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## Legislative Report July 2018

### Introduction

Generate Health is committed to building a community where moms and babies thrive by *inspiring* and *mobilizing* the St. Louis region to *advance racial equity* in pregnancy outcomes, family well-being and community health.

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*

### 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. We also oppose any efforts to restrict access to the Women's Health Services Program. These proposals would have a harmful impact on women, children and families access to quality health care. Unfortunately, Missouri has chosen not to expand Medicaid as outlined under the Affordable Care Act.

RESULTS: We have seen action at both the state and federal level to propose the enactment of work requirements for Medicaid. Although bills in the 2018 Missouri Legislative Session on this issue did not pass, it is likely that it will come up again in the near future.

Fortunately, the Missouri Legislature did introduce legislation that would extend access to care for pregnant and postpartum women eligible for MO HealthNet. HB 1468, HB 1616, HB 2120 and HB 2280 all would extend MO HealthNet benefits for postpartum women for at least one year. While HB 1468 extended benefits to all postpartum women, the rest of the bills provided an extension for women receiving substance use treatment only. Generate Health, the Missouri Family Health Council and St. Louis Children's Hospital took the lead in

moving these bills through the legislature, while SSM St. Mary's and Washington University's Perinatal Behavioral Health Services provided expert testimony critical to advancing advocacy efforts during committee consideration.

On February 7, 2018, the House Committee on Health and Mental Health Policy held a hearing on all 4 bills. Generate Health and numerous partners attended the hearing and testified in support of the extension of full Medicaid benefits for postpartum women for one year. The Committee unanimously passed a substitute bill that combined the 4 bills into HB 2280 which would extend MO HealthNet benefits for pregnant women for one year to women receiving substance use treatment within 60 days after giving birth. The Committee extended full benefits, not just substance use treatment as many of the bills proposed. HB 2280 passed the full House by an incredibly large margin of 139-6. The House passed budget also included \$4.6 million for the program.

As HB 2280 moved to the Senate, advocates for children and families were descending upon the state capitol in Jefferson City. First, on April 3<sup>rd</sup>, child advocates from across the state including Generate Health's Making Change Happen (MCH) parent leaders participated in the annual Child Advocacy Day. HB 2280 was one of three legislative priorities to be discussed that day. MCH parents shared their stories about the importance of that legislation for themselves and their community. They also gained important information about potential barriers to passage. Then, the next day on April 4<sup>th</sup>, the Missouri Family Health Council had their Advocacy Day where Generate Health staff and other advocates from around the state spoke to elected officials about HB 2280 and other relevant legislation.

On April 17, 2018, a hearing on HB 2280 was held in the Senate Committee on Seniors, Children and Families. Generate Health submitted testimony and partner experts were in attendance to testify in support of the bill. While HB 2280 passed the Committee, coverage in the bill was limited to only substance use treatment for postpartum women for one year. Fortunately, the original bill including full benefits was added to a broader piece of health care legislation SB 660. With the information that full coverage was on the chopping block, Generate Health sent out action alerts to our email network urging that full benefits be kept for postpartum women receiving substance use treatment. ***In the end a compromise was reached and the final version of the bill that passed the legislature included that pregnant women receiving substance use treatment within 60 days of giving birth shall be, subject to appropriations and federal approval, eligible for MO HealthNet benefits for substance use treatment and mental health treatment for substance use for no more than 12 additional months, as long as the woman remains adherent with treatment.*** This legislation has been signed into law by the Governor and is a victory for women, babies and families. The final budget included about \$1.4 million for the program. Federal approval in the form of a waiver from the Centers for Medicare and Medicaid (CMS) is required for implementation of the extension.

### **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.

**RESULTS:** During the 2018 session the Missouri Legislature introduced bills in both the House and Senate to establish a Missouri EITC. Although hearings were held on these bills and Generate Health submitted testimony in support, they never moved past the committee level. However, the Missouri EITC was included in earlier versions of approved tax bills such as HB 2540 that passed the legislature. Unfortunately, it was removed in final versions and did not cross the finish line this year.

### **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 can 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.

**RESULTS:** In addition to the passage of the extension of certain MO HealthNet benefits for postpartum women receiving substance use treatment, HB 1875 was introduced this past session that would create the crime of endangering the welfare of a child in the first degree if a person knowingly misuses a narcotic drug while pregnant. A hearing was held on February 19, 2018 where Generate Health submitted testimony in opposition to punitive legislation that criminalizes a pregnant woman who goes to term before she can overcome her drug problem. Fortunately, this bill did not pass out of committee or move forward in the legislature.

### **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.

**RESULTS:** This past year Generate Health advocated for a five-year reauthorization of The Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) which expired on

September 30, 2017. MIECHV 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. Our advocacy efforts included joining the Home Visiting Coalition in MIECHV days of action via social media and action alerts to our email network. After much delay, on February 9, 2018 Congress passed a 5-year extension of MIECHV.

### **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.

**RESULTS:** Fortunately, legislation that would have impeded access to immunizations did not pass the legislature this session. Unfortunately, legislation that would require all employees and volunteers of certain inspected health care facilities receive an influenza vaccination every year between October 1 and March 1 did not move forward during the 2018 session. The Centers for Disease Control and Prevention (CDC) recommends pregnant women and health care personnel are included in the priority group for vaccination during flu season.