

HEALTHY CHILDREN EQUITY ACT



For decades, millions of people across the country have relied on Medicaid, the nation's public health insurance program for low-income families. Unfortunately, undocumented immigrants are excluded from this critical program. From profound cultural contributions to working in essential jobs during the pandemic to paying over \$240M in federal, state, and local taxes - a majority of undocumented families, who would otherwise meet the Medicaid eligibility requirements, are left without care. Maryland must take action this legislative session to move toward ending this inequity, starting with prenatal care for pregnant people.

Estimates show that the majority of pregnancy-related deaths are preventable. Prenatal and postpartum care (including delivery, proper medication, immunization, labor planning support, and more) is transformative, especially for communities of color, in preserving and protecting the lives of children and their mothers. Every person deserves access to this lifesaving and critical care regardless of their immigration status.

What does the Healthy Children Equity Act do?

- Expands eligibility for prenatal care through Medicaid (through pregnancy and twelve months postpartum) to all pregnant people, regardless of status.
- Require the state to submit a state innovation waiver (under § 1115 of the Social Security Act) to allow Maryland to make this change to eligibility.

Why must Maryland act now to expand Medicaid to all mothers during/after pregnancy?

- Seventeen states, including our neighbor, Virginia, provide coverage to pregnant people regardless of immigration status - either through Medicaid or established state programs. (AR, CA, IL, LA, MA, MI, MN, MO, NE, OK, OR, RI, TN, TX, VA, WA, WI). NYC and DC also provide this coverage.
- Prenatal and postpartum care is life-saving. In expanded Medicaid states, maternal mortality dropped by 1.6 deaths per 100K women.
- Rates of mortality and severe complications during pregnancy and childbirth are rising across the country - particularly for women of color. Black and Latino mothers have the highest rates of uninsurance, with Latino mothers uninsured at a rate nearly triple their white counterparts.
- In Maryland, 1 in 14 infants (7% of births) are born to a person receiving late or no prenatal care. Babies without care are three times more likely to have a low birth weight and have birth complications.
- Women in majority Latino communities have prevalence rates up to a third higher for risk factors, such as cesarean birth and pre-existing diabetes.