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Testimony Re: 231– Health Care for Children and Pregnant Women
Senate Committee on Health & Human Services
March 4, 2021
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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 231, which provides the opportunity for an uninsured pregnant woman to purchase a Medicaid plan. We thank Senator Goldin for introducing this bill and to Senators Valverde, DiMario, Calkin, Bell, and Miller for co-sponsoring.

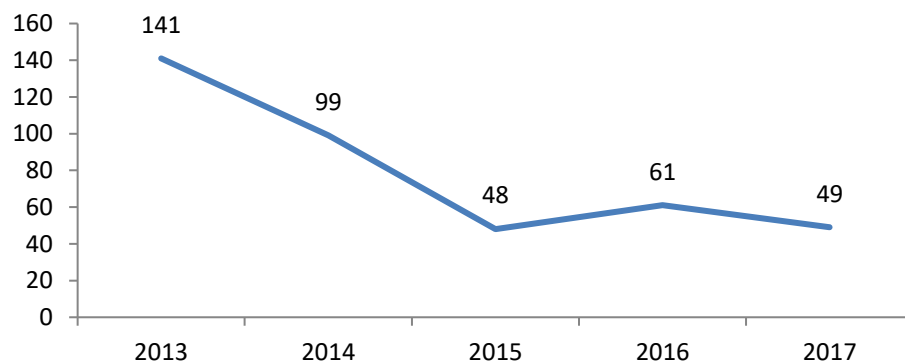
Coverage Gains under the Affordable Care Act

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 2019, 94% (167,932) of Rhode Island women age 19 to 44 were insured. ¹

Gaps in Coverage for Pregnant Women Still Remain

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).² 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

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.³

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.

References

¹ U.S. Census Bureau, 2019 American Community Survey

^{2,3} Rhode Island Department of Health, Maternal and Child Health Database, 2010-2017.