



With Spirit and Strength

February 28, 2023

The Honorable Michael Dunleavy
Governor of Alaska
State Capitol, Third Floor
Juneau, AK 99801

RE: Support for Medicaid Postpartum 12-Month Continuous Coverage

Dear Governor Dunleavy,

The Aleutian Pribilof Islands Association (APIA) writes in support of House Bill 59 (HB 59) and Senate Bill 58 (SB 58) to add 12-month continuous postpartum coverage as a Medicaid optional service. Ensuring expanded access to coverage for postpartum mothers will improve access to critical health and behavioral health care services and improve maternal postpartum outcomes for new mothers in Alaska. This is particularly important for our Alaska Native and American Indian (AN/AI) mothers who experience disparate health outcomes compared to the general population.

The Aleutian Pribilof Islands Association, Inc. (APIA) is a regional nonprofit tribal organization with members consisting of the thirteen (13) federally recognized tribes in the Aleutian and Pribilof Islands' Region of Alaska.

The current Medicaid coverage for postpartum mothers is only 60-days, often resulting in a gap in coverage as new mothers transition from one health care coverage to another during a vulnerable period. Often, mothers who fall off Medicaid coverage struggle to find new health care coverage and may go without any health care coverage. Expanding the period of coverage from 60-days to 12 continuous months ensures access to vital services for postpartum mothers including maternal check-ups, postpartum care, and behavioral health services.

AN/AI women and their newborns are overrepresented in adverse outcomes related to maternal and infant health. The national pregnancy-related mortality rate for AN/AI women between 2000-2017 was 29.7 out of 100,000 live births, while it was only 12.7 for non-Hispanic white women.¹ Looking at more recent data from 2017-2019, a review of 36 state Maternal Mortality Review Committees' data shows pregnancy-related deaths for AN/AI women were 93.3 percent

¹ Heck, J.L., et al. "Maternal Mortality Among American Indian/Alaska Native Women: A Scoping Review", *Journal of Women's Health*, Vol. 30, Issue 2. <https://www.liebertpub.com/doi/10.1089/jwh.2020.8890>

preventable.² The same 2017-2019 data showed that of those pregnancy-related mortalities, 31.3 percent were due to mental health conditions, and 29.4 percent of the mortalities occurred between 43-365 days after giving birth; falling largely outside the current Medicaid postpartum coverage requirement of 60-days.

In Alaska, AN/AI women are the most impacted by pregnancy-related mortality.³ The majority of pregnancy-related deaths in Alaska from 2014-2018 were linked to drug or alcohol overdose or other medical causes. Overall, 31 percent of pregnancy-related mortality in Alaska were linked to mental health. All suicides of new mothers during that period were AN/AI mothers, accounting for 20 percent of all pregnancy-related deaths of new AN/AI mothers. Of the Alaska pregnancy-related mortality, 85 percent were deemed preventable. Finally, these concerns are only worsening; the January 2023 Alaska Maternal Mortality Review Findings showed during the COVID-19 pandemic (in 2021), pregnancy-related maternal mortality was 109% higher than the previous 5-year average.⁴

Reflecting increased risk factors, infants born to women of color are also at higher risk for mortality compared to those born to white women. Infant mortality, while caused by a variety of factors, is elevated for AN/AI infants nationally, at 7.7 per 1,000 live births, nearly double the rate of white infants (4.4 per 1,000 live births).⁵ When we considered Alaska-specific data, AN/AI infant mortality has been significantly higher than white infants for decades. The most recent data shows that in 2019, AN/AI infant mortality was 10.3 per 1,000 live births; the white population infant mortality rate was 2.9 per 1,000 live births.⁶ Providing postpartum health care coverage for mothers will continue to allow them to access critical services such as postpartum check-ups, postnatal education, and behavioral health services which can improve these infant outcomes as well.

APIA supports HB59/SB58 to provide 12 continuous months of Medicaid coverage for postpartum mothers. AN/AI mothers and infants experience disparities in health outcomes, and we believe that this expanded coverage will improve access to critical health care and behavioral health services during a vulnerable time for new mothers and families. Improved health care during this time will improve the lives of mothers and their infants who rely on Medicaid for their health care coverage. If you have any comments or questions regarding our support for this legislation, you can contact Jessica Mata Rukovichnikoff, Primary Care Director at 907-276-2700.

² Trost, S., et al. "Pregnancy-Related Deaths Among American Indian or Alaska Native Persons: Data from Maternal Mortality Review Committees in 36 US States, 2017–2019", *Centers for Disease Control and Prevention's Maternal Mortality Review Information App*. <https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/data-mmrc-aian.html>

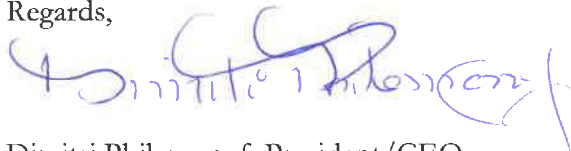
³ Alaska Dept. of Health and Social Services, Division of Public Health. "Pregnancy-Associated Mortality in Alaska" January 2020. <https://health.alaska.gov/dph/wcfh/Documents/mchept/mcdr/2019%20maternal%20mortality%20factsheet%20final.pdf>

⁴ Alaska Dept. of Health, Division of Public Health. "Alaska Maternal Mortality Review" January 2023. <https://drive.google.com/file/d/1AuyX2KJVuITQDTFWfJVng6Jhp6JqXAYU/view>

⁵ Hill, L., S. Artiga, and U. Ranji. "Racial Disparities in Maternal and Infant Health: Current Status and Efforts to Address Them", *Kaiser Family Foundation*. Published Nov. 1, 2022. <https://www.kff.org/racial-equity-and-health-policy/issue-brief/racial-disparities-in-maternal-and-infant-health-current-status-and-efforts-to-address-them/>

⁶ ANTHC Epidemiology Center. "Alaska Native Health Status Data Fact Sheet 2021: Infant Mortality". <http://anthctoday.org/epicenter/healthData/factsheets/2022%20Factsheets/Infant-Mortality.pdf>

Regards,



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CC: Senate Health and Social Services Committee
House Health and Social Services Committee
The Honorable Heidi Hedberg, Commissioner of Health
Heather Carpenter, Policy Advisor, Dept. of Health