



Date: January 29, 2025

To: Chair Beidle, Vice Chair Hayes and Finance Committee

Reference: Senate Bill 156-Universal Newborn Nurse Home Visiting Services - Program Establishment and Insurance Coverage

Position: Support

Dear Chair Beidle and Committee Members,

On behalf of LifeBridge Health, we appreciate the opportunity to comment on SB156. At LifeBridge Health, we understand the unique healthcare journey women and their families embark upon, especially during the transformative stages of motherhood and baby care. Our commitment to the well-being of every birthing mother and their family is unwavering. The Family Tree, a Baltimore-based nonprofit and national leader in child abuse prevention, is part of the LifeBridge Health System. The Family Tree Excellence, a multi-disciplinary approach to support informed professional practice, deploy effective prevention and intervention strategies that break the patterns of violence, and support families and children well-being across the life cycle.

Family Connects Maryland is an innovative program that makes home visiting services accessible to all. The program is implemented universally to maximize population reach and community acceptance. Its goals are:

- To connect with the mother to enhance maternal skills and self-efficacy.
- To assess each family's unique strengths and needs.
- To connect the family with needed community services such as health care, childcare, and financial and social support to promote family functioning and child well-being.

These services are provided free of charge by registered nurses. It is a part of The Family Tree's umbrella of programs, and made possible in collaboration with Sinai Hospital and our community stakeholders. Family Connects Maryland is supported by Family Connects International (FCI) is committed to strengthening bonds for families of newborns and linking them directly to supportive community care resources.

FCI works with community partners to offer residents the Family Connects Model, an evidence-based model that provides vital in-home clinical care by nurses and referrals to local supports for newborns and their family members. The FCI Model is designed to support optimal maternal-child health and advance equitable outcomes, while promoting better aligned community care systems.

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Evidence for Family Connects has resulted in significant reductions in health disparities for African American families, reductions of emergency room visits and admissions for Infants up to 12 months, mothers were less likely to report postpartum depression, and evidence shows a reduction of Child Protective Services up to five years when early intervention is provided.

Innovative initiatives to reduce infant mortality in Baltimore City and the Greater Regions through programs emphasizing policy change, service improvements, community mobilization, and behavior change. It has helped reduce the infant mortality rate in Baltimore City to its lowest point ever: 9.7 deaths per 1,000 live births (2012). Infant mortality has decreased by 28% since the launch of the initiative, from 13.5 in 2009 to 9.7 in 2012; the disparity between white and Black infant deaths decreased by almost 40% during the same period.

These models support Maryland Total Cost of Care All-Payer model and will be critical in moving into the new AHEAD model enabling Maryland to build on its unique all-payer hospital rate setting system, expanding its focus on primary care, population health, and health equity. We appreciate the constraints that the state needs to take to address budget deficits, however we hope that through the AHEAD model and other programs the general assembly could find ways to support these pilots as proven cost reductions strategies.

For these reasons we ask the committee to give SB156 a Favorable report.

For more information, please contact:

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