



Ohio's Infant and Maternal Health Budget



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Children's Defense Fund- Ohio believes the budget is a moral document and should represent the values the state feels are important. As such, CDF-Ohio believes that every child contributes to the vibrancy and success of our communities. Unfortunately, this is not the reality for all Ohioans and their children. Maternal and Infant mortality continues to be a leading public health crisis in Ohio. According to the Ohio Department of Health's [2019 Infant Mortality Annual Report](#), Ohio's infant mortality rate was 6.9 per 1,000 live births in 2019, but the rate among Black infants was 14.3.

Black women died at a rate more than two and a half times that of White women. Between 2008-2016, over half the deaths of women who were pregnant or who died within one year of pregnancy were preventable.

In Ohio, Medicaid provides coverage for nearly 3 million low-income children, older adults, pregnant women, parents, childless adults and individuals with disabilities. As a population group, children represent approximately 40% of Ohio's Medicaid caseload but only 14% of Medicaid spending. Since spending on children has not been viewed as a primary cost driver, children's health has not necessarily been an area of focus for state Medicaid policy. We applaud broad support of maternal

and infant health, especially Ohio's evidence-based home visiting programs. Home visiting programs are one proven approach to mitigate infant mortality. For every \$1 invested in home visiting programs, the state return on investment is \$6.

We also support the expansion of the program through the increase in eligible age of the child and the number of program days available. In order to reach Gov. DeWine's stated goal of tripling the number of families able to take advantage of the program, CDF-Ohio recommends the Department of Health make the program available to all eligible families automatically rather than waiting for a family to be referred to the program, and exploring other evidence-based home visiting models that could be incorporated into the current Help Me Grow program in addition to the four currently eligible for reimbursement.

There are several other areas of the budget that speak directly to improving maternal and infant health.

Quick Facts

70% of women describe at least one physical problem in the first year of the postpartum period

1 in 9 women experience symptoms of postpartum depression.



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1. Infant Vitality funding will maintain community based maternal health programs which support pregnant mothers, improve maternal health outcomes, and provide needed health and wraparound supports for vulnerable women. The Infant Vitality funding will also be used to fund a multi-pronged population health approach to address infant mortality. increasing awareness; supporting data collection; analysis and interpretation to inform decision-making and ensure accountability; targeting resources where the need is greatest; and implementing quality improvement science and programming that is evidence-based or based on emerging practices.

2. Infant Mortality grants to support the continuation or establishment of pathways community HUB models that have

as their primary purpose reducing infant mortality in the urban and rural communities with a targeted focus on disparities.

3. Research Incentive Third Frontier funds that may be allocated toward research regarding the reduction of infant mortality.

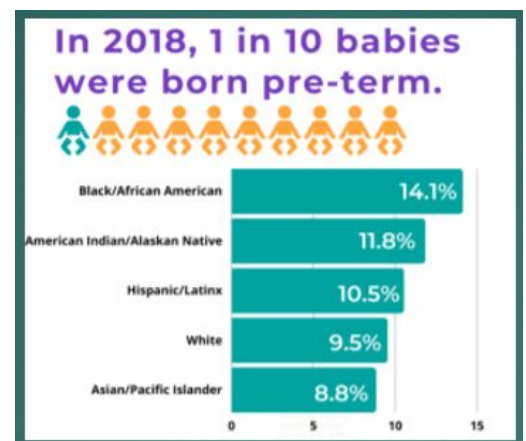
4. Local Development Loans for projects coordinated through the Department of Health to support stable housing initiatives for pregnant mothers and to improve maternal and infant health outcomes. One of the number one causes of toxic stress during a pregnancy is the lack of safe affordable housing.

Children's Defense Fund-Ohio recommends the following maternal and infant health investments to help reverse Ohio's abysmal rates of infant and maternal mortality. Research shows both of these priorities can have a dramatic effect on both

maternal and infant health, and will address the immediate crisis facing moms and babies in Ohio and lay the groundwork for healthier families and a healthier Ohio.

Maternal and Infant Health Recommendations

1. Extend postpartum coverage for all Medicaid eligible women to 12 months. Currently, a pregnant woman is eligible for Medicaid if they earn below 200% of the federal poverty line. This eligibility for health coverage continues through 60 days postpartum. On the 61st day, Medicaid eligibility ends unless they earn below 138% of the federal poverty line. While more than half of pregnancy-related deaths occur in the postpartum period, Ohio's current Medicaid pregnancy eligibility ends too soon. This extended coverage will go far in reducing both maternal and infant mortality. Starting in April of 2022, states will be able to extend postpartum care for 12 months through a State Plan





Amendment (SPA) and receive the federal match for coverage. Several states have already taken steps to [extend postpartum coverage](#).

2. Extend Medicaid coverage of Doula services

There is a strong and growing body of evidence that access to doula care during pregnancy reduces the incidence of preterm birth, the prevalence of cesarean births, and increases positive birth experience and healthy outcomes for both mother and child. In 2019, there were 14,136 preterm births in Ohio, representing 10.5% of live births. Doulas provide emotional, physical, and educational support to a mother who is expecting, experiencing labor, or has recently

given birth. Doulas act as advocates for the women who often feel marginalized by the health care system, to make sure their voices are heard and their concerns are addressed.

Ohio finds itself in the bottom quartile when measuring maternal and infant health. We urge your support of infant and maternal health funding in the budget and the inclusion of Medicaid coverage of doula care services and 12 month postpartum coverage for all eligible women as proven ways to address Ohio's Maternal and Infant health crisis.

To learn more about doulas and the important work they do, check out the most recent [Child Watch Ohio](#) story and meet Jessica.



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