Karen Lewis Young Legislative District 3 Frederick County

Budget and Taxation Committee



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January 29th, 2025

The Honorable Chair Beidle
The Honorable Vice Chair Hayes
Finance Committee
Miller Senate Office Building
Annapolis, MD 21401

SB0156: Universal Newborn Nurse Home Visiting Services - Program Establishment and Insurance Coverage (Family Connects)

Chair Beidle, Vice Chair Hayes, members of the Finance Committee,

The first few weeks after birth are a critical time for both infant and mother. This bill will establish a program for universal home visits by a nurse for the newborn and mother. During the visit, the nurse screens the baby's health, including taking blood pressure and checking for injuries. The nurse is able to help the new parents by answering questions and referring them to community services.

This bill is necessary because a critical gap exists in care for newborns and new parents in the weeks between hospital discharge and the first postpartum doctor's appointment. During this window, almost 25% of deaths from pregnancy-related complications occur, a disproportionate number of those occurring among families from historically disadvantaged backgrounds. An in-home visit overcomes barriers to accessing community resources, funding, scheduling, and transportation. The nurse offers expertise on making sure the home environment is safe. Finally, a visit serves as an opportunity to identify potential mistreatment of the infant and/or parent.

In pilot programs, participating infants had 50% fewer trips to the emergency room in their first year.¹ Reports of postpartum complications were down by 30%. This leads to a reduction in postpartum health care costs.

¹ Family Connects International. https://familyconnects.org/impact-evidence/the-evidence/ Accessed January 23rd, 2025.

The program currently exists in the City of Baltimore, Frederick County, and Prince George's County. In a year of budgetary restraint, Family Connects would be administered by the Maryland Department of Health but paid for via reimbursement from commercial insurance payers and Medicaid. Research shows that for every \$1 spent, there is a \$3.17 return on investment.

We recognize that a full roll out would be an extreme challenge in the current economic environment. Nevertheless, this program can bridge critical gaps in infant and maternal health while addressing equity of access.

I request your support as we explore opportunities to continue the pilot and/or further evaluate opportunities to sustain this program.

Sincerely,

Senator Karen Lewis Young

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