

Mississippi Women of Reproductive Age Face Many Barriers to Good Health

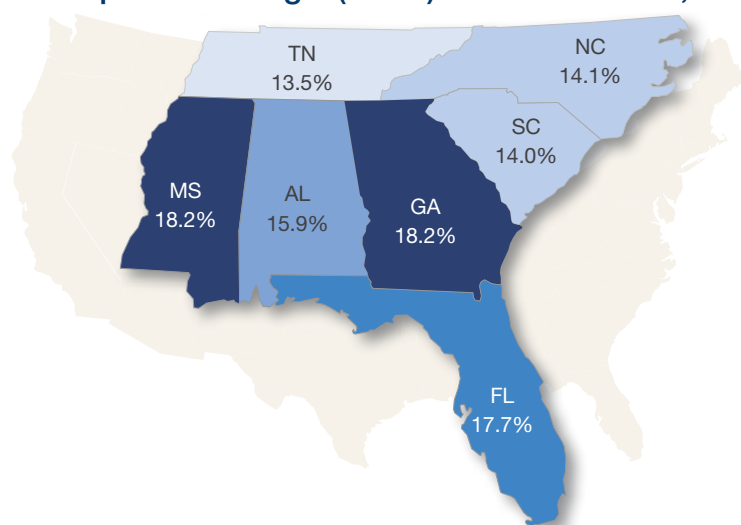


Georgetown University
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CENTER FOR CHILDREN
AND FAMILIES

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In April 2022, a [new state policy option](#), recently made [permanent by federal law](#), went into effect that provided states a simplified route to extend postpartum coverage in Medicaid from 60 days to a full 12 months after a child's birth. If implemented in Mississippi, an estimated [14,000](#) women could benefit. Given that Mississippi has one of the highest uninsured rates for women of reproductive age in the United States, and that health disparities persist for both moms and babies at rates higher than national averages, extending postpartum coverage from 60 days to a year would be an important step to improve the health of families in Mississippi. With the success of the continuous coverage provision in lowering uninsured rates for women of reproductive age during the pandemic, there is evidence to suggest that covering postpartum women in Medicaid for a full year could provide a pathway to ensure that new moms and their babies are able to receive the healthcare that is needed during vital months of their life.

Figure 1. Rate of Uninsured Women of Reproductive Age (18-44) in the Southeast, 2021



Source: Georgetown University Center for Children and Families analysis of the U.S. Census Bureau 2021 American Community Survey (ACS) Public Use Microdata Sample (PUMS).

Almost 1 in 5 Mississippi Women of Reproductive Age Are Uninsured

With 18.2 percent of women age 18-44 uninsured in Mississippi, the state ranks 49th out of 51st in the country. Mississippi women in this age group are tied with Georgia for the highest uninsured rate when compared to neighboring states in the Southeast. See Figure 1. Across all racial and ethnic groups, Mississippi women have uninsured rates higher than the national average (11.7 percent). See Figure 2. States in the Southeast have refused to adopt the Affordable Care Act's Medicaid expansion which has led to higher uninsured rates for all low-income adults.

Key Findings

- Mississippi ranks 49th out of 51st in the country in the uninsured rate for women of reproductive age (18-44) with a rate of 18.2 percent. Across all racial and ethnic groups, Mississippi women have uninsured rates higher than the national average (11.7 percent).
- Mississippi is the only state in the deep South to have not adopted the state option to extend postpartum coverage beyond the minimum 60 days to 12 months.
- Between 2017-2019, the maternal mortality rate in Mississippi was 36.0 deaths per 100,000 live births. Black babies had an infant mortality rate of 11.8 deaths per 1,000 live births in comparison to 6.5 deaths per 1,000 live births for White babies. Mississippi fares worse on all of these metrics for mothers and babies than the U.S. as whole.

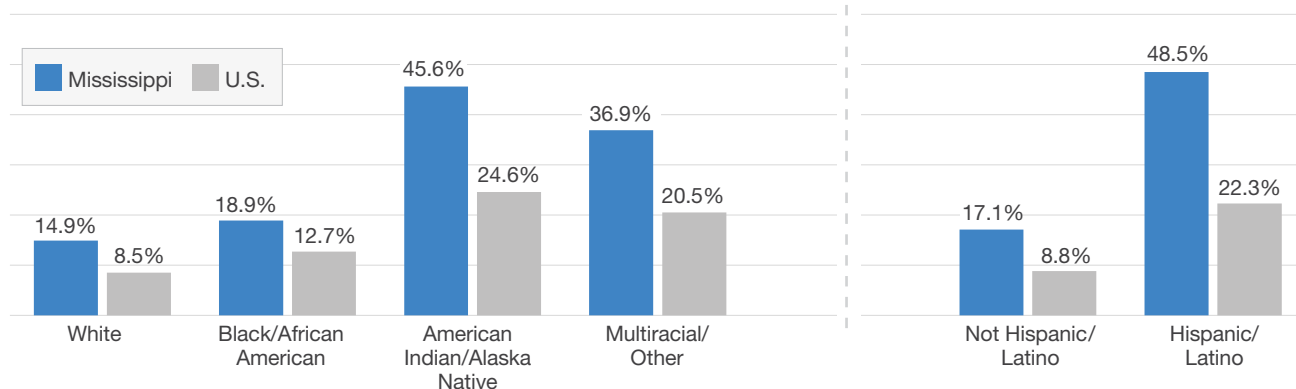
This factsheet was written by Margaux Johnson-Green and Aubrianna Osorio. The authors would like to thank Joan Alker for her contributions to this factsheet. Design and layout provided by Nancy Magill.

The Georgetown University Center for Children and Families (CCF) is an independent, nonpartisan policy and research center founded in 2005 with a mission to expand and improve high-quality, affordable health coverage for America's children and families. CCF is based at the McCourt School of Public Policy's Health Policy Institute.

Mississippi Center for Justice is a nonprofit, public interest law firm committed to advancing racial and economic justice. Supported and staffed by attorneys and other professionals, the Center develops and pursues strategies to combat discrimination and poverty statewide. Visit <http://www.mscenterforjustice.org>.

For more information on the methodology, contact the authors.

Figure 2. Rates of Uninsured Women of Reproductive Age (18-24) in Mississippi and the United States, by Race and Ethnicity, 2021



Source: Georgetown University Center for Children and Families analysis of U.S. Census Bureau 2021 American Community Survey (ACS) data using Public Use Microdata Sample (PUMS). Uninsured rate for Asian/Native Hawaiian/Pacific Islander women in Mississippi is suppressed due to poor reliability.

Even more troubling, Mississippi is the only state in the deep South to have not adopted the state option to extend postpartum coverage beyond the minimum 60 days. Extending coverage beyond 60 days is important because many women face health challenges after they give birth, including [postpartum depression](#), which often doesn't appear until at least six months after the end of pregnancy. A [recent study](#) from Texas found that postpartum women that had extended coverage were much more likely to [seek preventative care](#), utilizing more postpartum, mental health, and substance use disorder services.

Federal Medicaid Protections Have Improved Coverage Rates but These Protections Will Soon Expire

In response to the COVID-19 public health emergency, a federal law was passed to protect access to healthcare in Medicaid by preventing states from disenrolling Medicaid beneficiaries, known as the [continuous coverage provision](#). This continued access to Medicaid coverage has had a protective effect in keeping women of reproductive age insured amidst the pandemic. Between 2019 and 2021, there was a 14 percent drop in the uninsured rate for women 18-44 in Mississippi. Black and White women especially benefited from the continuity of coverage. During this period, Black women in Mississippi saw a 11.3 percent decline and White women saw a 27.7 percent decline in their uninsured rates. *However, this improvement may be short lived as federal protections are set to expire March 31st, 2023, especially if the state does not adopt the 12 months postpartum coverage option as soon as possible.*

Women and Babies in Mississippi Face Health Disparities

The United States has a very high rate of maternal mortality; at 23.8 deaths per 100,000 live births, the rate is [triple](#) that of its peer nations. Women in Mississippi fare even worse. According to a January 2023 [Mississippi Maternal Mortality Report](#), between 2017-2019, the maternal mortality ratio in Mississippi was 36.0 deaths per 100,000 live births, with 42.5 percent of pregnancy-related deaths occurring between 61 days and 1 year. Of pregnancy-related deaths, cardiovascular conditions were the most common underlying cause. Tragically, in [2019](#), the infant mortality rate for Mississippi was 8.1 deaths per 1,000 live births, considerably higher than the U.S. rate of 5.4 per 1,000 live births. Racial disparities persist in infant mortality. In [Mississippi](#), Black babies had an infant mortality rate of 11.8 deaths per 1,000 live births in comparison to 6.5 deaths per 1,000 live births for White babies. See Table 1.

Table 1. Rates of Infant Mortality per 1,000 Live Births in Mississippi and the United States, 2019

Group	Mississippi Rate	United States
Non-Hispanic Black	11.8	10.6
Non-Hispanic White	6.5	4.5
All Infants	8.1	5.4

Source: Georgetown University Center for Children and Families analysis of CDC/National Center for Health Statistics and 2019 & 2020 Infant Mortality Report, Mississippi State Department of Health, available at <https://wonder.cdc.gov/> and https://www.supremecourt.gov/opinions/URLs_Cited/OT2021/19-1392/19-1392-19.pdf.