



For economic and racial justice

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February 12, 2020

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-2393-P
P.O. Box 8016
Baltimore, MD 21244-8016

Submitted electronically via regulations.gov

SUBMITTED ELECTRONICALLY

Re: Illinois Continuity of Care & Administrative Simplification 1115 Waiver

Dear Administrator Verma,

Thank you for the opportunity to comment on the Illinois Department of Healthcare and Family Services' (HFS) Illinois Continuity of Care and Administrative Simplification 1115 Demonstration Waiver proposal.

The Shriver Center on Poverty Law (Shriver Center) strongly supports the proposal to provide Medicaid coverage throughout the entire postpartum period as well as the proposal to provide retroactive-enrollment into prior Medicaid Managed Care Organization Plans (MCOs) upon reinstatement.

The Shriver Center fights for economic and racial justice. Over our 50-year history, we have secured hundreds of victories with and for people living in poverty in Illinois and across the country. Today, we litigate, shape policy, and train and convene multi-state networks of lawyers, community leaders, and activists nationwide. Together, we are building a future where all people have equal dignity, respect, and power under the law. Our communities and clients rely on Medicaid to provide affordable equitable quality healthcare coverage for their families.

We represent pregnant and postpartum women and their families as they seek healthcare coverage and access to medically necessary healthcare services. Consistently, we see a major gap in coverage after a woman gives birth and loses Medicaid 60 days postpartum due to income or immigration status. While we try to assist these clients to access other coverage, they often are not able to do so due to affordability, administrative burdens, lack of knowledge of the Marketplace, or lack of employer coverage. These women and their families are at great risk of preventable medical complications due solely to the lack of coverage. In addition, we work with many clients who, often through no fault of their own, lose coverage when their Medicaid redetermination is not processed timely and they cannot remain enrolled in their managed care plan upon reinstatement. This waiver proposal seeks to address both those concerns.

The purpose of Medicaid is to enable states to furnish medical assistance to individuals whose income is too low to meet the costs of necessary medical care and to furnish such assistance and services to help

these individuals attain or retain capability for independence or self-care.¹ The Illinois proposal to expand coverage pregnant women for 12 months postpartum appropriately promotes this purpose, and will help our state reduce preventable, pregnancy-related deaths. The Illinois proposal to allow recipients to remain in their managed care plan also encourages continuity of care and assists individuals in accessing necessary care both of which meet and advance to purpose of the Medicaid Act.

In 2015, 93 Illinoisans died within a year of their pregnancy, leaving children and loved ones behind.² Sadly, review committees found that 72% of these pregnancy-related deaths and 93% of violent pregnancy-related deaths were preventable.³ When analyzed by race, non-Hispanic Black women living in Illinois were found to be six times as likely to die of a pregnancy-related cause and three times as likely to experience severe maternal morbidity. Data collected by Illinois Department of Public Health (IDPH) Maternal Mortality and Morbidity Review Committees showed that in Illinois, the majority of deaths and severe maternal morbidity occurred after 43 days postpartum and that 56% of the pregnancy-related deaths were considered preventable.⁴ Committees also found that 45.1% of women in Illinois with severe maternal morbidity had hypertension, 13.1% had diabetes, and 8.3% had both.⁵ These health challenges cannot be adequately diagnosed and treated within a 60-day period after birth. If coverage were expanded to 12-months postpartum, mothers and babies are more likely to have the chance to experience continuity of coverage and care in the first year of life increasing positive health outcomes for both.

Medicaid covers 44% of births in Illinois,⁶ and the health of our children, caregivers, families, neighbors, and communities depend on expanding access to care in the postpartum period. By expanding Medicaid coverage to 12 months postpartum, our state can make significant progress toward reducing maternal mortality and morbidity. We are not alone in our support of expanding postpartum coverage. Both the American Medical Association and the American College of Obstetricians and Gynecologists have recommended expanding coverage throughout the entire postpartum period as a way to address postpartum pregnancy-related tragedies.^{7 8}

In addition to expanded postpartum coverage, Shriver Center supports efforts to ensure greater continuity of care through MCO reinstatement for beneficiaries who have redetermination forms that are processed within 90 days of the termination of their Medicaid. We know that for many of our clients, having consistent access to medical and behavioral health homes among other MCO services is critical to addressing health needs, preventing costly unnecessary urgent care and unintended disruptions in an individual's care plan caused by churning through Fee For Service Medicaid and MCOs which have different provider networks and often have different rules for coverage, prior approval, and authorizations.

¹ 42 U.S.C. §1396-1

² See the Illinois Department of Public Health's 2018 Maternal Morbidity and Mortality Report <http://dph.illinois.gov/sites/default/files/publications/publicationsowhmaternalmorbiditymortalityreport112018.pdf>

³ Ibid

⁴ Ibid

⁵ Ibid

⁶ See Kaiser Family Foundation data on births financed by Medicaid. [https://www.kff.org/medicaid/state-indicator/births-financed-by-medicaid/?currentTimeframe=0&sortModel={\"colld\":\"Location\", \"sort\":\"asc\"}](https://www.kff.org/medicaid/state-indicator/births-financed-by-medicaid/?currentTimeframe=0&sortModel={\)

⁷ See the American College of Obstetricians and Gynecologists' full statement in support of expanding postpartum coverage <https://www.acog.org/About-ACOG/News-Room/Statements/2019/AMA-Support-for-12-Months-Postpartum-Medicaid-Coverage?IsMobileSet=false>

⁸ See the American Medical Association's public statement in support of expanding postpartum expansion <https://www.ama-assn.org/press-center/press-releases/ama-adopts-new-policies-2019-annual-meeting>

For the foregoing reasons, we strongly urge the Centers for Medicare and Medicaid Services to approve the Illinois Department of Healthcare and Family Services' proposal to expand postpartum coverage, provide full Medicaid benefits for women up to 213% of the federal poverty level (FPL), and align continuous eligibility for mom and baby through 12 months postpartum as soon as possible. We also strongly urge CMS to approve the Illinois Department of Healthcare and Family Services' proposal to promote continuity of care by allowing Medicaid recipients who are reinstated to remain enrolled in their MCO.

Thank you for the opportunity to provide comments on this 1115 Demonstration Waiver Application.

If you have any questions or require any clarification, please contact Stephanie Altman, Director of Healthcare Justice.

Respectfully Submitted,

Stephanie F. Altman

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