

Postpartum Depression Garner Attention of Policy and Lawmakers

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The Alliance for Patient Access (allianceforpatientaccess.org), founded in 2006, is a national network of physicians dedicated to ensuring patient access to approved therapies and appropriate clinical care. AfPA accomplishes this mission by recruiting, training and mobilizing policy-minded physicians to be effective advocates for patient access. AfPA is organized as a non-profit 501(c)(4) corporation and headed by an independent board of directors. Its physician leadership is supported by policy advocacy management and public affairs consultants. In 2012, AfPA established the Institute for Patient Access (IfPA), a related 501(c)(3) non-profit corporation. In keeping with its mission to promote a better understanding of the benefits of the physician-patient relationship in the provision of quality healthcare, IfPA sponsors policy research and educational programming.



Postpartum depression (PPD) impacts large numbers of women but receives minimal attention from policymakers and health care insurers.

“Postpartum depression is a mood disorder that affects approximately 600,000 women each year,” notes a new resource from the National Coalition for Infant Health. (1, 2) That many women impacted by one disease state is practically the same size as a single, congressional district of roughly 700,000-plus people (per the 2010 Census).

Health Affairs adds: “Too often, women struggle to get the care they need in the fourth trimester, the 12 weeks following childbirth during which a woman recovers from birth and transitions to nurture and care for her infant.”

One important step forward occurred in March when the FDA approved the first U.S. drug indicated for postpartum depression, which arrives in late June.

So as drug companies are looking for solutions to expand treatment for PPD, what can policymakers do to help?

Medicaid Coverage Expansion

For hundreds of thousands of women, the excitement of having a new baby can be marred by overwhelming feelings of anxiety and helplessness caused by postpartum depression.

“ The Kaiser Family Foundation reports that roughly 45 percent of all births in the United States were financed by Medicaid. This means that those mothers should be able to avail themselves of all pregnancy-related services up to 60 days postpartum, as required by federal law. ”

Per Health Affairs, access to care is an added burden on new mothers, whereby “women [whether they have commercial or Medicaid coverage] receive postpartum care from providers in different locations and in different health systems from their infants.”

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“In addition, 31 states and the District of Columbia have adopted Medicaid expansion programs that extended coverage for new mothers beyond the postpartum period, when historically many women lost coverage,” reports Health Affairs. “However, in the remaining 19 states, pregnancy coverage ends at 60 days postpartum.” (3)

Extensions to Medicaid coverage may be done at the state and federal level, providing coverage for longer periods of postpartum months, which may lead to greater access to services and other wellness checks. Expansion of PPD screenings and support services beyond the so-called fourth trimester has been reported to curb postpartum depression and lead to healthier outcomes.

Expand Family Leave Laws

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At the federal level, there is a new push to expand paid family leave at the federal level with several bills being introduced on both sides of the aisle and also by 2020 Presidential hopefuls.

“ House Bill 696 would cover those workers that apply for family and medical leave insurance benefits from 12-26 weeks, depending on eligibility, with the first payment of benefits to be made to an individual within two weeks after the claim is filed.”

According to Time Magazine, “As many as one in seven women experience postpartum depression throughout the first year of their baby’s life, but longer maternity leaves can significantly reduce the number of new moms who suffer symptoms of it.” (5)

The Time article highlights that those advocating for a “national mandate for paid parental leave in the U.S.,” are increasingly encouraged “due to support from Republicans and the business lobby.” (5)

State lawmakers are also taking notice. For example, last month, North Carolina lawmakers introduced a bill that would provide paid family and medical leave to North Carolina’s workforce. A Duke University study found that paid family leave would not only encourage work force participation and employee retention but would also improve workers’ health. (6) House Bill 696 would cover those workers that apply for family and medical leave insurance benefits from 12-26 weeks, depending on eligibility, with the first payment of benefits to be made to an individual within two weeks after the claim is filed. (7)

Next Steps

The need for increased attention, resources, and policies to help mothers with PPD is clear. Thankfully, the conversation is beginning, and multiple solutions are being explored at the federal and state levels of government. Policymakers have the opportunity to lessen the devastating effects of postpartum depression by broadening awareness, adopting supportive policies and increasing funding for the screening of new parents, especially those most at risk.

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