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House Bill 1080 Maryland Medical Assistance Program – Children and Pregnant Women (Healthy Babies Equity Act)

Testimony of Delegate Joseline A. Peña-Melnyk (FAV)

Chairman Pendergrass and members of the Health & Government Operations

Committee, I am pleased to present House Bill 1080. This bill will provide critically necessary
care to pregnant Marylanders and their babies regardless of immigration status and ensure
that Maryland does not fall behind other state's progress.

In 2019, one in six Maryland infants was born to a mother receiving inadequate prenatal care. (1) In that same year, we ranked 22nd in maternal mortality and we continue to have significant racial disparities in maternal health outcomes (2). As a legislature, we understood that these metrics were unacceptable. Since 2011, we have halved our uninsured population (10.3% to 4.3%) and taken important steps to increase access to care. (3) This currently places us in the top seven of all states. (3) While this progress is a testament to our state's commitment to the health of all Marylanders, we can't stop here. Currently, most undocumented pregnant women are only eligible for emergency services. This means that they are not able to receive necessary prenatal and postpartum care, which is care that is critical for the health of both the mother and her baby. We need to protect the health of our mothers and their babies, and this bill does exactly that.

While we are leading the nation in expanding access to care, we have fallen behind 17 other bipartisan states and D.C. in offering prenatal and postpartum care. (4)

https://www.marchofdimes.org/peristats/ViewTopic.aspx?reg=24&top=5&lev=0&slev=4#:~:text=In%20Maryland%2C%2074.3%25%2 0of%20live.inadequate%20prenatal%20care%20in%20Maryland.

https://health.maryland.gov/phpa/mch/Documents/Health-General%20Article,%20%C2%A713-1207,%20Annotated%20Code%20of%20Maryland%20-

^{%202019%20}Annual%20Report%20%E2%80%93%20Maryland%20Maternal%20Mortality%20Review.pdf
3. https://www.kff.org/other/state-indicator/total-population/?dataView=0%C2%A4tTimeframe%3D8¤tTimeframe=0

^{4.} https://docs.google.com/document/d/1nlUw VLSIWRj3qHceuAxiLf-nWRCBiG5objV6xtulqw/edit?usp=sharing

That means that more than a third of the country, including neighboring Virginia, have taken this step. Most of these states have secured matching federal dollars to provide this care through a State Plan Amendment involving the CHIP Program. HB 1080 would follow this strong precedence by guaranteeing prenatal and postpartum care to income eligible undocumented pregnant women. It would also mirror recently passed Maryland Medicaid expansion legislation by automatically enrolling the children of these pregnant women into the Maryland Medical Assistance Program for their first year of life. This bill requires that the Maryland Health Department apply for a waiver from the Centers for Medicare and Medicaid Services that maximizes federal funding and eligibility for the Maryland Medical Assistance Program.

In addition to doing this because we should care about mother and baby, there is also a strong fiscal argument for this bill. Virginia recently passed similar legislation and they expect that expanding prenatal care will produce a net savings of 2.3 million. (5) This is because adequate prenatal care is expected to reduce pregnancy complications and the risk of adverse fetal outcomes. (6) In addition to increased healthcare spending, women who do not receive prenatal care are 3-4x more likely to die from pregnancy complications, while their babies are 3 times more likely to have low birth weight and 5 times more likely to die in infancy. (7) Prenatal and postpartum coverage therefore is not only a cost savings intervention, but an intervention that can save the lives of Maryland mothers and their babies.

We have made so much progress with increasing access to care in the past decade, and this bill is another important step towards that goal. Thank you for the opportunity to present HB 1080, and I respectfully request your support.

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