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**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 Public Justice Center (PJC) is a not-for-profit civil rights and anti-poverty legal services organization which seeks to advance social justice, economic and racial equity, and fundamental human rights in Maryland. Our Health Rights Project supports policies and practices that promote the overall health of Marylanders struggling to make ends meet, with the explicit goal of promoting strategies that work to eliminate racial and ethnic disparities in health outcomes. PJC **strongly supports HB 1349**, which would expand the Maryland Prenatal and Infant Care Coordination Services Grant Program Fund to make grants to federally qualified health centers, hospitals and prenatal care providers. It also requires the Governor to appropriate certain funds to the grant program in the Annual Budget Bill.

Quality prenatal care is an integral part of preventative healthcare for pregnant women. Prenatal care not only helps women prepare for the birth of a child, but it also enables providers to detect and prevent infant health and birth complications.<sup>1</sup> However, under current federal and state law, pregnant non-citizens who have been in the United States for less than five years and immigrants who are not lawfully present in the United States are only eligible for Emergency Medicaid, which covers labor and delivery but not prenatal care. For low-income individuals who cannot pay out of pocket for prenatal care, this means that issues that could be detected during routine prenatal visits may not be identified until the birth. Without prenatal care, these individuals are at risk for severe pregnancy complications, including infant or maternal death. In fact, babies born to mothers who do not receive prenatal care are three times as likely to be born with a low birth weight and five times more likely to die than those who are born to

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<sup>1</sup> Jonas J. Swartz, et. al, *Expanding Prenatal Care to Unauthorized Immigrant Women and the Effects on Infant Health*, 130 *Obstetrics & Gynecology* 938 (2017),

[https://journals.lww.com/greenjournal/Fulltext/2017/11000/Expanding\\_Prenatal\\_Care\\_to\\_Unauthorized\\_Immigrant.2.aspx#:~:text=Understanding%20how%20expanding%20access%20to%20prenatal%20care%20influences,is%20likely%20to%20be%20a%20topic%20of%20debate](https://journals.lww.com/greenjournal/Fulltext/2017/11000/Expanding_Prenatal_Care_to_Unauthorized_Immigrant.2.aspx#:~:text=Understanding%20how%20expanding%20access%20to%20prenatal%20care%20influences,is%20likely%20to%20be%20a%20topic%20of%20debate)

mothers who receive prenatal care.<sup>2</sup> It is vital that we create avenues for immigrant populations who do not qualify for full Medicaid coverage to access this medically necessary care without delay.

HB 1349 supports healthy birth outcomes by ensuring that low-income individuals who do not qualify for prenatal care insurance coverage are able to access care from FQHCs, hospitals and other prenatal care providers. The bill would help address disparities in infant health outcomes by giving priority for awarding grants to proposals seeking to serve communities that have a high number of Medicaid births and high rates of infant mortality and preterm births.

For these reasons, the Public Justice Center urges the committee to issue a **FAVORABLE** report for **HB 1349**. If you have any questions about this testimony, please contact Ashley Black at 410-625-9409 x 224 or [blacka@publicjustice.org](mailto:blacka@publicjustice.org).

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<sup>2</sup> Office on Women's Health, Prenatal Care, <https://www.womenshealth.gov/a-z-topics/prenatal-care> (last visited on February 21, 2021).