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Voices for Maryland's Children | www.acy.org

August 6, 2009

The Honorable Benjamin Cardin
United States Senate
509 Hart Senate Office Building
Washington, DC 20510

Dear Senator Cardin:

As Congress moves forward with health reform legislation, Advocates for Children and Youth urges you to ensure that the health care needs of children are a high priority. Maryland ranks 43rd in the nation for low birthweight babies and its infant mortality rate ranks 39th (2009 Kids Count Data Book). Maryland can and should do better for its children. To improve birth outcomes, women need comprehensive health care before, during and between pregnancies. Home visiting programs can also help support women during these important periods and ensure infants get a healthy start. As children get older, they need care that is specifically designed for their developmental needs and that is affordable for their parents. We thus urge you to include the following elements in the final health reform bill:

Healthy Women and Family Planning: Research shows that birth outcomes are affected by the health of a woman before she becomes pregnant. However, many low-income women are not eligible for health care until pregnancy, when it is too late to impact chronic conditions like diabetes. Women also need quality care after a poor birth outcome to help prevent subsequent poor birth outcomes. Access to appropriate interconception health care helps avoid another poor birth outcome.

We urge you to allow states to provide family planning services to women prior to pregnancy through a family planning state option, rather than the laborious waiver process. An expansion of Medicaid family planning services to all women who are currently eligible for pregnancy-related care would help 113,400 additional Maryland women access family planning services and have planned pregnancies and healthier babies.

Home Visiting: Quality, voluntary home visiting is an effective, research-based and cost-efficient way to bring families and resources together to ensure that babies are born healthy. Home visits can help reduce infant mortality and the percentage of babies born with low birthweight. Maryland has several national and local models, but too few families are served.

We urge you to include Sections 1904 and 1713 of the House tri-committee bill in your final package. Grants to states to expand proven home visiting models and evaluate less proven models would help families in Maryland and across the county.



Children's Benefits: Health care reform should build upon the successes of the last decade in Medicaid and the State Children's Health Insurance Program. These programs have helped tens of thousands of Maryland children access health care. Congress must ensure that federal reforms do not roll back the progress states have made in helping more children access quality care. Children have unique health care needs and require a package of benefits that includes comprehensive, age-appropriate preventive services, medical care, and oral and mental health benefits. The majority of uninsured children in Maryland are eligible for Medicaid or CHIP, but barriers to enrollment limit access. Simplified enrollment procedures, subsidies and cost-sharing protections are needed to ensure that health insurance is accessible for families.

We urge you to ensure that children are not moved out of CHIP until any successor program offers coverage equal to or better than what is currently available under Medicaid or CHIP. Children should not lose the benefits and cost-sharing protections they already have, as would happen under some of the health reform proposals under discussion. Health reform should make coverage more affordable to families and we urge you to include subsidies for low- and moderate-income families (up to at least 400% percent of the Federal Poverty Level). Finally, we urge you to create a "No Wrong Door" system that links children to Medicaid, CHIP or the Exchange, depending on their eligibility criteria. Movement between programs due to changing eligibility status should be seamless and avoid gaps in coverage.

We look forward to working with you to improve the quality, access, and affordability of care for children through health reform.

Sincerely,



Matthew Joseph
Executive Director



Leigh Stevenson Cobb
Health Policy Director