



**RHODE ISLAND KIDS COUNT**  
ONE UNION STATION  
PROVIDENCE, RHODE ISLAND 02903  
401/351-9400 • 401/351-1758 (FAX)

**Testimony Re: 2520 – Health Care for Children and Pregnant Women**  
**Senate Committee on Health & Human Services**  
**March 3, 2020**  
**Katie Orona, Policy Analyst**

Mr. Chairman and members of the Committee, thank you for the opportunity to provide testimony today. Rhode Island KIDS COUNT offers its strong support for Senate Bill 2520, which provides the opportunity for an uninsured pregnant person to purchase a Medicaid plan.

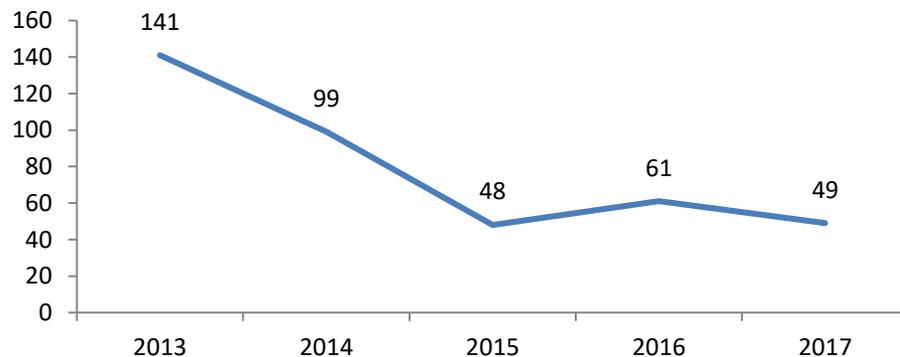
### **Coverage Gains under the Affordable Care Act**

On January 1, 2014 many key provisions of the *Affordable Care Act (ACA)* took effect, including a requirement that maternity and new born care be covered by all new health plans sold on the individual and small group markets. The ACA has also created new pathways to coverage, especially among women of child-bearing age in Rhode Island. In 2018, 94% (170,699) of Rhode Island women age 19 to 44 were insured.

### **Gaps in Coverage for Pregnant Women Still Remain**

However, a small number of pregnant women are still without insurance at time of birth in Rhode Island. Between 2013 and 2017, 398 uninsured Rhode Island women gave birth (less than 1% of all births). Since 2012, there has been 65% decline in the number of women without insurance who gave birth (from 141 births in 2013 to 49 in 2016).<sup>2</sup>

**Number of Uninsured Rhode Island Women at Time of Birth**



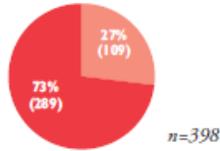
### **Adverse Maternal & Child Outcomes for Uninsured Women**

Maternal and child outcomes are closely related to a mother's insurance status. In Rhode Island between 2013-2017, women without insurance were at increased risk for delayed prenatal care, low-birthweight, preterm births, NICU involvement, and infant mortality compared to women with insurance.<sup>3</sup>

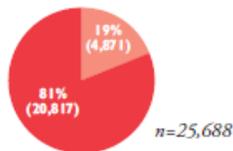
### Delayed Prenatal Care by Mother's Insurance Type, Rhode Island, 2013-2017

■ Delayed Prenatal Care (2nd or 3rd Trimester)  
■ Prenatal Care in 1st Trimester

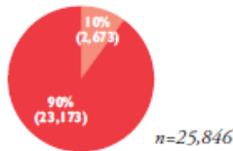
#### Uninsured



#### Public Insurance (Rite Care)



#### Private Insurance

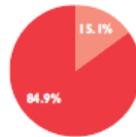


Source: Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2013-2017.

### Preterm Births by Mother's Insurance Type, Rhode Island, 2013-2017

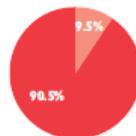
#### Uninsured

■ Preterm Births  
■ Full-term Births



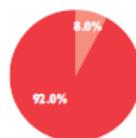
#### Public Insurance (Rite Care)

■ Preterm Births  
■ Full-term Births



#### Private Insurance

■ Preterm Births  
■ Full-term Births

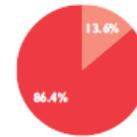


Source: Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2013-2017.

### Low Birthweight by Mother's Insurance Type, Rhode Island, 2013-2017

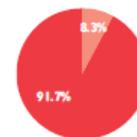
#### Uninsured

■ Low Birthweight  
■ Normal Birthweight



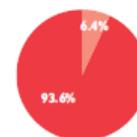
#### Public Insurance (Rite Care)

■ Low Birthweight  
■ Normal Birthweight



#### Private Insurance

■ Low Birthweight  
■ Normal Birthweight



Source: Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2013-2017. Data for births in 2017 are provisional.

## Benefits of this Legislation

This important piece of legislation would help close a small, but critically important coverage gap for women without insurance or those who are underinsured. The most updated data provided by HealthSource RI show that 89 women in 2019 obtained commercial coverage through a birth special enrollment period. If this legislation was enacted, those women would have been able to enroll in a Medicaid health plan earlier and potentially receive more timely prenatal care, which could have resulted in improved positive health outcomes for both the mother and child as well as reduced health care spending.

## Closing

The Rhode Island General Assembly has shown strong support for ensuring access to health care for all Rhode Islanders, including pregnant women and children. This bill is another important positive step toward increasing access to prenatal and maternal health coverage and care. We urge to you to support this bill to support pregnant women, healthy pregnancies, and healthy babies. Thank you for the opportunity to provide testimony.

### Pie Chart Notes

Delayed prenatal care is defined as beginning prenatal care in 2<sup>nd</sup> or 3<sup>rd</sup> trimester or none at all.

Low birthweight is less than 5 pounds, 8 ounces. Preterm birth is born before the 37<sup>th</sup> week.

*Rhode Island Department of Health, Maternal and Child Health Database, 2013-2017*

### References

- U.S. Census Bureau, American Community Survey, 2013-2018. Table B27001.
- <sup>2,3</sup> Rhode Island Department of Health, Maternal and Child Health Database, 2010-2017.