

## Insights

# Children's Health Policy Update: Fall 2019/Winter 2020

As we dive in to 2020, we're sharing an update on policies and public programs that impact children's health outcomes. We've included, important legislation to watch in the coming months, and a summary of vital public programs and funding included in FY2020 appropriations. By knowing what's happened and what's coming down the pike, children's health advocates can work together to promote policies that help children and families achieve their optimal health and well-being.

## **Fairness for Breastfeeding Mothers Act signed into law**

The *Fairness for Breastfeeding Mothers Act*, signed July 25, 2019, is an important step toward promoting policies that better support women toward reaching their breastfeeding goals. The law requires that [certain federal buildings have a clean, private lactation space](#) where women can pump breastmilk and breast/chest feed their babies. This bill expands on the previous law, which only required a designated lactation space for federal employees.

Breastfeeding has numerous benefits on maternal and child health, including supporting mother-child bonding, reducing the risk of certain maternal cancers, and lowering the risk of Sudden Infant Death Syndrome (SIDS). The Fairness for Breastfeeding Mothers Act reflects the need for more policies that make it easier for mothers to incorporate breastfeeding into their daily lives. As internationally and nationally recognized breastfeeding expert, Lori Feldman-Winter, MD, MPH, puts it: "Women should feel empowered to meet their breastfeeding goals *and* their personal and workforce goals." Read her article [here](#), where she expands on the need for paid parental leave.

## **The Home Visiting to Reduce Maternal Mortality and Morbidity Act**

With approximately [700 women](#) dying from pregnancy or pregnancy-related complications every year, the U.S.'s maternal mortality rate is the worst in the developed world. And disturbingly, there are stark racial inequities: Black, American Indian and Alaskan native women are dying at more than three times the rate of white women. According to the CDC, approximately [60 percent](#) of pregnancy-related deaths are preventable, which illustrates a vital need for comprehensive, multi-pronged, preventive strategies.

The *Home Visiting to Reduce Maternal Mortality and Morbidity Act* responds to this need and was passed by the House of Representatives on December 12, 2019. If passed by the Senate, the Act would double the Maternal, Infant and Early Childhood Home Visiting Program (MIECHV) funding from \$400 million to \$800 million over two years. Home visiting programs have been shown to reduce pregnancy induced hypertensive disorder, pre-term birth and maternal depression—all risk factors for maternal mortality and morbidity. Because home visitors have strong relationships with families, they better understand the social determinants affecting families' health. This uniquely positions them to connect families with relevant resources and interventions, provide appropriate screenings and referrals, and help families develop relationships with health care providers in their community.

In November 2019, NICHQ joined more than 50 national organizations that co-signed a letter offering strong support for the Home Visiting to Reduce Maternal Mortality and Morbidity Act and talks are underway to gain support for the measure in the Senate.

## Two pieces of legislation to keep your eye on:

- [H.R. 4995](#), the *Maternal Health Quality Improvement Act of 2019*, aims to improve obstetric care in rural areas through better data collection and coordination, developing a rural maternal and obstetric care training demonstration program and initiating telehealth approaches, among other initiatives. The bill also authorizes grants for innovation in maternal health to develop and disseminate best practices in providing maternal care.
- [H.R. 4996](#), the *Helping Medicaid Offer Maternity Services (MOMS) Act of 2019*, would create a new state plan option to extend continuous Medicaid or CHIP eligibility for one year postpartum.

## The number of uninsured children is on the rise

This fall, the U.S. census bureau released a report sharing that approximately [425,000 more children](#) were uninsured in 2018 than in 2017. This jump in large part reflects a decline in public coverage, specifically Medicaid and the Children's Health Insurance Program (CHIP). While private insurance coverage remained relatively unchanged from year to year, the percentage of children with public coverage decreased by 1.3 percentage points. Funding cuts to the Affordable Care Act's Navigator outreach programs and the 2017 delay in CHIP funding combined to make it more difficult for children and families to enroll in these vital public programs.

Experts at the Georgetown University's Center for Children and Families also note the "public charge" rule's ["chilling effect"](#) on enrollment for immigrants and mixed-status families. Because the rule makes it harder for immigrants on public assistance to become American citizens, families seeking citizenship are withdrawing from or not enrolling in Medicaid/CHIP.

While Open Enrollment is over, people may be able to enroll in or change health plans if they have certain life changes or qualify for Medicaid or CHIP. Learn more [here](#).

Giving all children the opportunity to reach their optimal health requires universal coverage. Not only can children with health insurance access needed medical care, they also [perform better in](#)

[school and have greater financial security](#) later in life.

“The 2018 jump in the number of children without insurance is startling and worrisome,” says NICHQ President and CEO Scott D. Berns, MD, MPH, FAAP. “As children’s health advocates, we need to speak out for policies that encourage increased enrollment in public insurance programs, so that all children have access to health care, resources and interventions.”

## **Appropriations for fiscal year 2020: Possible increases in Title V Maternal and Child Health Block Grant**

The federal government’s fiscal year (FY) began on Oct. 1, 2019 and goes through Sept. 30, 2020. Like previous fiscal years, agreement on funding levels was not attained before the end of the fiscal year, prompting the enactment of a continuing resolution through December 20, 2019. The week of December 16, the House and Senate approved all 12 appropriations bills for FY 2020 in two omnibus legislative packages and the President signed both measures into law on December 20, 2019.

The funding measure included \$687,700,000, for the Title V Maternal and Child Health Services Block Grant, which represents a \$10 million increase over fiscal year 2019 levels. This increase will provide additional funding for the:

- Alliance for Maternal Health Safety Bundles to spread the implementation of maternal safety bundles in the US;
- Screening and Treatment for Maternal Depression funding, in addition to the creation of a Maternal Mental Health Interagency Task Force charged with preparing an interagency report to address gaps in maternal mental health public awareness, screening, diagnosis and delivery for pregnant and postpartum women;
- Pediatric Mental Health Care Access Program to expand access to behavioral health services in pediatric primary care settings;
- Infant Toddler Court Teams to change child welfare practices to improve the well-being of infants, toddlers, and their families;

There were also other noteworthy maternal and child health highlights in the bill such as:

- \$50 million for the Centers for Disease Control and Prevention (CDC) to modernize public health data systems; and,
- \$25 million for the CDC and the National Institutes of Health to study firearm injury and mortality prevention. Significantly, this represents the first time in more than 20 years that the federal government has funded gun violence prevention research.

*Interested in legislative updates from early in 2019? Read [our article from earlier this year](#) to catch up on what you might have missed.*