

Committee: House Health and Government Operations Committee

Bill Number: HB 334 - Universal Newborn Nurse Home Visiting Services - Program

Establishment and Insurance Coverage

Hearing Date: January 29, 2025

Position: Favorable

MNA strongly supports House Bill 334, which seeks to establish Universal Newborn Nurse Home Visiting Services in Maryland. This bill represents a significant step forward in promoting the health and well-being of families with newborns across our state.

Supporting Healthy Child Development and Postpartum Health

The early weeks of a newborn's life are critical for both the infant and the parents. Universal Newborn Nurse Home Visiting Services provide essential support during this period, ensuring that families receive the guidance and resources they need to thrive. Registered nurses can offer invaluable assistance with breastfeeding, infant care, and postpartum recovery, leading to improved health outcomes for both mothers and newborns.

Strengthening Families and Communities

By offering these services universally, we ensure that all families, regardless of socioeconomic status, have access to the support they need. This approach promotes equity and helps reduce disparities in maternal and child health outcomes. Additionally, home visits by trained nurses can help parents develop the skills and confidence necessary for positive parenting, fostering stronger family bonds and healthier child development.

Reducing Healthcare Costs

Early intervention and support can prevent more serious health issues down the line, ultimately reducing healthcare costs. By addressing health concerns early, families can avoid expensive emergency room visits and hospitalizations. This cost-effective approach benefits not only individual families but also the broader healthcare system.

Connecting Families to Community Resources

Nurses can connect families with a wide range of community resources, including childcare, mental health services, and social support networks. This holistic approach addresses the broader needs of families, promoting overall well-being and resilience.

Encouraging Preventive Care

Insurance coverage for Universal Newborn Nurse Home Visiting Services encourages preventive care, which is crucial for maintaining the health of both mothers and newborns. Preventive care can lead to early detection and treatment of health issues, improving long-term health outcomes and reducing the need for more costly medical interventions.

Maryland MIECHV Program - Strong Evidence of Success

- Program Overview: The Maternal, Infant, and Early Childhood Home Visiting (MIECHV)
 Program supports voluntary, evidence-based home visiting programs for expectant and new parents with children through kindergarten entry age in at-risk communities.
- **Home Visiting Models**: Maryland uses Healthy Families America (HFA) and Nurse-Family Partnership (NFP) models.
- **Participants:** The program served 1,838 participants and 977 households, conducting 15,312 home visits. Counties Served: Caroline, Dorchester Allegany, Baltimore, Baltimore City, Harford, Prince Georges, Somerset, Washington, Wicomico
- **Community Needs**: 95.8% of households were at or below 200% of the Federal Poverty Guidelines, and 81.4% were at or below 100%. Additionally, 13.5% of households included a pregnant enrollee under age 21.
- **Performance Highlights:** The program improved in 5 of the 6 benchmark areas including: Intimate Partner Violence (IPV) Screening: 92.0% of caregivers were screened for IPV within 6 months of enrollment and Depression Screening: 89.9% of caregivers were screened for depression within 3 months of enrollment or delivery.

PROGRAM PERFORMANCE

MIECHV awardees annually report program performance on 19 measures across six benchmark areas defined in law, which are aimed at improving the well-being of both parents and children. Beginning in the FY 2020 reporting period and every three years thereafter, awardees are required to demonstrate improvement in at least four of six benchmark areas. In FY 2023, all 56 MIECHV awardees successfully met the requirements for demonstration of improvement.

Below is a subset of performance outcome measures that highlight the impact of the Program on parents and their children.

Early Language and Literacy Activities: Children who are spoken to frequently by their caregivers have larger vocabulary and literacy skills, and these skills can be linked to later academic, social, and cognitive functioning. 11,12 Home visitors teach parents about the importance of these early language and literacy activities and help them learn techniques to incorporate into their regular routines.

82 percent of children enrolled in MIECHV had a family member who read, told stories, and/or sang with them on a daily basis in FY 2023. This is an increase from a three-year rolling average (FY 2020 – FY 2022) of 79 percent.

Postpartum Care: Since the period immediately following birth is a time of many physical and emotional adjustments, a timely visit with a health care provider after birth is important so that new mothers can get information on what to expect and have their questions or concerns addressed about physical, social, and emotional changes. ^{13,14} Home visitors support mothers to ensure that they receive a timely postpartum visit with their health care providers.

74 percent of mothers enrolled in MIECHV received a postpartum visit with a health care provider within eight weeks of delivery in FY 2023, a six-percentage point increase compared to the average of the three previous years (68 percent).



Developmental Screening: Regular developmental screenings help identify delays and enable families to access early interventions to improve children's developmental trajectories. 15 Home visitors facilitate parent-led evaluations of their child's development according to the schedule recommended by the American Academy of Pediatrics (AAP).

77 percent of MIECHV children ages 9 – 30 months were screened for developmental delays in FY 2023. This is a four-percentage point increase compared to the average of the three previous years (73 percent).

Well-Child Visit: Early childhood is a time of rapid growth and development. Well-child visits are an important opportunity for health care providers to evaluate children's physical, social, and emotional development and to provide essential preventive care including regular immunizations. ^{16,17} Home visiting facilitates important linkages between families with young children and health care providers by promoting the timely receipt of routine well-child visits to give children a strong start to life.

71 percent of children enrolled in MIECHV received the most recent recommended well-child visit based on the AAP schedule. This is an increase from a three-year rolling average (FY 2020 – FY 2022) of 68 percent.

The MIECHV Program makes an impact in the lives of families and supports improvements in outcomes that lead to children, parents, and families that are healthy and thriving. Learn more about the MIECHV Program and its impact on families.

Conclusion

In conclusion, House Bill 334 is a vital piece of legislation that will have a profound impact on the health and well-being of families with newborns in Maryland. By providing universal access to nurse home visiting services, we can support healthy child development, strengthen families, reduce healthcare costs, and promote equity in maternal and child health outcomes. MNA urges the Health and Government Operations Committee to issue a Favorable Committee report on HB 334.

If you have any questions, please contact the MNA lobbyist, William Kress, Esquire at bill@kresshammen.com.