June 1, 2020

**Re: Preserving Access to Obstetric and Gynecologic Care in Medicaid Managed Care During COVID-19**

To whom it may concern,

On behalf of the American College of Obstetricians and Gynecologists (ACOG), the Nation’s leading women’s health organization representing over 60,000 physicians and partners dedicated to advancing women’s health, thank you for your ongoing work to provide Medicaid patients with access to high quality care during these unprecedented times. As you know, obstetrician-gynecologists are on the front lines of responding to the COVID-19 pandemic. At the same time, the United States is in the midst of a maternal mortality crisis, with at least two thirds of maternal deaths deemed preventable. To best respond to these overlapping crises, it is critical that obstetrician-gynecologists be supported so that they can continue to provide essential health care to women. We are writing today to urge Medicaid managed care organizations (MCOs) to preserve access to obstetric and gynecologic care in Medicaid managed care during COVID-19.

ACOG members report that they have been forced to furlough or lay off staff, forgo their own salary, and even close their practices due to significant financial strain. Without adequate financial relief, more practices will be forced to close and women will be unable to access the care they need. One of the primary reasons that women’s health practices have been disproportionately impacted by this crisis is because the U.S. Department of Health and Human Services (HHS) has not distributed relief funds to practitioners that care for patients enrolled in Medicaid. In 2018, 43 percent of births and 16.5 million adult women under the age of 65 were covered by Medicaid. Moreover, in 2019, 80 percent of managed care states reported covering 75 percent or more of low-income adults (including pregnant women) via managed care. These data demonstrate the magnitude of care provided by women’s health practitioners under the Medicaid program and the critical importance of access to obstetric-gynecologists in managed care.

Importantly, the Centers for Medicare and Medicaid Services (CMS) recently released an informational bulletin outlining flexibilities that states and managed care plans can take advantage of to address the impacts of the public health emergency while preserving systems of care and access to services for Medicaid beneficiaries. Specifically, this guidance outlines options for utilizing state directed payments to temporarily enhance payments to physicians and other health care professionals under managed care contracts. **We are writing today to urge MCOs to take advantage of this flexibility and provide direct payments to all obstetrician-gynecologists under your managed care contracts.** To maintain access to essential health services provided by obstetrician-gynecologists – including prenatal care, preventive services, and cancer care – it is critical that MCOs take immediate action to provide financial relief in the form of advanced payments.

In addition to this new opportunity provided by CMS, ACOG urges MCOs to gather data on health care access, utilization, and outcomes for women covered by Medicaid based on their pregnancy status on or after March 18, 2020. As part of the Families First Coronavirus Response Act (Public Law 116-127; “Families First”) states are prohibited from disenrolling individuals from the Medicaid program during
the COVID-19 national emergency.\(^1\)\(^5\) Under the law, any individual enrolled in Medicaid as of March 18, 2020, and any individuals newly enrolled over the course of the pandemic must receive continuous coverage through the end of the national emergency. The continuous coverage provision is particularly important for pregnant women who are normally at risk of losing Medicaid coverage 60 days after the end of pregnancy. While some women are able to successfully transition to other sources of coverage at this time, many are left in the untenable position of being uninsured shortly after a major medical event.\(^6\)\(^7\)

ACOG believes the continuous coverage provision of Families First provides an unprecedented research opportunity to study the benefits of extended coverage in the postpartum period for women on Medicaid. *We urge MCOs to actively monitor access, utilization, and outcomes data for women who are eligible to receive extended postpartum coverage as a result of the COVID-19 pandemic.* Any data compiled by MCOs should be stratified by race, as we know that both the nation’s maternal mortality crisis and the COVID-19 pandemic disproportionately impact communities of color.\(^8\)\(^9\)\(^10\)

Medicaid has a critical role to play in protecting our nation’s mothers from adverse maternal health outcomes, including those linked to COVID-19. In order to best respond to our nation’s overlapping public health crises, obstetrician-gynecologists must be financially viable. Thank you for your consideration of these requests. ACOG stands ready to work with you to ensure that women have access to the care they need during COVID-19 and beyond. If you have any questions please reach out to Emily Eckert, Manager, Health Policy, at **eckert@acog.org**.

Sincerely,

Eva Chalas, MD, FACOG, FACS  
President  

Maureen G. Phipps, MD, MPH, FACOG  
Chief Executive Officer

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