Health Care for Mothers and Newborns

Healthy women are more likely to have healthy babies. All women need quality health care before, during and between pregnancies to help ensure a healthy pregnancy and healthy infant.

Before pregnancy, women need access to quality preventive services like routine checkups, tobacco cessation, immunizations, and recommended screenings. Covering these services without cost sharing makes it more likely that women can afford them and get healthy before they get pregnant.

During pregnancy, women need regular, quality prenatal care to monitor the pregnancy and address any issues. Given that women are recommended to have over a dozen routine prenatal visits, the elimination of cost sharing is critical to make this care affordable. High-risk pregnancies may require even more regular monitoring to ensure the health and safety of mother and child.

At childbirth, women need comprehensive coverage for labor and delivery, as well as care for the newborn. The elimination of annual limits and lifetime caps on coverage is critical; otherwise, the cost of care for a complicated birth or sick baby can easily overwhelm a family's resources.

After delivery, newborns need comprehensive care in the hospital, followed by coverage for all well-child visits and recommended preventive services, including all vaccinations, without cost sharing. Every woman should have a postpartum visit that includes an assessment of physical, social, and psychological wellbeing to both ensure she is recovering properly and to help her plan for her future health and any future pregnancies.

Most U.S. women will need coverage for pregnancy and childbirth at some point in their lives. Moreover, about half of all pregnancies in the U.S. are unplanned. As a result, **the March of Dimes urges policymakers to ensure that comprehensive maternity and newborn care for pregnant women and infants is a required benefit in all health plans, and that these services are available to families without cost sharing.**