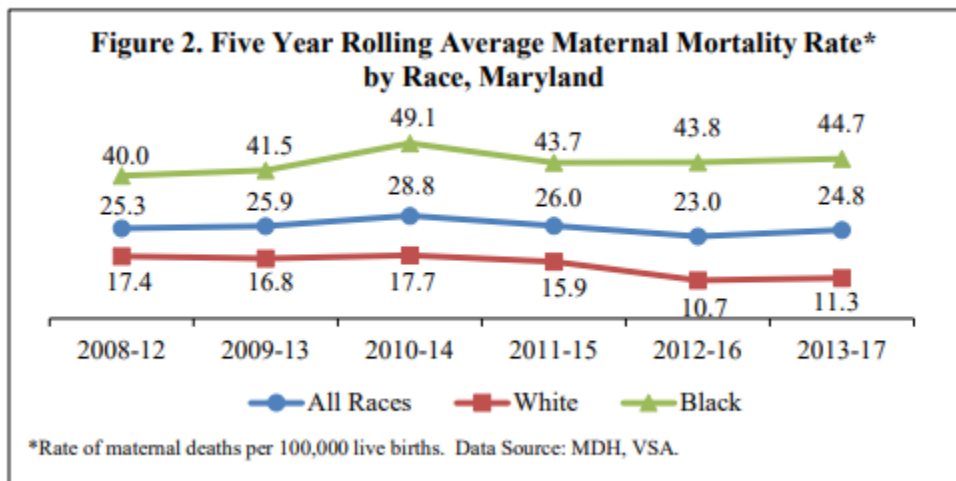




To: The Honorable Chair, Delegate Shane E. Pendergrass, and members of the Health and Government Operations Committee
 From: Melissa S. Rock, Director, Birth to Three Strategic Initiative
 Re: **HB 1349- Public Health - Maryland Prenatal and Infant Care Grant Program Fund**
 Date: March 19, 2021
 Position: **Support with Amendments**

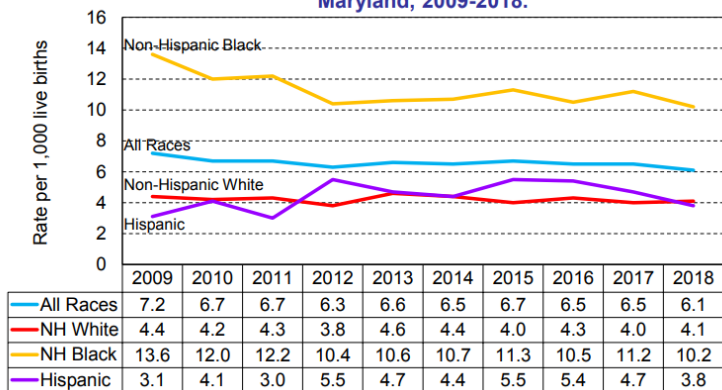


There are significant racial disparities in birth outcomes for Black pregnant individuals and Black babies. Black pregnant individuals in Maryland are 4 times more likely to die after childbirth than their White counterparts (see Figure 2 included here).ⁱ According to the State's Maternal Mortality Review Program, "compared to 2008- 2012, the 2013-2017 White MMR in Maryland **decreased 35.4 percent** and **The 2013-2017 Black MMR is 4**

the Black MMR **increased 11.9 percent**, increasing the racial difference. **The 2013-2017 Black MMR is 4 times the White MMR.**"ⁱⁱ (Emphasis Added.)

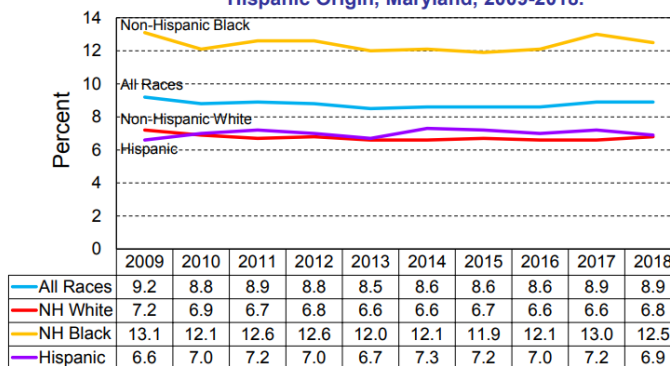
INFANT MORTALITY

Infant Mortality Rate by Race and Hispanic Origin, Maryland, 2009-2018.



LOW BIRTH WEIGHT

Percentage of Low Birth Weight Infants by Race and Hispanic Origin, Maryland, 2009-2018.



Similarly, the infant mortality rate for Black babies in Maryland is almost 2.5 times higher than the infant mortality rate for White babiesⁱⁱⁱ and low birth weight rates (a leading cause of infant mortality) for Black babies is almost 2 times that of White babies^{iv} (see graphs above). Please also see the attached graphs at the end of this testimony for county level racial disparity data in infant mortality^v and low birth weight^{vi} from Maryland's 2017 Vital Statistics Report.

ACY was pleased to be one of the organizations that supported the creation of the Maryland Department of Health's Maryland Prenatal and Infant Care Coordination Services Grant Program Fund. The impetus for creating that fund was to close the racial disparities in birth outcomes for Black Marylanders. High quality care coordination ensures that families are connected with the services best

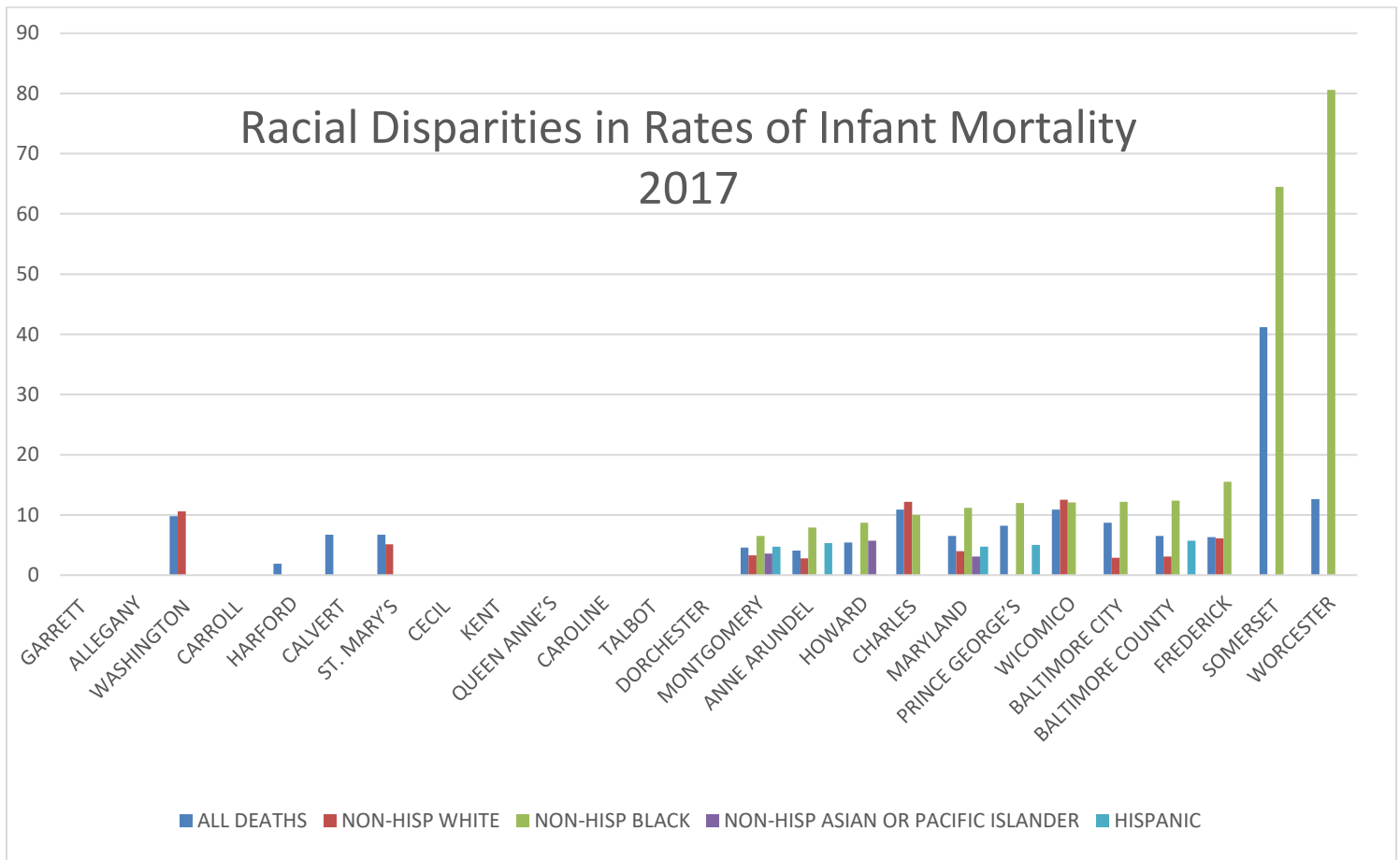


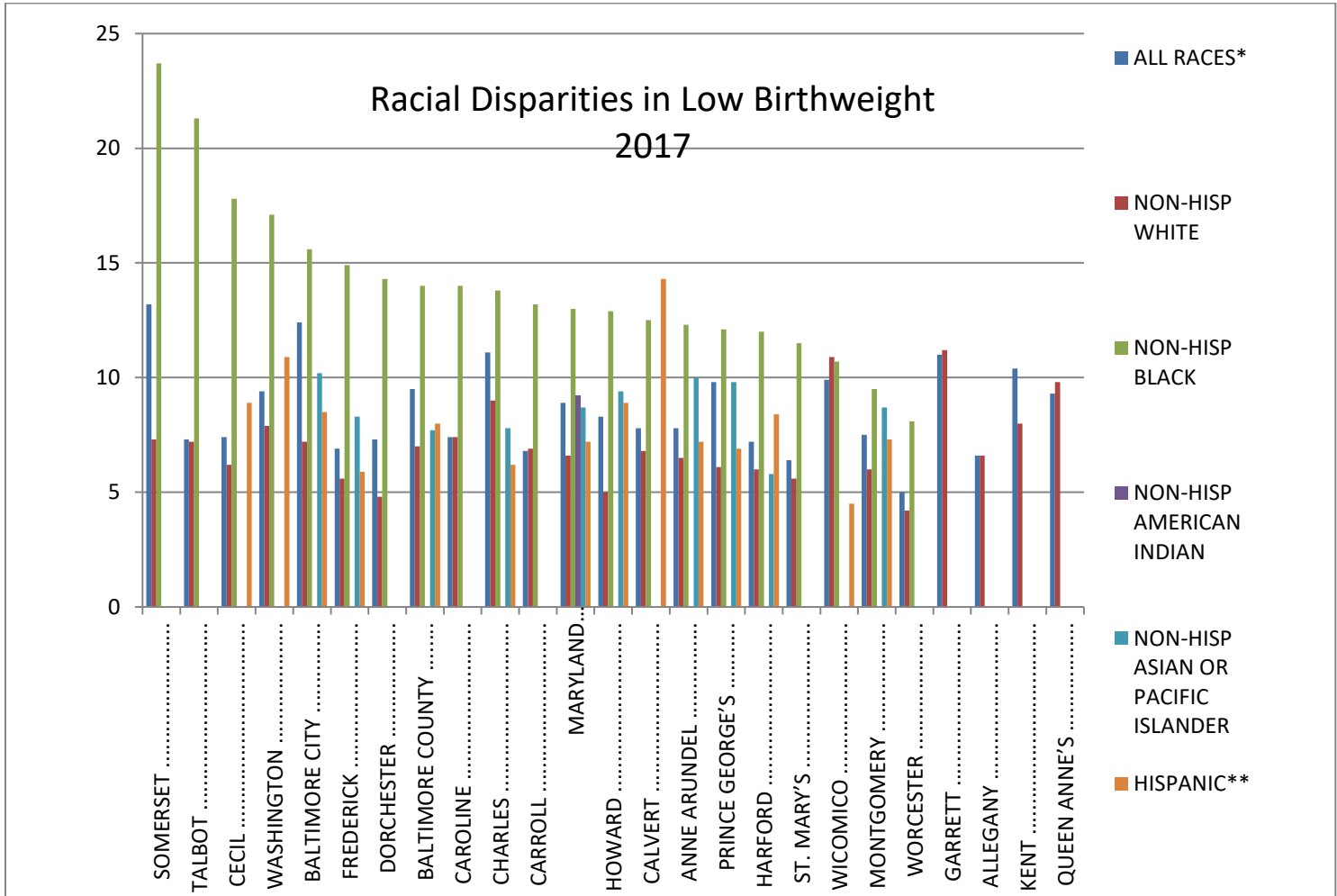
able to meet their needs. There are Medicaid restrictions about what funding can be used for care coordination, and this fund helps municipalities overcome those barriers to connecting families with critical services. Currently in Baltimore City, \$43 is saved for every \$1 invested in care coordination services.

We fully support HB 1349’s expansions of the Maryland Prenatal and Infant Care Coordination Services Grant Program Fund. Given the intention of this funding to close racial disparities for Black Marylanders, our single amendment is that the data grant recipients report include the race and ethnicity of the program participants. While previously it was only counties and Baltimore City that were eligible to apply, HB 1349 expands the fund to hospitals, federally qualified health centers, and prenatal care providers working to expand access to prenatal care. We appreciate that for both these provider grant applicants and municipality applicants, preference will be given to communities with high numbers of births to Maryland Medicaid recipients, high rates of infant mortality, and high rates of preterm births. HB 1349 also makes critical increases to the fund’s appropriation, without which we will not be able to improve birth outcomes for thousands of Marylanders. **We urge this committee to issue a favorable report on HB 1349 as amended.**

Amendment

On p. 7, line 21 after “funding” insert: including the race and ethnicity of the program participants.





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

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

ⁱⁱⁱ *id.*

^{iv} https://health.maryland.gov/vsa/Documents/Reports%20and%20Data/Annual%20Reports/REV_2018annual.pdf at p. 16.

^v https://health.maryland.gov/vsa/Documents/Reports%20and%20Data/Annual%20Reports/REV_2018annual.pdf at p. 15.

^{vi} https://health.maryland.gov/vsa/Documents/Reports%20and%20Data/Annual%20Reports/REV_2017annual.pdf at p. 121.

^{vii} https://health.maryland.gov/vsa/Documents/Reports%20and%20Data/Annual%20Reports/REV_2017annual.pdf at p. 105.