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THE SENATE OF MARYLAND
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**Support SB 778:
Maryland Medical Assistance Program - Children and Pregnant Women
(Healthy Babies Equity Act)**

Background:

- Approximately 275,000 Marylanders¹ are undocumented residents.
- Nearly half of undocumented Marylanders are uninsured and do not meet eligibility criteria for Medicare, Medicaid, the Children’s Health Insurance Program, or the Maryland Health Benefits Exchange.
- In all states, the federal Emergency Medical Treatment and Active Labor Act (EMTALA) requires that all patients presenting to the emergency room in active labor or an emergent state be treated; care must be provided without ascertaining a patient’s immigration status.² Emergency Medicaid currently covers emergency services for undocumented residents, including labor and delivery and one year of healthcare coverage for the infant from the time of birth.
- States and jurisdictions such as Virginia, California, the District of Columbia, Minnesota, Missouri, New Jersey, and others have expanded state-based healthcare insurance programs to include prenatal and postpartum care for undocumented pregnant people and their children. Maryland, in comparison, is among those states that provide no coverage for pregnant undocumented women.

Why SB 778 is needed:

- The United States has one of the highest maternal mortality rates in the developed world.³ Maternal mortality is defined as “the death of a woman while pregnant or *within 1 year of pregnancy* from any cause related to or aggravated by pregnancy or its management.”⁴

¹ [U.S. unauthorized immigrant population estimates by state](#)

² [Prenatal Care for Undocumented Immigrants: Professional Norms, Ethical Tensions, and Practical Workarounds](#)

³ [Maternal Mortality and Maternity Care in the United States Compared to 10 Other Developed Countries](#)

⁴ [Exploring the social determinants of racial/ethnic disparities in prenatal care utilization and maternal outcome](#)

- The risk of pregnancy-related death is five times higher among women without access to prenatal care as compared to those fortunate enough to receive prenatal care.⁵
- Lack of access to prenatal care increases the risk for premature birth and low birth weight. It may also contribute to higher rates of labor and delivery complications, including but not limited to breech presentation, precipitous labor, cord prolapse, fetal distress, and excessive bleeding.⁶
- Over half of all maternal deaths in the United States occur during the postpartum period.³
- Routine postpartum care is strongly associated with better health outcomes for both the mother and child.⁷
- The Centers for Disease Control and Prevention report that as many as sixty percent of maternal deaths could be prevented with routine prenatal and postpartum care.⁸
- Emergency Medicaid does not cover prenatal or postpartum care for the mother, making it difficult for undocumented women to receive critical healthcare throughout the course of their pregnancies.

What SB 778 does:

- SB 778 extends Medicaid coverage to include undocumented pregnant Marylanders who meet the standard eligibility requirements for the program, but are ineligible under the current law due to their undocumented status.
- Sixteen other states and the District of Columbia have taken this step, including Virginia, where they expect to save 2.3 million dollars from their expansion of prenatal care.⁹⁻¹⁰
- SB 778 permits undocumented pregnant women to receive prenatal care through Medicaid.
- SB 778 permits undocumented pregnant women to maintain health coverage through Medicaid for up to one year after the birth of their child (aka one year postpartum). Maryland Medicaid has pursued a State Plan Amendment to extend coverage for pregnant women from 60 days to 12 months postpartum, with this extended coverage anticipated to take effect on April 1, 2022. Under SB 778, undocumented pregnant women in the state will be afforded the same coverage and duration of coverage as other pregnancy-eligible Medicaid recipients in the state.
- SB 778 requires that the Maryland Department of Health submit a waiver to the federal Centers for Medicare and Medicaid Services to allow Maryland to maximize federal funding for the expansion of Medicaid coverage to undocumented pregnant women.

What SB 778 Accomplishes:

- SB 778 greatly expands access to essential pregnancy-related healthcare for undocumented Marylanders by providing comprehensive prenatal and postpartum care to all Marylanders regardless of immigration status.
- SB 778 improves health equity throughout the state by extending Medicaid coverage to all pregnant Marylanders who meet the regular eligibility criteria, regardless of their immigration status.
- SB 778 promotes better long-term health outcomes by ensuring access to both prenatal and postpartum care for Maryland's undocumented pregnant women and their children.
- SB 778 offsets new state spending on prenatal and postpartum care with significant reductions in spending on emergency Medicaid for undocumented pregnant women.

⁵ [Maternal Health Task Force, Maternal Health in the United States](#)

⁶ [Undocumented Immigrants and Health Care Access in the United States](#)

⁷ [Maternal Health Task Force, Postnatal Care](#)

⁸ [Vital Signs: Pregnancy-Related Deaths, United States, 2011–2015, and Strategies for Prevention, 13 States, 2013–2017](#)

⁹ [Prenatal Care Expansion States](#)

¹⁰ [Virginia Prenatal Care Savings](#)