

Maternal and Child Health Access



Monthly Virtual Meeting

Thursday, November 18, 2021 - 10:00 am to 12:00 pm

Where?

This is a virtual meeting
Do Not come to our location!

10:00 AM to 12:00 PM

After you register (at RSVP
below) look for the Zoom link
in your registration
confirmation email



Speaker/Topic:

**Lucy Quacinella, JD, Multiforum
Advocacy Solutions**

**Recent improvements in
pregnancy and post-pregnancy
coverage**

**Additional Updates- Health
Coverage**

**November is Prematurity
Awareness Month**

**According to the March of
Dimes, this month, 33,000
babies will be born premature.
And rates continue to rise...**

Notes from Monthly Meeting October 21, 2021 (see [website](#) for presentation slides)

Mike Odeh, Director of Health Policy Children Now “The Future of Medi-Cal for Kids” – changes in 2022 with CalAIM and Medi-Cal

Sign on to letter - Premium Payments in Medi-Cal – by Tues 11/16

Mike provided an excellent presentation on children’s health in California and the legal structures underpinning children's rights in Medi-Cal. Kids have a unique legal guarantee to medically necessary services in Medi-Cal. The Early, Periodic Screening, Diagnosis and Treatment (EPSDT) program guarantees any services necessary to correct or ameliorate a diagnosed physical or mental condition. Health plans are supposed to be monitored to be sure kids are getting care.

Children and adolescents need at least nine preventive screenings within well-child visits. Because Medi-Cal and MCAP premium payments create barriers to health coverage for hundreds of thousands of Californians, Children Now is on a mission to eliminate premiums. **See their report on this issue [here](#) and take the opportunity to sign on to a letter addressing premium payments [here](#).**

Ninety-two percent of kids are enrolled in managed care, including undocumented children in Medi-Cal from birth to 26. Ensuring managed care plans are providing the full range of needed services and screenings to these kids is thus of extreme importance. Managed care is changing and taking on more and more services. New contracts will begin in 2024, to be awarded next year and counties will be limited to two plans per county; no more Geographic Managed Care in San Diego and Sacramento.

However, managed care has a spotty past with kids – as documented in [state auditor reports](#), past Healthcare Effectiveness Data and Information Set ([HEDIS](#)) reports, academic research and a new [Children’s Preventive Services report](#). Statewide, fewer than half of kids (48%) on Medi-Cal received an annual checkup and California is the worst state for well-baby screening rates in Medi-Cal. Disparities by race and language make these statistics even worse, and of course all of this was made worse by COVID-19 – vaccines, dental visits and other visits were all reduced.

What is ahead is CalAIM – “a multi-year initiative by DHCS to improve the quality of life and health outcomes of our population by implementing broad delivery system, program and payment reform across the Medi-Cal program.” Plans are to provide wellness, prevention and care management based on an individual risk assessments and population health management, which itself is based on analysis of data from the communities. Plans will provide a panoply of Enhanced Care Management and Community Supports that vary by county.

Added to benefits provided by the plans are a number of improvements that will come about due to legislative and budget measures – asthma preventive services, Community Health Worker benefit, Medi-Cal Rx, etc. Mike provided a [timeline](#) of these benefits and their implementation dates. Finally, the last slide lists several important [children’s health reports](#) available on their webpage.

Planning for a Healthy Home, Body and Baby

MCHA listed materials and videos available to order, download and print, or view at the [UCLA Reproductive Health and the Environment](#) website. This includes a new fotonovela on “The Life of a Pregnant Woman During COVID-19” in English and Spanish. Also available are wallet cards and flyers.

Breast Cancer Awareness

MCHA prefers to speak of Breast Cancer Prevention – and to fight the environmental and other harms that have increased the disease to 1 in 8 lifetime chance of occurrence. We highlighted the term, “Pinkwashing” – when a company or organization claims to care about breast cancer by promoting a pink ribbon product, but at the same time produces, manufactures and/or sells products that are linked to the disease. The over-the-top example was a pink fracking drill, with the fracking industry using toxic chemicals linked to the disease. See the videos [HERE](#). We hope we gave you food for thought!

New Since Meeting:

New Infographic - Abortion is a Public Health Issue – Office of Women’s Health, Los Angeles

Access to abortion is fundamental to the health of individuals, families, and communities. In the United States, abortion is common and extremely safe. Access to abortion remains a public health priority, as laws and policy changes roll back reproductive rights, putting health and lives at risk. The Office of Women’s Health has created the infographic linked below to educate the Los Angeles County public about the current state of abortion in the U.S.

You can find this infographic and the list of references on our website [HERE](#).

Please also consider joining us at our conference “[One Step Forward, Two Steps Back: Abortion Restrictions and Maternal Health Policy](#)” next Wednesday morning, **11/17**:

Also, effective for dates of service on or after November 1, 2021, the *Abortion* section in the appropriate Part 2 Provider Manual section has been updated to ensure flexibilities exist for providing medically necessary abortion services during the COVID-19 Public Health Emergency (PHE) and to remove requirements for a Medicare denial for certain abortion services.

Governor Signs Bill Expanding Screening for Colorectal Cancer

The ongoing COVID-19 pandemic has exacerbated existing barriers for low-income and senior patients by limiting the availability of in-person colonoscopies. The uninsured and underinsured are least likely to get screened and most likely to be diagnosed at a late stage, where survival rates drop to 14 percent. Colorectal cancer is the third leading cause of cancer deaths in men and women in the United States but is the most preventable with screening and early detection. AB 342 removes the ability of insurance companies to charge co-pays and deductibles in the screening process for colorectal cancer; apparently [there are some loopholes](#) even tho' colonoscopies are covered by insurance with no-co-pay thanks to the Affordable Care Act. Removing this cost-sharing has been shown to increase colorectal cancer screening

Mental Health Conditions Are the Most Common Complication of Pregnancy and Childbirth – Maternal Mental Health Leadership Alliance

Having a new baby should be the happiest time in a family's life.

But it doesn't always work out that way.

During pregnancy or the first year following pregnancy, 1 in 5 women or childbearing people will experience anxiety or depression. In fact, mental health issues are the most common complication of pregnancy and childbirth, turning joy into sadness, loneliness, confusion, regret, and guilt. [See more...](#)

What's in it for health care? Build Back Better....

The health care components of the [Build Back Better Act](#) as proposed in the House on October 28th and then amended November 3rd include historic accomplishments. Among other notable achievements, the bill will go a long way to fulfilling the vision of the Affordable Care Act and offering every American comprehensive health coverage; make major investments reducing racial disparities in maternal outcomes; and establish Medicare negotiation of prescription drug prices for the first time.

New Coverage Option for Adults in the Coverage Gap in Non-Expansion States

The BBB Act provides a path to health care access for people in states in which there was no clear short-term path to Medicaid expansion. This extraordinary accomplishment reflects intense advocacy from many people across the country.

Specifically, through the end of 2025, adults in the coverage gap qualify for advance premium tax credits (APTCs) and cost-sharing reductions (CSRs). CSRs raise the actuarial value of silver plans to 99%, which means that coverage typically will not have a deductible but could have small copayments. Any state that rolls back coverage (including expansion coverage) sees a reduction in federal matching payments through 2025. An expansion state that retains coverage has the federal cost-share for expansion adults rise from 90% to 93% during those same years.

Coverage and Care Delivery Improvements for Prenatal and Postpartum Mothers and Children

The BBB Act includes landmark policies that improve maternal and child health and advance equity, including key provisions that:

- Ensure new mothers have access to comprehensive health care services during the postpartum period by making 12-month postpartum coverage mandatory in Medicaid and CHIP.
- Make historic investments to end the maternal health crisis by incorporating and providing funding for key provisions of the Black Maternal Health Momnibus Act.
- Address churn and prevent eligible children from becoming disenrolled from coverage by requiring 12-month continuous eligibility for children who are insured by Medicaid and CHIP.
- Provide a new option that allows states to extend income eligibility for CHIP up to 300% FPL.
- Create a new Maternal Health Home state option in Medicaid to improve care coordination for pregnant and postpartum mothers.
- Make the CHIP program permanent.
- Extend critical poverty reduction efforts by providing a one-year extension of the expanded Child Tax Credit and making the refundability of the Child Tax Credit permanent.

This section of the bill was one of the few to survive virtually unscathed from the earlier and much larger \$3.5 trillion version of the bill, reflecting a welcome prioritization of maternal and child equity and health coverage.

Improvements to the Affordability of Health Insurance in the Marketplaces

During the pandemic, Congress temporarily lowered premiums in marketplace plans by increasing advance premium tax credits (APTCs). The BBB Act continues these increased APTCs through December 31, 2025, giving millions of families access to zero-premium or low-premium coverage.

[see more](#)

Resources

Please help spread the word.

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Save the Date

Tuesday, November 16 10 AM - 11 AM - BAILA Network Launch!

The BAILA Network is a collaborative that connects benefits enrollers, legal service providers, promotores comunitarias, and community outreach workers to support Los Angeleno immigrant families and essential workers to access the public benefits they need to stay healthy and strong.

The BAILA Network includes Neighborhood Legal Services of Los Angeles County, Maternal and Child Health Access, Hunger Action Los Angeles, Coalition for Humane Immigrant Rights, St. John's Well Child & Family Center, Visión y Compromiso, Asian Resources, Inc., Community Clinic Association on Los Angeles County, Northeast Valley Health Corporation, and Venice Family Clinic.

Please see the details of virtual launch event below. We hope to see you in attendance.

BAILA Network Virtual Launch

Tuesday, November 16, 2021

10:00 AM - 11:00 AM

[ZOOM Webinar Link](#)

ID: 819 1296 8449 Passcode: 144112

Wednesday November 17th, 2021 9.30AM -12.30PM Women's Health Equity Coalition Conference –“[One Step Forward, Two Steps Back: Abortion Restrictions and Maternal Health Policy](#)”

Nov. 16 & 18, 2021: [Dental Care is a Reproductive and Birth Equity Issue](#)

Community Catalyst's Dental Access Project and Women's Health Program are partnering with Raising Women's Voices to offer a free virtual convening on Nov. 16 and 18. Speakers will explain the interactions between oral health and pregnancy, the importance of preventive dental care and the need to improve dental coverage for pregnant people, especially those with Medicaid coverage.

Thanks to a lot of good advocacy and like-minded state staff, dental care is a benefit during pregnancy and 60+ days afterward for Medi-Cal in California. Still, the convening is good background on the importance of oral health in pregnancy and the struggles nationally to secure good oral health for low-income people, especially during pregnancy.

Job opportunities available!

Please click on the job title you are interested in to view the full job description and the application process. Provide a cover letter and current resume with your application that

specifically outlines your employment history experience and educational background for the job for which you're applying.

MCHA is an Equal Opportunity Employer; women and people of color are strongly encouraged to apply.

- [IT Support Technician](#)
- [Health Programs and Benefits Trainer](#)
- [Coordinator Oral Health Advocacy for Children and Pregnancy](#)
- [Parent Coach / S6 - Welcome Baby Program](#)

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