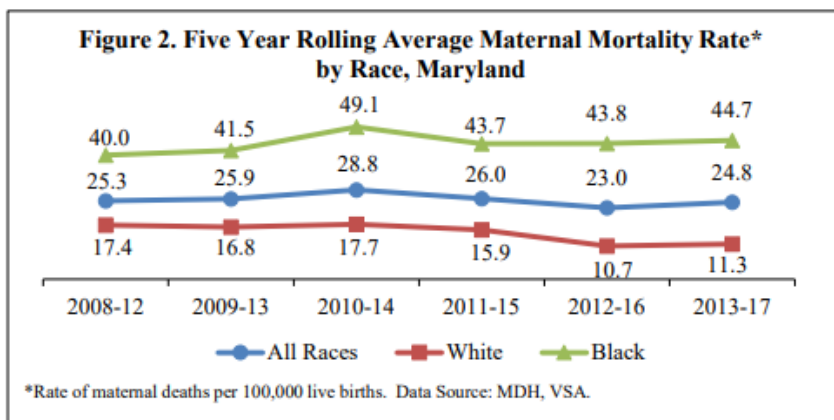




To: The Honorable Chair, Senator Delores G. Kelley, and members of the Finance Committee
 From: Melissa S. Rock, Director, Birth to Three Strategic Initiative
 Re: **SB 923: Maryland Medical Assistance Program - Eligibility and Disenrollment**
 Date: March 10, 2021
 Position: **Support with Amendments**

There are significant racial disparities in birth outcomes for Black birthing individuals and Black babies. Black individuals who give birth in Maryland are 4 times more likely to die after childbirth than White women.

According to the State's Maternal Mortality Review Program, "compared to 2008- 2012, the 2013-2017 White MMR in Maryland **decreased 35.4 percent** and the Black MMR **increased 11.9 percent**, increasing the racial difference. **The 2013-2017 Black MMR is 4 times the White MMR.**"ⁱ (Emphasis Added.)

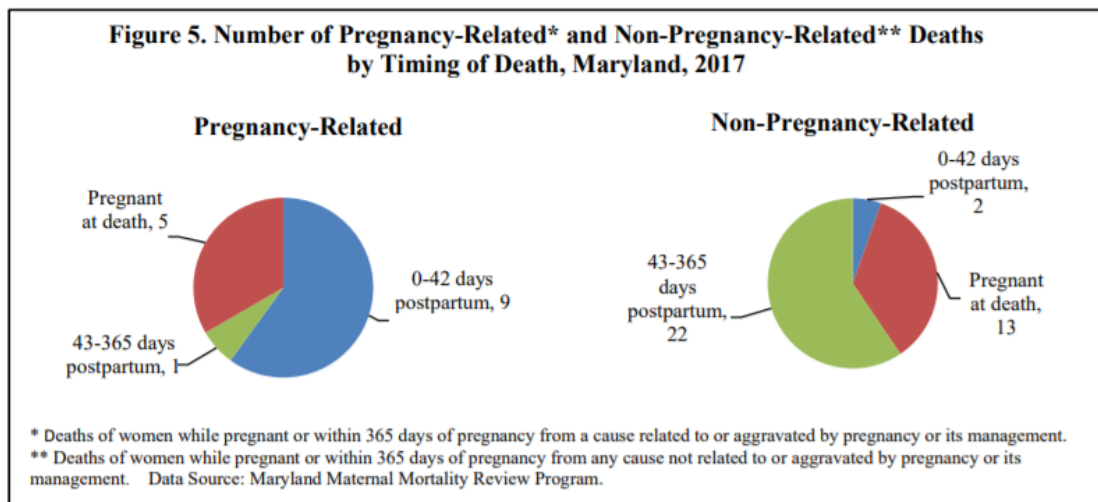


SB 923 will ensure that birthing individuals whose family income is at or below 250% of the federal poverty level do not lose their Medicaid health insurance coverage 60 days after giving birth. In Maryland, as the table below indicates,ⁱⁱ

44% of the maternal deaths within one year of giving birth were 43-365 days after birth. Ensuring health coverage can help prevent some of those deaths. **SB 923 also includes the requirement that regulations are developed to ensure care coordination occurs between providers to ensure there isn't an unexpected lapse in health coverage for this population.**

ACY also supports an amendment to ensure the term "health coverage" is inclusive of dental coverage. Dental coverage is important to improve health outcomes of birthing individuals during the postpartum period, and children in the early months of their development:

- Poor oral health is linked to cardiovascular disease, diabetes, pneumonia, and strokes.ⁱⁱⁱ
- Mothers may transmit the infection that causes tooth decay to their infants.^{iv} Dental coverage would improve both the health of the new mom and baby.
- Infants are 32 times more at risk for early childhood caries if they are from low-income families, have a diet high in sugar, and have mothers with low-income levels.^v



We urge this committee to issue a favorable report on SB 923, as amended, to ensure pregnant individuals receive the ongoing health coverage they need including dental coverage.



To ensure dental coverage is included under this bill, we ask for the following amendment:

On page 2 in line 22, insert “, DENTAL,” after “medical”

ⁱ “Maryland Maternal Mortality Review 2019 Annual Report,” Health –General Article § 13-207 at p. 6.

https://phpa.health.maryland.gov/mch/Documents/MMR/MMR_2019_AnnualReport.pdf

ⁱⁱ *Id.* at p. 10.

ⁱⁱⁱ https://www.ada.org/~media/ADA/Publications/Files/patient_61.ashx

^{iv} Damle, S G et al. “Transmission of mutans streptococci in mother-child pairs.” *The Indian journal of medical research* vol. 144,2 (2016): 264-270. doi:10.4103/0971-5916.195042

^v American Academy of Pediatric Dentistry, Council on Clinical Affairs. *Perinatal and Infant Oral Health Care*. 2016.