



MASSACHUSETTS MEDICAL SOCIETY

Every physician matters, each patient counts.

**TESTIMONY IN SUPPORT OF H.1137 and S.646,
AN ACT ENSURING ACCESS TO FULL SPECTRUM PREGNANCY CARE
BEFORE THE JOINT COMMITTEE ON FINANCIAL SERVICES**

May 2, 2023

The Massachusetts Medical Society (MMS) is a professional association of over 25,000 physicians, residents, and medical students across all clinical disciplines, organizations, and practice settings. The Medical Society is committed to the elimination of racial and ethnic disparities in maternal and child health outcomes and strives to achieve a health care system wherein all people have equal access to comprehensive, affordable, high-quality, integrated health care throughout their lives, but especially during critical times such as the perinatal period. The Medical Society also supports legislative measures that will increase appropriate access to abortion services. **As such, the MMS wishes to be recorded in support of House bill 1137 and Senate bill 646, *An Act Ensuring Access to Full Spectrum Pregnancy Care*.**

Access to affordable, comprehensive reproductive and perinatal care services is key to improving health outcomes for birthing people and children in the Commonwealth. Right now, excessive out-of-pocket health care costs can put essential pregnancy-related care out of reach to those who need it, harming patients, families, and birthing individuals. There are long-standing inequities in maternal and child health outcomes in the Commonwealth, rooted at its core in racism and barriers to care. In Massachusetts, Black women are twice as likely as white women to die from pregnancy-related complications. Severe maternal morbidity (SMM), which includes unexpected outcomes of labor and delivery that result in significant short- or long-term consequences to a person's health, disproportionately impacts women of color, with non-Hispanic Black women twice as likely to experience SMM compared with non-Hispanic white women.¹ Further, according to the Centers for Disease Control and Prevention (CDC), while Massachusetts had the third lowest infant mortality rate (IMR) in the nation with a rate of 3.94 deaths per thousand live

¹ Andreea A. Creanga and others, "Racial and Ethnic Disparities in Severe Maternal Morbidity: A Multistate Analysis, 2008-2010," *American Journal of Obstetrics and Gynecology* 210 (5) (2014): 435.

births in 2020,² the overall success in this area belies pervasive disparities that exist across the Commonwealth. Low-income communities and communities of color have IMRs that are nearly double the statewide average and above the 5.0 target Healthy People 2030 goal rate set by the U.S. Department of Health and Human Services. In fact, the IMRs for Black non-Hispanics and Hispanics were 2.1 and 1.5 times that of white infants, respectively, according to the most recent data available from the Massachusetts Department of Public Health (DPH).³

Access to routine prenatal care improves the health of pregnant people by identifying and treating complications. According to the Center for Health Information and Analysis (CHIA), newborns of mothers who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die than children born to mothers who receive prenatal care. However, in the Commonwealth nearly 40% of mothers reported they delayed prenatal care because they lacked the money or insurance to pay for the visits.⁴ From 2016-2018, average spending during pregnancy in Massachusetts grew an average of 4%, while out-of-pocket expenses grew 23%.⁵ High deductible health plans (HDHPs) represent a growing share of the private health insurance market in Massachusetts, with more than one in every three privately insured residents enrolled in an HDHP in 2019 (36%). With HDHPs, high out-of-pocket costs often renders care unaffordable and out of reach. A 2021 CHIA report found that 52% of privately insured residents with HDHPs reported affordability issues.⁶ In fact, HDHP members reported higher rates of affordability issues than other privately insured residents across all four domains of affordability, particularly forgoing health care that they thought was necessary due to the cost of that care.

An Act Ensuring Access to Full Spectrum Pregnancy Care would require all Massachusetts regulated health plans to cover the full spectrum of pregnancy-related care, including abortion,

² Centers for Disease Control and Prevention, *Stats of the states – infant mortality*. September 30, 2022. Available at:

https://www.cdc.gov/nchs/pressroom/sosmap/infant_mortality_rates/infant_mortality.htm

³ Massachusetts State Health Assessment, *Maternal, Infant, and Child Health*.

<https://www.mass.gov/doc/chapter-2-maternal-infant-and-child-health/download>

⁴ CHIA Mandated Benefit Review, *An Act Ensuring Access to Full Spectrum Pregnancy Care*, June 2021, available at: <https://www.chiamass.gov/assets/docs/r/pubs/mandates/MBR-Access-to-Full-Spectrum-Pregnancy-Care.pdf>.

⁵ Massachusetts Health Policy Commission. DataPoints Issue 22: *Growth in out-of-pocket spending for pregnancy, delivery, and postpartum care in Massachusetts*. Mar. 29, 2022. Available at:

<https://mass.gov/info-details/hpc-datapoints-issue-22>

⁶ CHIA, AN INSIDE LOOK: Affordability Issues are More Common in High Deductible Health Plans, March 2021, available at: <https://www.chiamass.gov/assets/docs/r/pubs/2021/Inside-Look-High-Deductible-Plans.pdf>.

miscarriage management, prenatal care, childbirth, and postpartum care, without any kind of cost-sharing. Furthermore, the legislation mandates that the coverage offered shall not impose unreasonable restrictions or delays in coverage. This legislation is critical to ensuring access to affordable reproductive health care and to addressing the Black maternal health crisis gripping the Commonwealth and the nation. The nominal impact on insurance premiums calculated by CHIA would be offset by downstream savings. More importantly, there is a moral imperative to design a system where cost is not a barrier to high quality maternal and perinatal health care.

It is for these reasons that the Medical Society respectfully urges a favorable report on **H.1137/S.646, *An Act Ensuring Access to Full Spectrum Pregnancy Care.***