



March 24, 2022

Rep. Ruth Richardson
403 State Office Building
St. Paul, MN 55155

Rep. Richardson,

On behalf of the more than 11,000 physician and physicians-in-training members of the Minnesota Medical Association, I am writing to support HF 4161, to ensure all women have access to critical postnatal services. The coverages in this bill are based on recommendations developed by the American College of Obstetricians and Gynecologists (ACOG).

It is well documented that the weeks following birth are critical for the health of both the infant and the mother. Insurers recognize this for the infant by covering recommended well-baby check-ups, needed vaccinations, and other important visits.

Coverage for postnatal care for the mother is not as widely accepted. While many payers will cover one visit postpartum, it is clear that postnatal care needs to be ongoing to optimize the health of women and infants.

To better meet the needs of women and infants in the postnatal period, ACOG's Presidential Task Force on Redefining the Postpartum Visit, recommends that care would ideally include an initial assessment, either in person or by phone, within the first three weeks postpartum. This care would include addressing acute postpartum issues with follow-up; ongoing care as needed; and concluding with a comprehensive well-woman visit no later than 12 weeks after birth. This is specifically outlined in HF4161.

For those of us who are parents, we know the remarkable time during the first weeks postnatal, especially for first-time parents. It is a time filled with joy, but also with great challenges—pain, lack of sleep, stress, depression, and other physical, psychological, and social changes. Yet, during this time, postpartum care often is fragmented among maternal and pediatric healthcare providers. Consistent coverage is needed to ensure that all mothers and

children have access to coordinated, comprehensive care during this critical postnatal period. This is a crucial step to address maternal morbidity and mortality.

Thank you for your work on this important issue. The MMA strongly supports passage of HF 4161.

Sincerely,

A handwritten signature in black ink, appearing to read "Randy Rice". The signature is fluid and cursive, with the first name "Randy" and last name "Rice" clearly distinguishable.

Randy Rice, MD

President, Minnesota Medical Association