Pregnancy Experts Call for Medicaid Policy Change

Patients Desiring Immediate Postpartum Sterilization Should Not Be Required to Wait 30 Days

November 12, 2021, Washington DC – Postpartum sterilization is a safe and effective form of contraception. It can be performed immediately after birth without increasing the length of stay in the hospital for new mothers. Unfortunately, women enrolled in Medicaid cannot elect to have a postpartum sterilization procedure performed until they have completed a federally required 30-day waiting period. In contrast, people with private insurance are not subjected to the 30-day waiting period.

In a new article published in The Lancet Regional Health – Americas, “Discriminatory Regulations on Postpartum Sterilization for Medicaid Recipients Propagate Health Inequities,” leading experts in obstetric care and members of the Society for Maternal-Fetal Medicine’s (SMFM) Health Policy and Advocacy Committee, Melanie Maykin, MD; Rachel Pilliod, MD; and Erika Werner, MD call for changes to the Medicaid policy that eliminates the two-tiered system of access to this form of contraception. The authors also call for policymakers to engage with patients who have been adversely affected by forced sterilizations or who have been denied sterilization due to the Medicaid waiting period.

Medicaid is the single largest payer of maternity benefits in the United States, covering approximately half of all births and a greater proportion of births among Black, Latinx, American Indian, and Alaskan Native communities. These communities are disproportionately impacted by the waiting period and are already fighting inequities before, during, and after pregnancy. This federal policy adds to these barriers and restricts reproductive autonomy.

While the authors address that the Medicaid waiting period was implemented to protect new mothers from unfair sterilization practices, they also note, “Nearly half of individuals with unfulfilled sterilization requests became pregnant within one year. These pregnancies represent substantial emotional, physical, and financial costs to birthing individuals.”

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About SMFM

SMFM The Society for Maternal-Fetal Medicine (SMFM), founded in 1977, is the medical professional society for obstetricians who have additional training in high-risk, complicated pregnancies. SMFM represents more than 5,000 members who care for high-risk pregnant people and provides education, promotes research, and engages in advocacy to reduce disparities and optimize the health of high-risk pregnant people and their families. SMFM and its members are dedicated to optimizing maternal and fetal outcomes and assuring medically appropriate treatment options are available to all patients.