



Thank You for Your Support of Maternal & Infant Health



On July 1, 2021, Gov. Mike DeWine signed Amended Substitute House Bill 110, the biennium budget, setting Ohio's spending priorities for the next two years. The Children's Defense Fund-Ohio believes the budget, which represents over \$75B in public investments for a whole host of services and programs for Ohioans, is a moral document that highlights our priorities and what we believe in as a state. We applaud Gov. DeWine and members of the General Assembly for their support of critical maternal and infant health funding in the budget.

There was a lot of discussion and debate on the best way forward in terms of economic recovery, health, and education as Ohio emerges from the pandemic and

how our state can leverage its many resources, talents, and policy decisions to chart a path to a better future for all Ohioans. CDF-Ohio was especially concerned with protecting maternal and child health funding in the budget, allowing children up to age five to participate in evidence-based home visiting programs in addition to extending postpartum coverage to 12 months under Medicaid. As the budget continued to be deliberated, we worked together with other stakeholders to share these concerns with legislators through phone calls, meetings, emails, and testimony before both the House and Senate Finance Committees.

As the dust has settled with the signing of our state's new biennial

budget, we are pleased that Ohio has made some important strides in infant and maternal health.

First, CDF-Ohio is grateful and excited that the newly signed FY 2022-23 biennial budget **includes language that allows Medicaid to extend health coverage to women for a full year after giving birth.** This coverage, which will be available in April of 2022, is an important step in improving Ohio's dismal maternal mortality rate. The budget includes \$46M over the biennium to pay for these services and will allow Ohio to draw down matching funds from the federal government. It will be critically important that in addition to providing these needed services to postpartum women, that Medicaid also collects data on access to services, utilization, and health outcomes.

The new budget also contains language related to Ohio's evidence-based home visiting (EBHV) program, Help Me Grow. This parent support program encourages early prenatal and well-baby care, as well as parenting education to promote the health and development of children. Importantly, the budget includes language that **increases the eligible age for children to participate the program from 3 to age 5.** This allows families to have access to important home visiting services during those critical early years of a child's life. Allowing families to access this program for 2 extra years also accomplishes the Governor's goal of tripling the number



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of families who can access this important program.

Of further import for the wellness of Ohio mothers and infants is that the budget also **maintained Infant Vitality funding** which preserves community based maternal health programs that support pregnant mothers and improve maternal and child health outcomes. **Infant Mortality grants to support the continuation or establishment of pathways community HUB models that work to reduce infant mortality in the urban and rural communities with a targeted focus on disparities were also maintained.**

These sound policy decisions included in our state's budget represent some important strides forward for infant and maternal health in Ohio, but there is still more work to be done, and we must now look towards areas where needs are left unmet for

Ohio mothers and their children. One concern we share with many other advocates in this space is that while CDF-Ohio advocated for Medicaid coverage of doula services to be included in the budget, this, unfortunately, did not happen. We are thankful to our partners in the doula community, Jessica Roach, Dorian Wingard, Jessica Villejo, Ashley Sova, and so many others who lifted their voices through personal stories, testimonies, and publications to share the benefits and the policies needed to advance these life saving practices for women.

We are hopeful that key legislation, HB 142, Medicaid Coverage of Doula Care Services, will find broad support as it continues to be heard in the House Health Committee. We offered proponent testimony in committee on June 10th and continue to participate in stakeholder meetings to discuss

how to best integrate doula care into Ohio Medicaid. We forge onward in our advocacy to create the Ohio that all moms and their babies deserve.

Another issue that was not addressed in our state's budget is the need to expand the evidence-based models reimbursable under the Help Me Grow program. Many organizations, including Birthing Beautiful Communities and ROOTT, use evidence-based models in their home visiting programs that are hugely successful, but are not reimbursable under the Help Me Grow program. We would like to see the Department of Health expand the list of models within the Help Me Grow program to include other evidence-based models that are effective and can make a difference.

The fact remains that while children make up 22% of Ohio's population, they represent 100% of Ohio's future – we believe children must remain in the forefront of everything we do as we move forward. This budget was a step in the right direction, and CDF-Ohio would like to thank Gov. DeWine and the General Assembly for their support of families and children in this budget. We look forward to continuing our work together on the critical issues that face children and families in Ohio.

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