Generate Health is committed to addressing the regions’ most pressing maternal and child health issues. We focus on policies and legislation that:

- **Improve the health of women before and between pregnancies**
- **Increase access to prenatal, behavioral health and overall health care for women and babies**
- **Increase immunization rates to eliminate preventable illnesses**
- **Improve community conditions to support family health**

Generate Health 2018 Policy Priorities

**Protect Medicaid and Expand Access to Care**
Generate Health supports increasing access to prenatal, behavioral health and overall health care for women, children and families.

Generate Health opposes any efforts to repeal the Affordable Care Act or structurally change Medicaid which would put care for Missourians who rely on Medicaid at risk. These proposals would have a harmful impact on women, children and families access to quality health care. Access to health insurance coverage has been a priority of the organization since it’s Mapping a Course Initiative. The Mapping a Course to a Healthier Community brought together parent and provider voices to identify, prioritize and create solutions to make our community healthier. Access to health insurance was identified as one of the 4 priority areas chosen by the community. The ACA is the solution we have focused on for this priority area.

**Perinatal Regionalization**
Perinatal Regionalization is an evidence-based system that has been recommended by Maternal and Child organizations for over 40 years as an approach to lowering infant mortality. Legislation in this area would implement a regionalized system of maternal and newborn care in MO:

- Regionalization assesses and defines hospitals at risk-appropriate levels, ensuring that the smallest and at highest-risk infants are delivered at a facility equipped for their care.
- Regionalization would create pathways of care among hospitals, to facilitate consult and transport for our highest risk moms and babies.
In the 2017 Missouri Legislative Session, legislation passed that would require the Department of Health and Senior Services to establish criteria for levels of maternal and infant care. Although, this is a first step in implementing regionalization, Generate Health supports full implementation of Perinatal Regionalization that includes input from providers, hospitals, community agencies and community members in order to address the social determinants of health. With infant mortality rates in our region well above national averages, we support Perinatal Regionalization in Missouri as one way to combat this issue.

**Missouri EITC**
The federal Earned Income Tax Credit (EITC) is a federal tax credit for low and moderate-income working people. It encourages and rewards work as well as offsets federal payroll and income taxes. EITC in Missouri would give a much-needed break to Missourians struggling to get by on low wages. A state EITC would boost local communities and economies while encouraging work, enhancing take-home pay, and improving long-term health and economic outcomes for more than 500,000 Missouri families. Specific to maternal, child health, research also indicates that the EITC improves the health of infants and mothers. Infants born to mothers who received the largest EITC increases in the 1990s had the greatest improvements in birth outcomes such as higher birth weight and fewer preterm births. Generate Health endorses legislation that would create a Missouri EITC.

**Women’s Health Services Program**
The Women’s Health Services Program provides a limited benefit to about 70,000 women between the ages of 18 and 55 with incomes below 200% FPL. This benefit includes contraception, sexually transmitted disease screening and treatment, and one annual exam/PAP test. This program is for eligible women who do not otherwise qualify for Medicaid. This program is funded in Missouri through an 1115 Medicaid waiver. The waiver has been in place since 2007 and is set to expire December 2017 unless it is renewed. The program is a 90-10 match, with the federal government paying for 90% of the program and the state paying for 10% of the program. During waiver year 2015 there were 105,929 participants enrolled.

Generate Health supports a renewal of the Women’s Health Services program as access to family planning services and health screenings are an important part of pre-pregnancy and inter-pregnancy health care for women.

**Protect / promote access to Immunizations**
Generate Health’s Immunization Initiative tracks legislation that impacts access to recommended immunizations. Generate Health supports immunizations as a safe and effective way to eliminate preventable disease and save lives. We also support greater use of the state immunization registry as an effective tool for tracking immunization records which is especially beneficial for our state’s most vulnerable children.
**Opioid Crisis from a Women’s Health Perspective**

Generate Health endorses the implementation of laws to ensure access to health care and support including evidence-based drug treatment for pregnant women who test positive for opioid use. We support efforts to reduce and provide health care access for infants with neonatal abstinence syndrome (NAS). We also oppose punitive legislation that criminalizes a pregnant woman who goes to term before she is able to overcome her drug problem. Laws that punish pregnant women or open them up to government investigation will have the exact opposite of the desired effect because they will deter women from entering the health care system and getting the care they need. This is why these proposals are opposed by leading medical groups including the American Academy of Pediatrics, the March of Dimes, the American College of Obstetricians and Gynecologists, the National Organization on Fetal Alcohol Syndrome, and the National Association of Public Child Welfare Administrators.

**Smoking Cessation**

Smoking during pregnancy can cause a baby to be born prematurely or to have a low birth weight. Smoking during and after pregnancy is also a risk factor of Sudden Infant Death Syndrome (SIDS). With premature birth being the leading cause of infant death in St. Louis, Generate Health supports increased funding for smoking cessation programs for pregnant women to help combat our region’s high rates of infant mortality.

**Home Visitation**

Generate Health advocates for improving community conditions that support family health. Home visiting programs match families looking for additional support and mentoring with trained home visitors such as nurses, social workers, and community health educators. Home visitors meet with families at home and work with families, from pregnancy through their child’s kindergarten entry, to help lay the foundation for the health, education, development, and economic self-sufficiency of the entire family. Research shows home visiting works, improving health and saving money for taxpayers with results like better birth outcomes, improved child health outcomes, better educational attainment for moms, and more economically self-sufficient families.

Generate Health supports a five year reauthorization of The Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) which gives pregnant women and families, particularly those considered at-risk, necessary resources and skills to raise children who are physically, socially, and emotionally healthy and ready to learn. We support increased funding at the state level for home visiting programs. We also advocate for expanding access to community health workers for pregnant and parenting families.