Health insurance is important for pregnant women

Pregnancy is a critical period when a mother’s health has a significant impact on her developing child. Timely prenatal health care can help identify, treat and manage health conditions that can lead to poor birth outcomes and improve maternal health. But the converse is also true: when women do not have access to the health care and prenatal services they need, they and their babies are at risk.

One key factor in ensuring women get the health care and prenatal services they need while pregnant is access to health insurance—which covers a range of services and helps make care affordable. When women have health insurance, they use more prenatal care services and receive earlier prenatal care. They are more likely to have access to necessary prescription medications and are more likely to have a regular doctor or other medical provider. All of this leads to healthier pregnancies and better birth outcomes.

Unfortunately, in the United States, about 1 in 7 women goes without health insurance at some point during her pregnancy. Uninsured pregnant women use fewer prenatal services, are less likely to seek prenatal care in the first trimester and are less likely to receive the optimal number of visits during pregnancy.

**Health insurance is important for pregnant women because it:**

1. Covers the important services women need during pregnancy
2. Makes health care more affordable; and
3. Supports positive health outcomes for women and babies.

**In Her Own Words**

*Having health insurance throughout my pregnancy which covered all the prenatal checkups provided me with a choice in a provider who met my physical and emotional prenatal and postnatal needs. I had experienced postpartum depression after my second pregnancy, and the support I received… during my third pregnancy was irreplaceable. That support during pregnancy helped me feel confident and ready for my baby’s first year… [and] was life-altering for my family as we embarked on our journey as a family of five!*

– Jessi (Minnesota)
Health insurance covers the services women need during pregnancy

Almost all health insurance plans are required to cover a comprehensive set of benefits—known as the essential health benefits—which includes maternity care and other services that are important for women during her pregnancy. Health insurers are also required to cover many prenatal care visits without a copay. This helps make sure that women can see a trusted provider of their choice for their care during pregnancy. Regular prenatal care and visits to a health care provider are critical for healthy pregnancies—and healthy babies.

Health insurance makes getting care more affordable

Health insurance makes it easier for women to get the prenatal services they need by making care more affordable and reducing out-of-pocket costs. Without health insurance, women are more likely to forgo or delay medical services due to cost. And many women without health insurance face difficulty paying their medical bills and pay more out-of-pocket than those with insurance.

Health insurance improves health and birth outcomes

Having health insurance is associated with healthier pregnant women—and healthier birth outcomes. Unfortunately, women who do not have health insurance while pregnant have a 31% higher chance of experiencing a negative health outcome after giving birth and are at an increased risk of maternal mortality. When women don’t receive all the necessary prenatal care, they are at increased risks for low birthweight, preterm birth and neonatal, infant and maternal mortality.

References available upon request.

Our Position

1,000 Days believes that every mother and child in America deserves a healthy first 1,000 days. For this reason, we support guaranteed access to high-quality, affordable health insurance that offers comprehensive benefits for preconception and prenatal care, maternity services, breastfeeding and postpartum supports, pediatric care and other critical maternal, infant and young child health services.