

ACA Medicaid Expansions Did Not Significantly Improve Maternal Morbidity

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Rising rates of severe maternal morbidity (SMM) in the U.S. may highlight an unmet need for continuous and comprehensive health insurance coverage for women long before pregnancy begins and well after childbirth. [Our study](#) tested whether ACA Medicaid expansions helped prevent severe maternal morbidity. The expansions may have improved maternal health by providing Medicaid coverage prior to conception, and by improving quality of in-hospital care at the time of delivery. However, the results from our study find little evidence that the expansions improved maternal morbidity. ACA expansions increased blood transfusions, which may indicate an appropriate medical response. Although we did not find a significant benefit of Medicaid expansions on maternal morbidity for outcomes other than transfusions, our measures of maternal morbidity are limited. It will be important to monitor the effects of Medicaid expansion over time on a broader range of maternal conditions across the entire post-partum period.

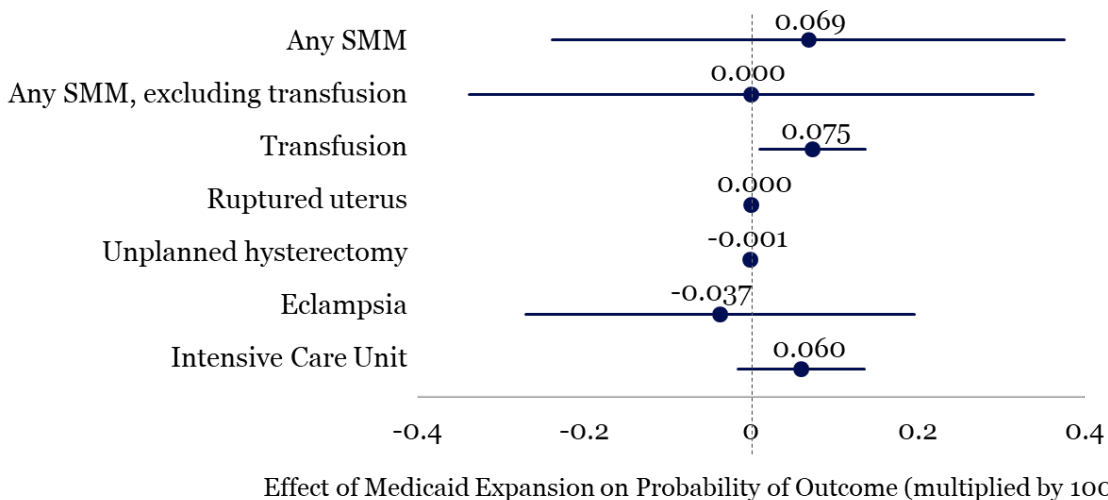


Figure 1. Effect of Medicaid Expansion on the Probability of Experiencing Any Type of Severe Maternal Morbidity (SMM) and Specific Types of SMM.

Data Source: National Vital Statistics System Birth Certificates 2011-2018; N = 3,878,963.

Notes: Figure shows the estimated change in the probability (multiplied by 100) of each outcome pre- vs. post-Medicaid expansion in states that expanded vs. states that did not expand, controlling for other important differences between states. Lines represent 95% confidence intervals. Full methodological details and results are available in the [peer-reviewed article](#).

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