

Maternal and Child Health Access



Monthly Virtual Meeting

This Thursday, Oct. 21, 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:

**Mike Odeh, Director of Health
Policy
Children Now**

**“The Future of Medi-Cal for Kids” –
changes in 2022 with CalAIM and
Medi-Cal**

**Additional Updates- Health
Coverage**

**October is Domestic Violence
Awareness Month and Breast
Cancer Awareness Month**

Additional Updates

The meeting notes and materials are posted on MCHA’s website at
www.mchaccess.org/meetings.htm

**Notes from Monthly Meeting September 16, 2021 (see website for
slides from both presentations):**

“Baby Safety Month and the Pandemic: Jenna Stewart, MA, CHES Health Education Program Specialist California Poison Control System - University of California San Francisco

Given that September is “Baby Safety Month” focused on infant safety and prevention, and calls have increased to the Poison Control Centers, September was a good opportunity to review poison control issues and safety. Jenna Stewart led us through main issues of:

- locking up cleaning products and medicines,
- always supervising babies and toddlers,
- when to call 911 or go to the ER (signs and symptoms, and if child has swallowed button batteries) and
- saving the Poison Control number into your phones.

The Covid-19 pandemic has meant an increase in calls to Poison Control by 20% nationally, largely due to misuse of cleaners and sanitizers and children ingesting them – a 40% increase there over pre-pandemic. In addition to the important tips directed at pandemic behaviors such as washing fruits and vegetables (only use water), never mixing cleaning products, etc. Ms. Stewart reviewed the Poison Control System resources available, the weekly Text Tips program and more. These resources are available in multiple languages spoken in California. Check them out! www.calpoison.org; 1-800-222-1222

An Update on SARS-CoV-2, COVID-19 and Variants – Timothy Brewer, MD, MPH, Departments of Medicine and Epidemiology

Dr. Brewer led us through a lot of good information in a very understandable way!

- COVID-19 updates, origins and how variants emerge,
- Classification of variants,
- Delta, Beta and other recent variants of concern
- Vaccine effectiveness, breakthrough infections and boosters.

Updates – Numbers of cases nationally in California and Los Angeles, numbers of people vaccinated. How COVID emerged – Zoonosis – closely related to bat viruses, although no intermediate host has been identified to date. Mutations are a natural by-product of RNA replication. Dr. Brewer explained spike protein mutations and how they bind to a receptor to enter our cells. These viruses were rare before 3/20, but by June were 74% of the viruses examined (“sequenced”). He explained the classification of variants – being “of interest” or “of concern” or “of high consequence” – and which are appearing where in the world.

Dr. Brewer is extremely well-versed on COVID-19 research and the effectiveness rates for the various vaccines against COVID and variants and provided the citations for the research he quoted. Currently, the vast majority of COVID infections are due to the Delta variant and are primarily in unvaccinated people. Research shows the vaccine is effective in preventing hospitalizations in older adults, against serious disease in adults, and even after 6 months, although effectiveness declines over time. For the Pfizer vaccine, boosters lowered infection by 11.3% and severe disease by 19.5% in one study. Current vaccines remain highly effective against serious COVID-19 disease.

Post-Pregnancy Continuation – Lynn Kersey spoke of the need to be sure people know that Medi-Cal continues after pregnancy, as it does for everyone on Medi-Cal during the Public Health Emergency unless they request that it stop or they move or die. Medi-Cal for pregnancy covers all medically-necessary services and will last until 12-31-21 or later, depending on state and federal decisions. In 2022, all Medi-Cal/MCAP will

continue for 12 months after the pregnancy ends. See the announcement and further explanation below.

New Since Meeting:

[Emergency and Pregnancy Medi-Cal During and After the COVID Public Health Emergency](#)

We use these terms interchangeably as well as the term “Limited Scope” – a term we try not to use since non-full scope Medi-Cal does cover full benefits.

We are still awaiting state instructions on how the counties ACT on a report of pregnancy by someone in less than full-scope Medi-Cal. But we are urging report of the pregnancy to a worker or call center or other report (on paper if a report is due, etc) and to keep track of how it was reported – date, time, to whom. This is a great step you can work through with clients so that if their reporting DOESN'T work, you are equipped as an advocate with the facts of what the client did.

Our [advocates/providers' flyer](#), in sum, says:

1) No one should be cut off from Medi-Cal at 60 days postpartum during the PHE. **Coverage is for the full breadth of Medi-Cal services, not just a narrow set of "pregnancy-related" benefits.**

2) It is important for individuals in either Full-Scope Medi-Cal or Restricted Medi-Cal (emergency and pregnancy-related services only) to **let the county – worker, call center, paper report - know that they are pregnant**, or have been pregnant at any time since April 2020 (i.e., when the moratorium on discontinuances from Medi-Cal due to the PHE began).

Why? When the eligibility redeterminations resume in January 2022 (the expected end of the declared PHE), pregnant and post-pregnant individuals will be automatically continued on Medi-Cal until at least April 1, when the 12-month post-pregnancy eligibility extension launches. But the county won't know if a person in Full Scope or Restricted is pregnant or post, unless the person reports the pregnancy or that their pregnancy has ended.

Contact us if questions or problems – see info@mchaccess.org or Lucyqmas@gmail.com or 213-749-4261.

Disabled mothers-to-be face indignity

Though disabled women now get pregnant and give birth at the same rate as nondisabled ones, most obstetricians know little more about them than Frida Kahlo's doctors in Detroit did in 1932. At every step, by virtually every measure, modern medicine has turned its back on these women. They are not pictured on Pampers or Enfamil cartons, not counted in maternity statistics. [Read more...](#)

SB 65 Signed!!! Thanks to Black Women for Wellness' Action Project for the following:

Today (On October 4), we celebrate a HUGE win as Governor Gavin Newsom signed BWWAP's co-sponsored legislation, the California Omnibus Act (SB 65), into law! This marks a significant victory for reproductive justice and the battle against the Black maternal and infant mortality and morbidity crisis in the United States.

This success has been a long time in the making. For years, Black Women for Wellness Action Project has advocated to address racial disparities in maternal health ([read more about this in our Executive Director's recent Op-Ed!](#)). We are thrilled to have been a lead co-sponsor on SB 65 and worked closely with the bill's author, Senator Nancy Skinner, and our partners at Western Center for Law and Poverty to get it passed. We invite everyone to [watch today's bill signing](#), which took place online and featured remarks from Governor Newsom, Senator Skinner, and BWWAP's own Nourbese Flint!

Here's what we just accomplished:

1. Built the midwifery workforce-- established a fund for midwife training programs that meet the priorities of underrepresented groups and those from underserved communities, and prioritize training and placement of graduates in California's maternity care deserts
2. Clarified that pregnant people are exempt from CalWORKS welfare-to-work requirements
3. Codified and expanded California's Pregnancy-Associated Mortality Review Committee to investigate maternal mortality and morbidity, specifically looking at racial and socioeconomic disparities as well as Queer, Trans, and Gender Non-Conforming birthing outcomes
4. Updated data collection and protocols-- because better understanding of problems help ensure timely solutions

The California Omnibus Act is a robust and innovative piece of legislation that re-imagines perinatal care. A report released last month by the Maternal and Child Health Division of the California Department of Public Health revealed that the pregnancy-related mortality ratio for Black women was 4-6x greater than that of other racial and ethnic groups, indicating a negative trend or widening disparity. SB 65 takes a much-needed step toward closing these racial disparities.

We thank the Governor, Senator Skinner, and our partners at Western Center for Law and Poverty, the California Nurse Midwives Association, March of Dimes, National Health Law Program, NARAL Pro-Choice California, the Women's Foundation of California Dr. Beatriz María Solís Policy Institute, and the over 70 health, rights, and justice organizations across California and the country that supported this effort. We also thank YOU for your continued support and activism. Together, we are building a strong movement that is making progress toward a more equitable world.

To learn more, see [our press release here](#), our [co-sponsor joint statement here](#), and the [Governor's press release \(can you spot our ED?\)](#).

Celebrate MCHA!!
Sunday, Oct. 24, MCHA is being honored by Bloom Again!
11:30 AM -1:30 PM at "That's Entertainment" Brunch and
Spotlight, at the Chevy Chase Country Club, 3067 E. Chevy
Chase Dr., Glendale 91206

Bloom Again is an organization that ensures health equity in the healing process by providing rapid response financial assistance for living essentials to economically vulnerable working women who miss work due to a diagnosis of cancer or other illness. Many of MCHA's clients have benefited from Bloom Again helping them over a rough patch and back to work. Tickets are a very reasonable \$21 and are available at www.bloomagain.org/2021. Act fast, as social distancing will be honored and less space accommodated.

Stay tuned for the "Save the Date" for **MCHA's own virtual celebration of our 25th anniversary** and YOU, our supporters and colleagues!

Resources

Please help spread the word.

Family Planning Updates: Have you seen the commercials for Phexxi? Effective for dates of service on or after July 1, 2021, contraceptive vaginal gel, Phexxi® (lactic acid, citric acid and potassium bitartrate), is a clinic benefit for the Family Planning, Access, Care and Treatment (Family PACT) and Medi-Cal programs. Phexxi is reimbursable under HCPCS code A4269 (contraceptive supply, spermicide [e.g., foam, gel], each) with modifier U5 for contraceptive vaginal gel.

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.

Save the Date

Friday October 22, 2021, 10:30 to 11:30 AM

Medi-Cal's Comprehensive Perinatal Services Program, Social Determinants of Health, and the upcoming 12-month post-pregnancy eligibility. MCHA, Black Mothers United, and West County (Sonoma) Health Centers

ONLINE EVENT - Zoom Conference - click to RSVP [HERE](#).

Thursday, Nov. 4, 2021 – 8:30 -10:30 EASTERN time – note this is 5:30 AM Pacific Time! School of Public Health, State University of New York at Albany Breastfeeding Ground Rounds – Marijuana Use During Pregnancy and Breastfeeding

For a full description of this program please visit

our [website](https://www.albany.edu/cphce/bfgr21.shtml). <https://www.albany.edu/cphce/bfgr21.shtml>

All of our programs are available On

Demand <https://www.albany.edu/cphce/bfgr.shtml> 2 weeks after the live webcast.

Click here to Register [HERE](#) Call us at 518.402.0330 or e-mail coned@albany.edu if you need assistance.

Thank you!

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.

Wednesday November 17th, 2021 9.30AM -12.30PM Women's Health Equity Coalition Conference – focused on reproductive health issues and updates. More info to come!

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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