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April 18, 2023

The Honorable Neal Foster
House Finance Committee Co-chair
Alaska State Legislature
State Capitol, Rm 508
Juneau, AK 99801

Dear Representative Foster,

Thank you for the opportunity to provide supplementation information on Alaska Department of Health's HB 59: Postpartum Medicaid bill presentation to the House Finance Committee on April 12, 2023. Please find the requests and corresponding responses below.

**Q1: Can you provide the sources of data for the committee presentation?**

Congressional Budget Office (CBO) scoring: https://ccf.georgetown.edu/2021/02/22/unpacking-postpartum-coverage-extension-option-covid-relief-bill/

Health impacts: https://www.commonwealthfund.org/blog/2022/improving-maternal-health-extending-medicaid-postpartum-coverage

Centers for Medicare and Medicaid Services (CMS) Policy Guidance: https://www.medicaid.gov/federal-policy-guidance/downloads/sho21007.pdf

Benefits of post-partum coverage: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9110670/

General argument for post-partum coverage: https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2021/05/05/states-push-to-extend-postpartum-medicaid-benefits-to-save-lives

Missouri analysis of impacts of post-partum coverage: https://mffh.org/wp-content/uploads/2021/05/Postpartum-coverage.pdf

Medicaid expansion decreases hospitalizations among post-partum women: https://www.healthaffairs.org/doi/10.1377/hlthaff.2022.00819#:~:text=During%20the%20entire%20post%20period,baseline%20rate%20(exhibit%204).

Poverty data –the two communities in Alaska with the highest % of children who live in families with incomes below the federal poverty level in Alaska are the Northern and Southwest Regions. (https://datacenter.kidscount.org/data/tables/8772-children-who-live-in-families-with-incomes-below-the-federal-poverty-level?loc=3&loct=5#detailed/5/185-191/false/2026,1983,1692,1691,1607,1572,1485,1376,1201,1074/any/19962,17603)

This is the data from the CDC maternal mortality in a nice brief form for 2018 -2020…shows the steady increase in rates and breaks it down by race and age. https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2020/E-stat-Maternal-Mortality-Rates-2022.pdf

Discusses extension of the postpartum care to 1 year:
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8020556/#B1

Maternal mortality rates: https://www.goodrx.com/hcp/providers/lowering-maternal-mortality-rates

Early Research out of Texas on postpartum extension**:** https://ccf.georgetown.edu/2022/12/15/early-research-shows-benefits-of-one-year-of-postpartum-medicaid-as-states-and-congress-consider/)

**Q2**: **Infant Mortality Data**

The data dashboards below demonstrate Alaska's infant mortality rate both neonatal (birth up to, but not including, the 28th day of life) and post-neonatal (between 28-364 days) mortality.

Here's the link for Infant Mortality dashboard: https://mch-indicators2-alaska-dhss.hub.arcgis.com/pages/Infant%20mortality%201. This includes some brief narratives to provide an overview of the indicator and why it is important, as well as drop down boxes at the bottom that describe some things Division of Public Health (DPH) is doing to address infant mortality and discusses disparities.

The HAVRS (Health Analytics and Vital Records) Annual Report:
https://health.alaska.gov/dph/VitalStats/Documents/PDFs/VitalStatistics_Annualreport_2021.pdf (pages 103-106 are on infant mortality)

**Q3: Do we need legislative approval to discontinue an optional Medicaid service?**

The Department does not need legislative approval to discontinue an optional service. However, under AS 47.07.036 the Department is required to take all reasonable steps to implement cost containment measures before implementing measures that affect eligibility or coverage of services. To the best of our knowledge, the State of Alaska has not discontinued an optional service in several decades. Additionally, to the extent that optional services as described in SOA statute are no longer "optional" today, it is generally because they are now mandatory under federal law. Finally, it is worth noting that postpartum coverage is not an optional service nor is it an optional eligibility category. HB 59: Postpartum Medicaid extends the term of coverage for postpartum women who already eligible under mandatory coverage groups but does not create a new type of service or create a new category of individuals who are eligible for Medicaid.

**Q4: Comparing national data to state specific data for maternal mortality?**

The maternal mortality ratio on slide 4 uses the World Health Organization definition of the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes. This ratio is per 100,000 live births.

The slide with Maternal Child Death Review data is also per 100,000, but for a couple of reasons, MCDR use pregnancy-associated deaths while pregnant or within one year postpartum. This is a much broader definition that also includes deaths from accidental or incidental causes. Some reasons that MCDR uses the broader definition include population size and the high proportion of deaths in Alaska from suicide, overdose, and homicide, for which determination of pregnancy-relatedness is problematic.

The US has also seen continued increases in maternal mortality. New data just released about a month ago show that that 17.4 number increased to 23.8 nationally in 2020. (https://www.commonwealthfund.org/blog/2022/us-maternal-mortality-crisis-continues-worsen-international-comparison)

The Department tries to avoid making comparisons between Alaska and the national rate because of differences in measurement, but the Department believes our rates of maternal deaths from violence may be higher than the national average, while our rate of maternal mortality overall may be lower. Maternal mortality due to violence in Alaska disproportionately impacts Indigenous women, people from Western Alaska, and young women, with deaths most often occurring postpartum.

I hope you find this information to be useful. Please do not hesitate to contact my staff, Courtney Enright at 907-310-4296 if you have further questions.

Sincerely,

Heidi Hedberg

Heidi Hedberg
Commissioner-designee

cc:
Laura Stidolph, Legislative Director, Office of the Governor
Emily Ricci, Deputy Commissioner, Department of Health
Anne Zink, Chief Medical Officer, Department of Health