

MAR 12 2021

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# SENATE RESOLUTION

URGING THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES  
TO AMEND ITS POLICIES RELATING TO POSTPARTUM STERILIZATION  
WAITING PERIODS FOR MEDICAID RECIPIENTS.

1           WHEREAS, postpartum sterilization is a form of  
2           contraception for women in which a doctor cuts and closes or  
3           completely removes the fallopian tubes shortly after a woman  
4           gives birth; and

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6           WHEREAS, postpartum sterilization is the most commonly used  
7           form of contraception in the United States; and

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9           WHEREAS, postpartum sterilization is safe, effective, and  
10          provides substantial cost savings for healthcare systems by  
11          reducing unintended pregnancy without increasing the length of  
12          hospitalization; and

13  
14          WHEREAS, significant systemic barriers to postpartum  
15          sterilization exist for people insured under Medicaid, a federal  
16          program that covers select low-income populations; and

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18          WHEREAS, Medicaid is the nation's largest single payer of  
19          maternity benefits, covering nearly one-half of all births in  
20          the United States and a greater share of births among Hispanic,  
21          African American, Native American, and Native Alaskan  
22          populations compared with private insurance; and

23  
24          WHEREAS, federal regulations require strict consent  
25          parameters, including a thirty-day waiting period for Medicaid  
26          enrollees, to reimburse providers for the sterilization  
27          procedure, and failure to comply with these federal regulations  
28          can result in reimbursement denial for delivery and postpartum  
29          care; and

30  
31          WHEREAS, in contrast, privately insured individuals are not  
32          generally subject to a thirty-day waiting period between consent  
33          and surgery, creating a two-tiered system of access that  
34          restricts reproductive autonomy to those who can afford it; and



1           WHEREAS, as a result, postpartum sterilization rates among  
2 Medicaid enrollees who desire it are lower than privately  
3 insured individuals, even after controlling for hospital and  
4 patient factors; and

5  
6           WHEREAS, a prospective study on publicly insured  
7 participants requesting immediate postpartum sterilization found  
8 that fifty-six percent of requests went unfulfilled, and in over  
9 two-thirds of those cases, problems with the Medicaid consent  
10 form were cited as the reason; and

11  
12           WHEREAS, the most common issues reported with the form were  
13 that the consent form was not completed, the minimum waiting  
14 period had not elapsed, and the consent form contained errors;  
15 and

16  
17           WHEREAS, almost one-half of individuals who had unfulfilled  
18 sterilization requests had a pregnancy within one year, and  
19 these pregnancies can incur substantial emotional, physical, and  
20 financial costs to families and birthing individuals, as well as  
21 a direct cost of billions of dollars annually to the healthcare  
22 system; and

23  
24           WHEREAS, regulations that place an additional undue burden  
25 on patients and families who already face systemic disadvantage  
26 and poor health outcomes, particularly low-income people and  
27 people of color, should be abolished or revised to ensure fair  
28 and equitable access to all reproductive health services; now,  
29 therefore,

30  
31           BE IT RESOLVED by the Senate of the Thirty-first  
32 Legislature of the State of Hawaii, Regular Session of 2021,  
33 that the United States Department of Health and Human Services  
34 is urged to promote reproductive justice by amending its  
35 policies relating to postpartum sterilization waiting periods  
36 for Medicaid receipts; and

37  
38           BE IT FURTHER RESOLVED that certified copies of this  
39 Resolution be transmitted to the United States Secretary of  
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# S.R. NO. 156

1 Health and Human Services and Administrator of the Centers for  
2 Medicare and Medicaid Services.

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OFFERED BY: 

