

Senate Health and Human Services Committee

Cameron Lapine 271-2104

SB 175-FN, relative to Medicaid coverage for mothers.

Hearing Date: February 8, 2023

Time Opened: 10:22 a.m.

Time Closed: 12:15 p.m.

Members of the Committee Present: Senators Birdsell, Avard, Bradley, Whitley and Prentiss

Members of the Committee Absent: None

Bill Analysis: This bill:

1. Mandates that the department of health and human services extend Medicaid coverage for pregnant women to 12 months postpartum, to cover doula services, to cover lactation services, and to cover donor breast milk for eligible infants, and creates appropriations thereof.
 2. Establishes minimum workplace supports for nursing mothers.
 3. Appropriates money to the department of health and human services to support healthy outcomes for caregivers and children.
 4. Establishes a commission to study home visiting programs for all parents of newborns and young children.
 5. Mandates the department of health and human services establish a network of early childhood behavioral health supports.
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Sponsors:

Sen. Whitley
Sen. Rosenwald
Sen. Watters
Sen. Ricciardi

Sen. Prentiss
Sen. Altschiller
Sen. Soucy
Rep. Simpson

Sen. Perkins Kwoka
Sen. Fenton
Sen. Chandley
Rep. M. Murray

Who supports the bill: In total, **267 individuals** signed in in support of SB 175-FN. The full sign in sheets are available upon request to the Legislative Aide, Cameron Lapine (cameron.lapine@leg.state.nh.us).

Who opposes the bill: In total, **5 individuals** signed in in opposition to SB 175-FN. The full sign in sheets are available upon request to the Legislative Aide, Cameron Lapine (cameron.lapine@leg.state.nh.us).

Who is neutral on the bill: In total, **3 individuals** signed in as neutral on SB 175-FN. The full sign in sheets are available upon request to the Legislative Aide, Cameron Lapine (cameron.lapine@leg.state.nh.us).

Summary of testimony presented in support:

Senators Becky Whitley, Suzanne Prentiss, and Denise Ricciardi Senate Districts 15, 5, and 9

- Senator Whitley noted that Senator Rebecca Perkins Kwoka (Senate District 21) was also crucially involved in the drafting of SB 175-FN.
- Sen. Whitley said SB 175-FN is the “NH MOMnibus” Act. She said it is a comprehensive, solutions-based bill to improve maternal and infant health outcomes, expand the perinatal workforce, and help support New Hampshire working mothers and their families.
- Sen. Whitley said that there is a rising concern about the health and wellbeing of mothers. She said more women left the workforce than men as a result of the COVID-19 pandemic.
- Senator Prentiss said the Senate moved forward with SB 407-FN (2022) but the bill fell apart over disagreements with the House of Representatives. Referencing Section 3, she said SB 175-FN would expand postpartum Medicaid coverage for 12 continuous months. She said there is a group of women who become eligible under the Pregnancy Pathway for 60 days after birth but, because their income is above 196% of the federal poverty level, they are not eligible for the Granite Advantage Medicaid program.
- Sen. Prentiss said the New Hampshire Maternal Mortality Review Committee has found an increase in the number of deaths, with many occurring in the postpartum period. She said in FY’19, Medicaid covered 27,090 women; 762 lost coverage after 60 days.
- Sen. Prentiss said expanding postpartum Medicaid coverage will set women and children on a solid foundation for life.
- Senator Avard, referencing the Clancy family tragedy in Duxbury, Massachusetts, asked if expanded postpartum Medicaid coverage was available to that family.
 - Sen. Prentiss, referencing a map included in her written testimony, said expanded Medicaid coverage was available in Massachusetts.
- Sen. Avard asked how the Clancy family fell through the cracks.
 - Sen. Whitley deferred the question to others.
- Senator Bradley asked what the bill number was that dealt with postpartum Medicaid coverage in 2022.
 - Sen. Prentiss clarified it was SB 407-FN.
- Senator Ricciardi said that Section 10 deals with policies for nursing mothers. The Senate passed SB 69 (2021) but it died on the table in the House. She said the language in SB 175-FN was crafted with the support of the Governor’s Council on Lactation, the Department of Labor, and the Business and Industry Association.
- Sen. Ricciardi said SB 175-FN requires businesses with six or more employees to have sufficient space and breaks for women to express milk. She said the breaks are defined in the language as 30 minutes for every three hours of work, but they are unpaid. She if there is an undue hardship for a specific employer, they can apply for an exemption.

- Sen. Ricciardi said amendments to the Fair Labor Standards Act of 1938 and the PUMP for Nursing Mothers Act of 2022 take moms into account but SB 175-FN is an important bill that would go a long way.
- Sen. Whitley said SB 175-FN is a large legislative package because there is no single solution to address the many complex issues new mothers face.
- Sen. Whitley said Section 5 adds doula care to Medicaid coverage. She said doulas are nonclinical personnel who assist mothers during pregnancy, birth, and the postpartum period. She said certification through the Office of Professional Licensure and Certification (OPLC) is also established, so that doula coverage is billable. She said the appropriation for doula care is \$300,000 for each year of the biennium.
- Sen. Whitley said Section 5 also adds lactation services to Medicaid coverage. She said it is important to support nursing mothers because breastfeeding is the best thing for babies for a variety of reasons. She said breastfeeding is hard and requires support for a mother to stick with. She said the appropriation for lactation services is \$300,000 for each year of the biennium.
- Sen. Whitley said Section 4 adds donor breast milk to Medicaid coverage. She said the shortage of formula is a horrifying idea; that some mothers do not have access to food for their babies. She said donor breast milk is a highly regulated situation. She said that appropriation for donor breast milk is \$250,000 for each year of the biennium.
- Sen. Whitley said Section 11 deals with State funding for family resource centers (FRCs). She said FRCs are the frontline agencies to support vulnerable families. She said FRCs are a solution for mothers who might otherwise fall through the cracks. She said some women do not currently have access to a FRC.
- Sen. Whitley said Section 15 adds mental health consultations for early childhood. She said sometimes providers do not have the capacity to support small children with many needs, which leads to the children being removed from programs, which leads to mothers having to leave the workforce to care for their children.
- Sen. Whitley said the point of SB 175-FN is to prevent heartbreaking situations and provide the opportunity for a dignified pregnancy, birth, and postpartum period.

Dellie Champagne

Save the Children Action Network

- Ms. Champagne discussed her struggles with her career as a teacher following the birth of her son, Peter, who suffers from schizophrenia.
- Ms. Champagne urged the Committee to devote special attention to the mental health portions of SB 175-FN. She said she is a member of the Oversight Commission on Children's Services and they frequently hear about increases in mental health issues for children.

Nancy Vaughn

Government Relations Director, American Heart Association

- Ms. Vaughn said she supports extending postpartum Medicaid coverage to 12 full months. She said that the number one cause of death for women in the United States is cardiovascular disease.
- Ms. Vaughn said Medicaid plays an important role in the health care of many people. She said timely postpartum doctor visits are important.
- Ms. Vaughn said that diabetes, hypertension, mental health, and substance use disorder (SUD) are all of concern.

- Ms. Vaughn said hypertension disorders of pregnancy (HDP) occur in 10% of pregnancies and half of women who experience HDP will develop cardiovascular problems later in life.
- Senator Birdsell said there were 11 pregnancy-associated deaths in New Hampshire in between 2020 and 2021, of which nine were because of an overdose and two were because of cardiovascular death. She asked what part of SB 175-FN would help address those problems.
 - Ms. Vaughn said postpartum care is not a one-shot deal of seeing a provider. She said some issues may not develop until after the 60-day Pregnancy Pathway coverage has expired.

Holly Stevens

Director of Public Policy, NAMI

- Ms. Stevens said the maternal fatality rate increased 26% between 2000 and 2014 and half of maternal deaths in New Hampshire happened between six- and twelve-months postpartum.
- Ms. Stevens said 11.2% of New Hampshire women with a livebirth reported depressive symptoms. She said anxiety is also an issue.
- Ms. Stevens said that mothers having postpartum depression have an impact on children and research has shown linkage between postpartum depression and delayed cognitive and language development and disordered attachment.
- Ms. Stevens said in 2019 there were eight maternal deaths, of which four were overdoses and two were suicides. She noted suicides in the postpartum period are also an issue in New Hampshire.

Rebecca Woitkowski

Kids Count Policy Director, New Futures

- Ms. Woitkowski is also the Chair of the Wellness and Primary Prevention Council and a member of the Council for Thriving Children.
- Ms. Woitkowski said SB 175-FN is a comprehensive bill with many facets towards helping alleviate maternal deaths. She said funding for FRCs and the creation of a commission on home visiting will help mothers in crisis connect with resources that can alleviate the crisis.
- Ms. Woitkowski said SB 175-FN was not about a single lever, but about the entire package.
- Ms. Woitkowski said that as a mother, birthing her first child was traumatic and a home visit saved her. She said a doula saved her with her second child.
- Sen. Whitley asked for her thoughts on how the combination of levers in SB 175-FN can address the issues around maternity, since no single provision is a panacea.
 - Ms. Woitkowski said that is important to meet families where they are at with the services that are best for that family. She said there may be women who do not like home visits and prefer to go to a FRC. She said prenatal care through age eight focuses on having community-based options for families. She said FRCs leverage federal resources and build strong networks for families.

Karen Liot Hill

City Councilor, Lebanon

- Ms. Liot Hill referenced her testimony on SB 233-FN.
- Ms. Liot Hill said she benefited from the Pregnancy Pathway when she was pregnant.

- Ms. Loit Hill said there is a stigma about talking about depression and a further stigma about talking about how hard it is to be a mother. She said women feel they are a failure if they admit how hard it is to be a mother.
- Ms. Loit Hill said when airline stewards remind individuals to put on their own oxygen mask before helping someone else, she feels that specifically applies to mothers. She said when you are taken care of, you are better able to take care of those around you.

Devan Quinn

Director of Policy, NH Women's Foundation

- Ms. Quinn referenced her written testimony.
- Ms. Quinn said mothers are the backbone of the economy and SB 175-FN will expand care to the people who take care of the community and the economy.
- Sen. Whitley said it feels like that conversation is about how to not set an entire generation of women back, as a result of the COVID-19 pandemic.
 - Ms. Quinn said that women were four times as likely as men to either leave the workforce or reduce their hours during the COVID-19 pandemic. She said that she is seeing women pushed out of the workforce, but the workforce needs them to come back.

Bob Dunn

Director of Public Policy, Diocese of Manchester

- Mr. Dunn said the Diocese looks for issues around human dignity and the common good. He said it is clear that SB 175-FN advances human dignity and the common good in New Hampshire.
- Mr. Dunn said the Catholic Bishops of the United States support postpartum care for 12 months because it is a pro-life measure.
- Mr. Dunn said everyone agrees that the family is the keystone of society and there are few better ways to support a family than by supporting the mother and children.
- Mr. Dunn said passing SB 175-FN has the chance to translate into, for every mother benefited, the opportunity for at least one child to have better prospects for their future than would otherwise be the case.

Joyce Kelly

Co-Chair, New Hampshire Breastfeeding Task Force

- Ms. Kelly said breastfeeding reduces risks of childhood illness and various problems for mothers.
- Ms. Kelly said commercial formula is a safe alternative but spreading the benefits of breastfeeding across the population is very important, especially for children living in poverty.
- Ms. Kelly spoke in support of visitations for lactation counselors.
- Ms. Kelly said support for mothers after they are discharged from the hospital is sparse or nonexistent. She said spending money upfront will avoid more complex problems later.
- Ms. Kelly said SB 175-FN is responsive to the need and comprehensive.
- Ms. Kelly said a break to express milk every three hours is physiologically appropriate and SB 175-FN allows flexibility for employers while still meeting the needs of employees.

Paula Oliviera

- Ms. Oliviera is an international board-certified lactation consultant.

- Ms. Oliviera said the use of donor milk, rather than formula, reduces the risk of necrotizing enterocolitis by 79% for babies born premature, 85% reduction in intraventricular brain hemorrhage, and 77% reduction in sepsis.
- Ms. Oliviera said 87% of NICUs use donor milk when supplemental nutrition is required for babies.
- Ms. Oliviera said the donor milk process is accredited by the Human Milk Banking Association of North America (HMBANA) and regulated by the Food and Drug Administration (FDA). She said there are 28 milk banks in the United States and three in Canada. She said donor milk is evidenced-based and clinically-sourced.
- Ms. Oliviera said there is limited access to donor milk outside of a hospital setting. She said there is a large return-on-investment for public health.

Dr. Amy Roy

- Dr. Roy is a pediatrician. She said she supports safe, stable, nurturing childhoods.
- Dr. Roy said SB 175-FN closes some gaps that are apparent. She said that improving breastfeeding rates leads to reductions in childhood obesity and gastrointestinal wellness and improved opportunities for women to feel confident as mothers.
- Dr. Roy said there is a gap between daycare and behavioral health. She said childcare is essential for all families and the loss of childcare can lead to a spiral effect, from which it can be impossible to recover.
- Dr. Roy said that children who witness domestic violence tend to act out, making them hard to keep in a childcare facility. She asked how a mother could leave her abuser if she doesn't have a job or transportation or housing, all of which increase the trauma for the child.

Representative Renee Monteil Cheshire County District 15

- Representative Monteil is a doula who provides birth and postpartum services. She said doulas have to have complete knowledge of the physiology and anatomy of childbirth, labor, and postpartum care. She said doulas do not just rub the backs of birthing mothers and tell them that they are doing a good job.
- Rep. Monteil said doulas have to have an understanding of birthing, domestic violence, sexual trauma, addiction, baby soothing, and lactational supports.
- Rep. Monteil said doulas provide resources for postpartum depression.
- Rep. Monteil said the more a mother holds a baby, smells a baby, and nurses a baby, the more their brain chemistry will change and their empathy will grow.
- Rep. Monteil said SB 175-FN presents a different pathway that can stop intergenerational trauma and abuse.
- Sen. Avard asked if doulas help fathers.
 - Rep. Monteil said they do.
- Sen. Avard said fathers are a big part of families.
 - Rep. Monteil agreed. She said that most partners participate in prenatal visits. She said she shows them how to alleviate pain and stress. She said a lot of partners are afraid, but also excited.
- Sen. Avard, referencing the Clancy family, said the father left for 24 minutes to pick up take-out. He said that there had been a lot of discussion about mothers, but fathers also require support.
 - Rep. Monteil said that she assumed postpartum psychosis is overlooked in medical settings but a doula would know to look for it. She said a doula would

know to look for previous abuse. She said women who suffer abuse are more likely to require a c-section for birth.

Dr. Steve Chapman

New Hampshire Pediatric Society and New Hampshire Medical Society

- Dr. Chapman said there cannot be healthy children without supports. He said there is only one chance to go through that bonding and growth period.
- Dr. Chapman said SB 175-FN will not make things perfect, but it is the best chance to improve the health and stature of families and children in New Hampshire.
- Dr. Chapman said the pieces of SB 175-FN reinforce each other.
- Dr. Chapman told a story about a mother who was unwell but forced herself through her issues because her Medicaid coverage had lapsed, only to end up in the emergency department to have her gallbladder removed.
- Dr. Chapman compared the cost of expanding Medicaid coverage for a full year postpartum to changing the oil in a car. He said it is a cost upfront that leads to long-term savings.
- Dr. Chapman said he would rather a nurse visit a family in their home than require a family to bundle themselves up and travel 45 minutes to see him in an office.
- Dr. Chapman said FRCs are a good use of services and provide an opportunity for moms and dads to gather.
- Sen. Bradley asked for his thoughts on doula certification.
 - Dr. Chapman said he had seen wonderful supports for families from doulas.
- Sen. Bradley asked if doulas needed to be certified.
 - Dr. Chapman said he had not looked at that issue in detail. He said that all health professionals should probably be certified, but there should not be unnecessary barriers to care.
- Sen. Whitley said the certification of doulas is to allow for Medicaid billing. She said that she had heard from doulas that not all doulas need to be certified. She asked if Dr. Chapman would support an amendment to require certification if the doula wanted to allow Medicaid billing.
 - Dr. Chapman said that made sense to him.

MacKenzie Nicholson and Lauren Dwyer

MomsRising

- Ms. Nicholson said the United States is the most dangerous place in the developed world to give birth and there are major racial disparities. She said women of color lose their lives at three to four times the rate of white women. She said 80% of maternal deaths are preventable.
- Ms. Nicholson said that one-in-four births in New Hampshire are covered by Medicaid.
- Ms. Nicholson referenced written testimony from Rachelle Enes.
- Ms. Nichols referenced the Clancy family and said that bad maternal health care is close to home in New England.
- Ms. Dwyer shared her personal struggle with maternal mental health and explained that she was able to receive the care she required because of her private insurance.
- Ms. Dwyer said her doctor told her they don't worry about the mothers who seek help; it is the mothers who don't or can't seek help that concern them.
- Ms. Nicholson asked what happens to mothers who leave the hospital without a child.

Heather Martin

- Ms. Martin shared her personal story of the loss of her sister from maternal suicide.

- Ms. Martin said maternal mental health is a leading cause of death and it is underreported. She said over 80% of maternal deaths are preventable.
- Ms. Martin said she developed a screening workflow for mothers at pediatric appointments in Manchester. She said this should happen everywhere.
- Ms. Martin said the baby in the Clancy family tragedy was eight months old, so Pregnancy Pathway Medicaid coverage would not have been in place.
- Ms. Martin said there is a shortage of mental health help for mothers in New Hampshire. She said mothers need to be supported so that they can support their children.

Courtney Tanner

Director, Government Relations, Dartmouth Health

- Ms. Tanner referenced her written testimony.
- Ms. Tanner said the loss in Medicaid coverage in the postpartum window leads to about \$1,000,000 in gross charges for uncompensated care. She said this is a very conservative estimate because emergency care is more expensive than preventative care.
- Ms. Tanner said 75% of employees in the health care workforce are women of childbearing age. She said that clinical coverage can only be ensured when the backbone of the workforce can get back to work.
- Ms. Tanner referenced written testimony from Daisy Goodman.
- Sen. Whitley said SB 175-FN contains a lot of appropriations and looks expensive but is not. She said fiscal notes do not identify potential savings from preventative measures.
 - Ms. Tanner said Dartmouth Health's position is that when people have access to care, preventable services are better. She said that service fee charges are lower than the cost for an emergency department visit or an overdose death with emergency medical services.
- Sen. Whitley said that the cost of SB 175-FN is \$3,000,000 to \$4,000,000 over the course of the biennium. She asked if the State would see savings in that amount or less.
 - Ms. Tanner predicted a strong return-on-invest for SB 175-FN.

Farah Sheehan

- Ms. Sheehan said that doulas are also mothers and employees. She said providing reimbursement for doula coverage through Medicaid would enable them to remain employed and paid.

Summary of testimony presented in opposition: None.

Neutral Information Presented:

Henry Lipman and Tricia Tilley

State Medicaid Director; Director, Division of Public Health Services, Department of Health and Human Services

- Mr. Lipman said Page 1, Line 20 should be changed from referencing the American Rescue Plan Act to referencing the Consolidated Appropriations Act.
- Mr. Lipman said SB 407-FN (2022) had an appropriation of \$200,000 but the Department felt \$300,000 was more appropriate for SB 175-FN because of the 25% increase in hospital delivery and birthing center rates.

- Mr. Lipman referenced his written testimony and maps showing expanded postpartum Medicaid and doula coverage.
- Sen. Whitley asked if the Department would need more time to implement adding doula coverage and donor milk and lactation services to the Medicaid program.
 - Mr. Lipman said the doula coverage would take about a year to go through the OPLC and Centers for Medicare and Medicaid Services (CMS) processes. He said the donor milk would also need to through CMS but the Department was determining if it would be a state plan amendment or a waiver. He said 17 other states covered donor milk.
- Sen. Bradley asked if the reference to Section 2 on Page 7 should reference Section 3.
 - Sen. Whitley said that was correct.
- Sen. Bradley asked about the current State appropriations to FRCs.
 - Ms. Tilley said there had been some State appropriations to the FRCs but there are none currently. She said the Department does have various contracts with various FRCs to conduct various tasks, but it is a patchwork.
- Sen. Bradley asked if FRC funding was included in the Department's Governor's Budget request.
 - Mr. Lipman said it was not included in the Medicaid request.
 - Ms. Tilley said it was not included in the Public Health request.
- Sen. Bradley asked what was being proposed in Section 15 that was not already being done.
 - Ms. Tilley said Section 15 works to provide early childhood behavioral support in the context of childcare. She said the Department has, through various federal programs, sent behavioral coaches into childcare settings to help facilities understand a child's needs and prevent that child from getting kicked out.
- Sen. Bradley urged the Department to flesh out what is already being done and what in SB 175-FN is going above and beyond.
 - Ms. Tilley said there is a patchwork approach currently where there are specific contracts for specific programs in specific locations. She said the hope is to standardize opportunities across the state.
- Sen. Whitley said Section 15 was written with the input of Deb Nelson and Rebecca Ross. She spoke about the importance of breaking down silos and building systems. She asked for their thoughts on breaking down silos.
 - Mr. Lipman said Ms. Ross would be a better person to speak to about Section 15. He said integration is important to make sure a program is available to all, clear in what it does, and understood where it is housed. He said a consistent funding source would make that possible.
- Sen. Bradley asked if Medicaid covered doula care.
 - Mr. Lipman said it did not in New Hampshire.
 - Sen. Bradley clarified that Medicaid in New Hampshire did not cover any form or amount of doula care.
 - Mr. Lipman said that was correct.
- Sen. Whitley asked for commentary on how FRCs fit into the system.
 - Ms. Tilley said the Department is interested in providing a solid foundation for FRCs across the state to connect mothers, fathers, children, and childcare providers across the spectrum rather than pigeonholing families into narrow, specific programs. She said they have not been able to build an integrated system because the FRCs are funded with federal money, which comes with stipulations and strings attached. She said FRCs address emergent needs and

lead to positive outcomes, including reductions in child maltreatment and increased in childhood vocabulary.

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Date Hearing Report completed: February 10, 2023