcomes for Texas mothers and babies, and benefit taxpayers all across the state.

By passing House Bill 12, this committee would affirm that Texas wants to support mothers, protect babies, and keep families all across the state intact. TWHC is eager to help with these issues, and we are happy to provide any additional information on this or other topics relating to women's health.

Respectfully,

A handwritten signature in black ink that reads "Evelyn Delgado". The signature is fluid and cursive, with the first name and last name clearly distinguishable.

Evelyn Delgado

Chair, Texas Women's Healthcare Coalition

⁷ Sonfield, Adam, et al. "The Public Costs of Births Resulting from Unintended Pregnancies: National and State-Level Estimates." Guttmacher Institute, June 2011, <https://www.guttmacher.org/sites/default/files/pdfs/pubs/psrh/full/4309411.pdf>.