

A photograph of four healthcare professionals (two men and two women) standing in a hospital hallway. They are all wearing blue scrubs and have their arms crossed, smiling at the camera. The background is a blurred hospital interior with windows and doors. The entire image has a blue tint.

Improving Infant and Maternal Health Outcomes

For The Advisory Committee on Infant and Maternal Mortality

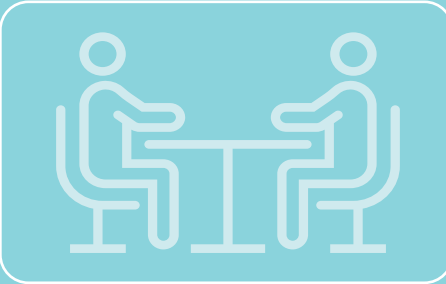
Ericka Burns, PhD
Sr. Director of Health Equity
NFPRHA

National
Family Planning
& Reproductive Health Association

ABOUT NFPRHA



Non-partisan, nonprofit membership association that supports the work of family planning providers and administrators



A leading expert in publicly funded family planning; provides subject matter expertise



Offers members capacity-building support aimed at maximizing effectiveness and sustainability

WHO ARE NFPRHA MEMBERS?

Family Planning Councils

State Health Departments

Planned Parenthood Affiliates

Private, Not-for-profit Agencies

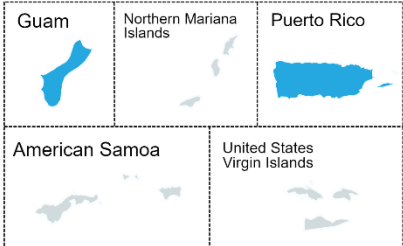
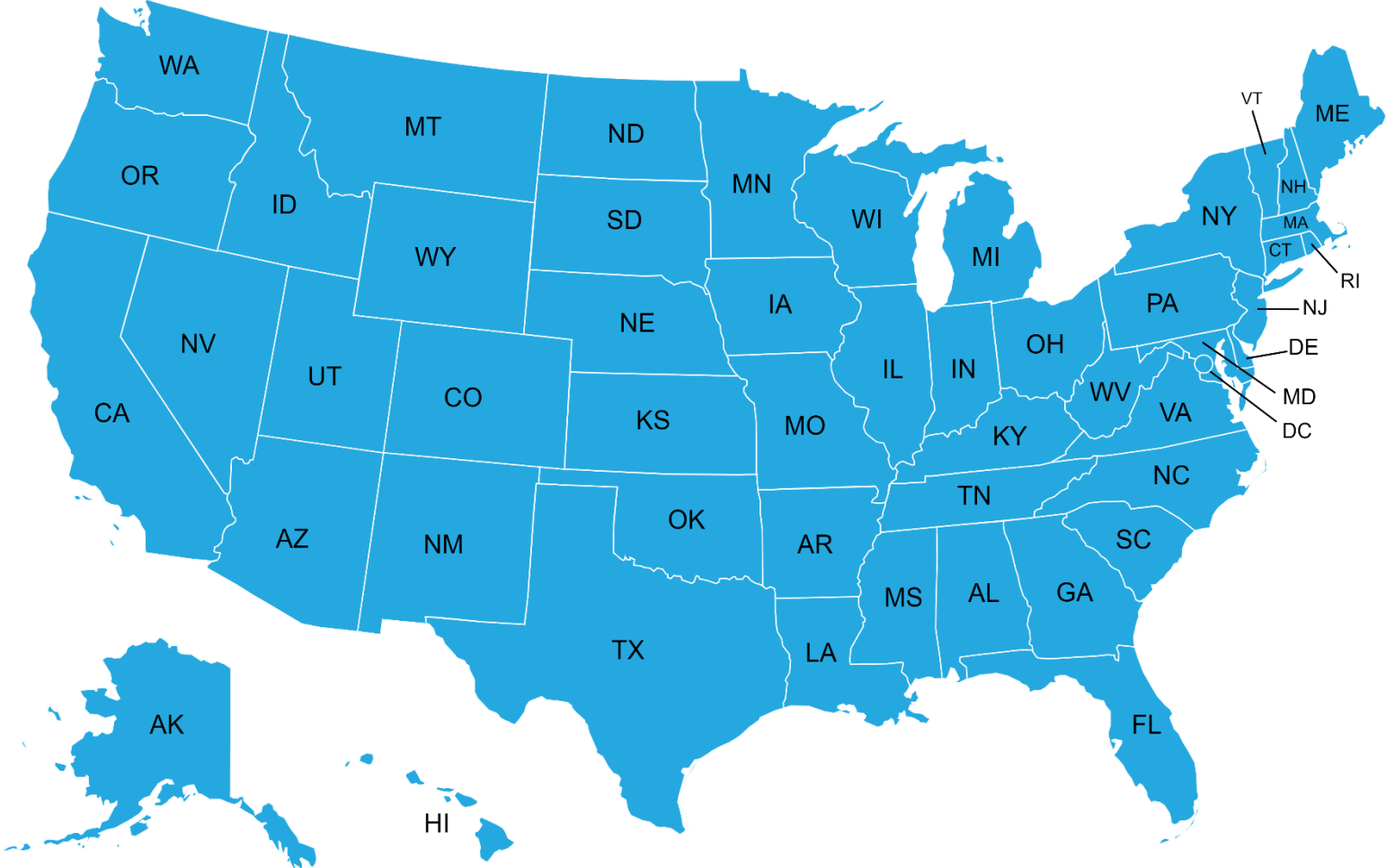
Federally Qualified Health Centers

City and County Health Departments

Medicaid Family Planning Administrators

BY THE NUMBERS

NFPRHA has nearly 1,000 members throughout 50 states, the District of Columbia, Puerto Rico, and Guam.



Improving Infant and Maternal Health Outcomes

- Bicillin Shortage
- Extending Medicaid Postpartum Coverage
- Advancing Health Equity



Bicillin Shortage

Bicillin is the only recommended treatment for pregnant people with syphilis and preventing congenital syphilis.

- With the rise of syphilis and congenital syphilis, Bicillin has to be prioritized to these populations.
- CDC reported that in Mississippi, infant hospitalization with congenital syphilis has spiked by 1,000% from 2016 to 2022.
- We are working with members in North Dakota who have already started to become affected by the shortage.

Extend Medicaid Postpartum Coverage

NFPRHA believes that states should be required to extend Medicaid coverage to beneficiaries 12 months postpartum.

- All people should have access to high-quality, confidential, and affordable health services they need to thrive during and after pregnancy, including prenatal, obstetric, and postpartum care that supports individual autonomy and decision-making.
- No one should have to face a loss of health insurance coverage after childbirth, particularly people with low or no incomes who experience a variety of barriers to accessing care.
- Black and Indigenous people experience, respectively, three and two times the rates of pregnancy-related deaths than white women in the United States, in part due to the implicit and explicit bias of their health care providers and service delivery systems.

Advance Health Equity

NFPRHA Health Equity Tool:

- Developing resources and an assessment tool for family planning providers to use when analyzing gaps in service or evaluating activities intended to promote health equity.
- These resources are intended to support family planning providers as they conduct community needs assessments, program design and data collection, and seek to strengthen partnerships between the family planning network and collaborative organizations in their communities.
 - The resources include community and culturally specific interventions and policy and structural interventions that aim address barriers to care.
- NFPRHA will encourage our members to evaluate their organization's programs and policies to address structural racism, health inequities, and building healthy relationships and trust with their patients.

THANK YOU

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