



MATERNAL & CHILD HEALTH

Ensure each pregnant woman and child in Pennsylvania has the opportunity for affordable, quality health care access. No pregnant woman or child in Pennsylvania should be without health insurance and the access to quality health care that is necessary for healthy birth outcomes, improved physical and mental health of a new mother and for a child's healthy development into adolescence and through adulthood. Our maternal and child health care policy agenda provides a comprehensive look at where we can close the gaps for those left without health insurance by expanding eligibility, where we can strengthen both types of benefits as well as access to physical, mental and dental services, and access to nutritious food.

DATA POINTS

Pennsylvania has the **8TH** highest number of uninsured children in the country with 128,000 children (or 4.6%) without health insurance.

Childhood vaccination rates dropped nearly **50%** or greater for kids ages 1 through 18 during the COVID-19 pandemic, while pediatric visits remain substantially below baseline by **25%.**

3 IN 5 pregnancy-related deaths in the United States were preventable.

80% of children under age 6 are not being tested for lead poisoning in Pennsylvania despite the increased risk due to our commonwealth's aging housing and infrastructure.

In 2016, only **59%** of eligible one-year-old children were enrolled in WIC, and that number decreased to 38% for three-year-old children.

POLICY PRIORITIES:

1. Extend access to prenatal and postpartum services within Medicaid for mothers to ensure expecting mothers, infants, and toddlers start and stay healthy.

- Advocate to extend postpartum coverage of mothers enrolled in Medicaid from the current 60-day period to 12 months, keeping in line with the 12-month coverage of her baby.
- Seek federal approval to expand CHIP eligibility to include pregnant women not eligible for Medicaid due to immigration status to ensure that all women living in Pennsylvania have access to prenatal appointments and other services for healthy deliveries.
- Promote behavioral health prenatal and postpartum screenings that include evidence-based depression screenings and increase coordination to ensure follow-up services occur for proper treatment.
- Advocate for doula service reimbursement in Medicaid to improve birth outcomes.

2. Build on the success of Medicaid and CHIP to ensure every Pennsylvania child is insured.

- Expand CHIP to include every child living in Pennsylvania regardless of immigration status by passing Dream Care legislation.

- b. Improve enrollment and renewal options to minimize any unnecessary delays or gaps in coverage by expanding and/or strengthening policies such as presumptive eligibility, 12-month continuous eligibility and automated (ex-parte) renewals.
- c. Monitor the new state-based exchange Pennie™ to ensure a “no wrong entry” to Medicaid and CHIP.
- d. Monitor utilization of well-child visits and screenings at recommended intervals according to the AAP’s Bright Futures periodicity schedule.
- e. Monitor immunization rates to ensure that children are staying up to date on routine vaccinations to prevent childhood diseases.

3. Promote the positive health outcomes for children as a direct result of Medicaid, CHIP and/or the Affordable Care Act.

- a. Ensure adequate federal and state funds to maintain Medicaid and CHIP eligibility standards without compromising one program in exchange for another. Ensure messaging of CHIP builds on the shoulders of the success of the Medicaid program.
- b. Promote Medicaid and CHIP as lifelines for children and their families during the COVID-19 pandemic, as demonstrated by the significant increased enrollments since the beginning of the public health emergency.
- c. Defend against attempts at the federal level to repeal or undermine the ACA, as well as efforts to cap Medicaid spending through block grants or per capita caps.

4. Assure that children enrolled in Medicaid and CHIP have adequate benefit packages to meet their needs, and that they are appropriately participating in well-child visits as well as receiving immunizations and screenings necessary for their healthy development.

- a. Monitor and review compliance of managed care requirements in both the Medicaid and CHIP contracting process and through enhanced partnerships with managed care organizations (MCOs).
- b. Ensure that Medicaid and CHIP are implemented with fidelity by measuring quality and performance of mandatory benefits within the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program.
- c. Research and advocate for changes within both physical and behavioral health benefit packages as necessary, including exploring the integration of physical and behavioral health services within Medicaid and identifying policies to improve childhood mental health.

5. Assure that children enrolled in Medicaid and CHIP are receiving dental care as oral health is a key measure of overall health.

- a. Monitor utilization of kids in Medicaid and CHIP receiving regular dental care.
- b. Increase dental sealants as preventive measure for school-age children.
- c. Integrate dental care by applying fluoride varnish to strengthen tooth enamel during well-child visits.

6. Promote efforts to identify and prevent lead exposure in children to ensure their healthy development.

- a. Improve the measurement to effectively monitor that the required EPSDT lead testing is occurring for children in Medicaid and CHIP.
- b. Advocate in support of a statewide lead testing mandate for all Pennsylvania children, as the Department of Health determined that the entire commonwealth is “at risk” for exposure.
- c. Advance policies for young children with lead poisoning to ensure care coordination and appropriate referrals to early intervention.

7. Increase access to healthy nutrition for women and young children to ensure healthy development.

- a. Support the financial stability and modernization of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to increase participation among Pennsylvania mothers and children.
- b. Implement ongoing flexibility of telehealth services to minimize or eliminate barriers to enrolling and retaining WIC.
- c. Explore policy improvements for children participating in the Supplemental Nutrition Assistance Program (SNAP) or other similar nutrition programs.
- d. Explore policy improvements for children participating in TANF, whose families are living in deep poverty, to help build upon adequate food assistance.

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LEGISLATIVE OR REGULATORY ACTION NEEDED TO ADVANCE POLICY PRIORITIES:

- Monitor state legislation that will automatically connect women who screen positive for depression or anxiety with early intervention services.
- Urge progress of federal “Helping MOMS Act” that would give states an easier path towards federal approval of 12-month postpartum Medicaid coverage through bypassing the waiver process.
- Monitor state legislation that would provide specific appropriations for lead remediation.
- Support state legislation to ensure every child in Pennsylvania is tested for lead exposure at ages one and two.
- Advocate for state appropriations for a 12-month continuous eligibility policy for children ages 4 through 18 in Medicaid.
- Seek federal approval to expand CHIP eligibility to include pregnant women not eligible for Medicaid due to immigration status.
- Assist partners pushing for legislation which would expand eligibility in CHIP to all kids living in Pennsylvania regardless of immigration status.
- Advocate for federal legislation to increase the Federal Medical Assistance Percentage (FMAP) during the public health emergency and subsequent economic downturn to account for the increased enrollments with Medicaid and CHIP.

ACTIONS WE'RE WATCHING:

- The Maternal Mortality Review Commission is due to report on their first two years of case review, which will also include legislative recommendations to combat the issue.
- The state's Perinatal Quality Collaborative is set to advance its Maternal Depression (MOMD) Package.
- In the summer of 2020, the Department of Health released the WIC Request for Applications (RFA), with the selection of bidders anticipated in early 2021.
- Opportunity to adjust current lead measurement requirements to capture full two-test metric with managed care contracts in 2022.
- U.S. Supreme Court ruling on latest ACA case (California v. Texas) in spring or summer 2021.
- Planning for the end of the designated Public Health Emergency period (currently January 2021 but another extension is expected), as continued coverage and added flexibilities that are currently in place for Medicaid and CHIP during the pandemic will end, and we need to ensure a smooth process to prevent unnecessary loss of coverage.
- Monitor DHS' plan to merge CHIP enrollment into the county assistance offices (information technology ramp up through 2023).
- Monitor the procurement process for Medicaid physical health managed care organizations (PH-MCOs), which has stalled for a third time due to bid protests.



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