



HB 1349

Public Health - Maryland Prenatal and Infant Care Grant Program Fund

Hearing of the House Health and Government Operations Committee

March 19, 2021

1:30 PM

SUPPORT

The Reproductive Health Equity Alliance of Maryland (RHEAM) is a cohort of community-based birth workers, policy and legal advocates, and organizations focusing on reproductive justice, pregnancy and infant health. We aim to reduce pregnancy and infant health disparities in Maryland's Black, Brown and immigrant communities by advocating for evidence-based legislative and policy solutions that expand access to quality health options designed to build healthy and stable families of color. We stand in strong support of HB 1349 because all people, including undocumented and low-income folks, are deserving of meaningful access to the health care and resources necessary to have healthy pregnancies and birth outcomes.

Undocumented individuals are much less likely than the general US population to receive adequate prenatal care¹, and have higher rates of complications during labor.² This is likely the reason why undocumented foreign born Latinx individuals report lower birth weights (LBW) compared to their documented foreign-born Latinx counterparts, as well as other negative health outcomes.³ Considering that undocumented folks have extremely limited access to federal- and state-regulated health insurance due to structural policy barriers, federally qualified health centers (FQHCs) play an essential role in providing health care to the nation's most vulnerable populations.

HB 1349 would provide grants to FQHCs, hospitals, and providers so that individuals who are uninsured and unable to access health insurance can get the prenatal care they need in order to have a successful pregnancy and birth experience. This bill will help to ensure that the state's FQHCs and providers who care for these individuals can afford to remain open while expanding health care access to undocumented pregnant folks. We applaud the bill's directive to prioritize funding for FQHCs and providers in counties with the highest rates of infant mortality, preterm birth, and Maryland Medicaid enrollees. Not only is providing uniform access to prenatal care for all people living in the state the humane thing to do, but it makes economic sense. The children of undocumented immigrants are U.S. citizens that the state is charged with caring for, and prenatal care has been found to be cost-saving on many fronts.⁴

All pregnant people are deserving of healthy and safe pregnancies, birth outcomes, and access to comprehensive support, resources, and healthcare. For these reasons, RHEAM urges the committee to issue

¹ Korinek K, Smith KR. Prenatal care among immigrant and racial-ethnic minority women in a new immigrant destination: exploring the impact of immigrant legal status. *Soc Sci Med.* 2011;72(10):1695-1703.

² AMA J Ethics. 2019;21(1):E93-99. doi: 10.1001/amajethics.2019.93.

³ *Ibid*

⁴ Gorsky RD, Colby JP Jr. The cost effectiveness of prenatal care in reducing low birth weight in New Hampshire. *Health Serv Res.* 1989 Dec;24(5):583-98. PMID: 2511163; PMCID: PMC1065587.

a favorable report on HB 1349. Please contact Isabel Blalock at 410.868.4055 or isabel@prochoicemd.org if you have any questions about this testimony.

Sincerely,

Reproductive Health Equity Alliance of Maryland Members

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Baltimore Doula Project
Birth Supporters United
Family League of Baltimore
MOM Cares
NARAL Pro-Choice Maryland
Nzuri Malkia Birth Collective
Planned Parenthood of Maryland
Public Justice Center

Individuals

Alexis Covington
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