Human Services Committee JOINT FAVORABLE REPORT

Bill No.:HB-7102
AN ACT CONCERNING MATERNAL AND INFANT HEALTH CARE.Vote Date:3/14/2025Vote Action:Joint FavorablePH Date:3/6/2025File No.:408

Disclaimer: The following JOINT FAVORABLE Report is prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose.

SPONSORS OF BILL:

Human Services Committee

CO-SPONSORS OF BILL:

Rep. Larry B. Butler, 72nd Dist.
Sen. Saud Anwar, 3rd Dist.
Rep. Jillian Gilchrest, 18th Dist.
Rep. Matt Blumenthal, 147th Dist.
Rep. Kai J. Belton, 100th Dist.
Rep. Sarah Keitt, 134th Dist.
Rep. Anne M. Huges, 135th District

REASONS FOR BILL:

In response to disparities within the state of Connecticut in regard to maternal health care access, reducing maternal birth health risks, and ensuring affordability to holistic maternal care throughout Connecticut, this bill develops a strategy to increase birth centers and birthing hospitals in underserved regions of the state with a high percentage of Medicaid recipients, increase Medicaid reimbursement for doulas and expand the role of fathers in supporting maternal and infant health.

RESPONSE FROM ADMINISTRATION/AGENCY:

<u>Connecticut Department Of Social Services (DSS), Andrea Barton Reeves, Commissioner:</u> opposes the bill stating that the bill's proposed rate increase for doulas is not included in the governor's recommended budget. It is stated DSS launched the maternity payment bundle on January 1, 2025, and started covering doulas and lactation supports services within the bundled payment. It is stated effective January 1, 2025, DSS added coverage for stand-alone doula services for members who are not already receiving doula services through the maternity bundled payment. It is stated that one of the goals of the maternity payment bundle is to improve access to quality maternal healthcare and eliminate disparities in maternal and birth outcomes so that as the payment bundle matures there are opportunities for increases in birth centers, midwifery care and birthing hospitals, especially in rural areas. It is also stated that a strategy to increase birth centers and birthing hospitals in underserved regions of the state must be lead by the Department of Public Health, with the DSS and other relevant agencies and organizations as collaborators.

NATURE AND SOURCES OF SUPPORT:

<u>Connecticut Hospital Association, Anonymous</u>; supports this bill stating that its focus aims to address access and support issues in the perinatal period that contribute to poor maternal health outcomes especially in underserved areas. It is shared a recommendation that the strategic plan called for in the bill must include an examination of the operational challenges experienced by birthing hospitals, including low birth rates and shortages of providers which impact the availability of care. It is stated a recommendation to the committee to also require the commissioner of health strategy to consult with CHA or a hospital representative in the strategic planning process. It is stated the support of provisions to increase the Medicaid reimbursement rate for doula services covered in the bundled payment for maternity services that it is within available appropriations to ensure that doulas receive sufficient reimbursement for their services to enable patient access to sustained support. It is also stated support for section 3 of the bill to achieve the objective to expand the role of fathers in maternity care as part of the existing fatherhood initiative.

The Commission On Women, Children, Seniors, And Opportunity, Christian Duborg, Food Nutrition Policy Analyst: supports this bill stating it is a crucial step toward addressing the significant disparities in maternal and infant health outcomes within Connecticut, particularly among the African American community as the state works towards a more equitable healthcare system for all Connecticut residents. It is stated that increasing Medicaid reimbursement for doulas, will make essential services more accessible, particularly in underserved communities while expanding birth centers and birthing hospitals will improve maternal and infant health by reducing preterm births, low birth weights, c-sections, and NICU admissions. It is also stated that the expanding the role of fathers recognizes actions that lower maternal mortality risks, encourage breastfeeding, and help mothers with postpartum depression by providing emotional and practical support.

<u>Reproductive Equity Now, Liz Gustafson, Connecticut State Director:</u> supports this bill stating that it will follow through on the promise of public act 23-147, which established licensure of free-standing birth centers as well as the creation of certification pathways for doulas. It is stated that H.B. 7102 would follow through on this promise by requiring the Commissioner of Health Strategy, in consultation with the Commissioners of Social Services and Public Health, to develop a plan to increase access to birth centers and birthing hospitals in regions of the state with a high percentage of Medicaid recipients. It is stated addressing the ongoing

maternal mortality crisis requires further identifying strategies that diversify and expand birthing resources in Connecticut such as free-standing birth centers which research shows that the benefits and resources that stand-alone facilities include prenatal, labor, and delivery care for low-risk pregnancies. It also is stated that the increase of the Medicaid reimbursement for doulas is key to ensure that Connecticut's doula workforce is supported and sustainable in years to come for their emotional; and physical support to birthing people throughout pregnancy and childbirth, making it critical that they are equitably reimbursed and compensated for the critical care and support they provide.

YWCA Greenwich, Mary Lee Kiernan, CEO and President, & Center for Equity and Justice,

<u>Director, Simone Quartey</u>; supports this bill as a step in addressing the maternal health disparities that disproportionately affect women of color, particularly Black and Latina women, in Connecticut. It is stated that the recent reports show that women of color have an increased risk of complications during childbirth, heightening already high maternal motility rates. It is stated this bill as proposed is crucial to increasing the availability of birthing centers ensuring access to a holistic care experience catered to their needs in order to reduce the risks of risk of complications during pregnancy and childbirth for better overall birth outcomes. It is also stated that doula reimbursement is a key component to this bill as studies have shown doulas emotional, physical, and informational support during labor can reduce maternal complications.

<u>Planned Parenthood of Southern New England, Gretchen Raffa, Chief Policy and Advocacy</u> <u>Officer:</u> supports this bill as a continuation of the work needed in Connecticut towards supporting increases in the number of birth centers and birthing hospitals located in underserved areas of the state while ensuring more equitable access to doula care by increasing Medicaid reimbursement rates for doulas and expanding the engagement of fathers in supporting maternal health; which has been linked to better prenatal care and healthier birth outcomes.

<u>CT Coalition Against Domestic Violence, Meghan Scanlon, President & CEO:</u> supports this bill stating it as key towards increasing access to maternal healthcare services in underserved regions of the state with a high percentage of Medicaid recipients is crucial in supporting the overall health and wellbeing of both new parents and their newborns. It is also stated increasing Medicaid reimbursement rates for doulas is also an important step in ensuring equitable access to meaningful maternal and infant healthcare for all birthing persons.

<u>She Leads Justice (formerly CWEALF), Tonishia Signore, Policy Director:</u> supports this bill stating that it honors a promise made in Public Act 23-147 by requiring the Commissioner of Health Strategy, with the Commissioners of Social Services and Public Health, to develop a plan to increase access to birth centers and birthing hospitals in regions of the state with high Medicaid recipients. It is stated that doulas provide key physical and emotional support and patient-centered care for parents. It is also stated that maternal mortality rates in the United States are higher than any of high-income country in the world and research shows that in Connecticut, black women are four times likely to die before their babies first birthday than white women.

American Civil Liberties Union of Connecticut, Jess Zaccagnino, Policy Counsel: supports this bill to address and improve maternal and infant health outcomes and healthcare access

by supporting increases in the number of birth centers and birthing hospitals in underserved areas of the state, increasing Medicaid reimbursements rates for doulas, and expanding the role of fathers in maternal health through the CFI council. It is stated that black, Latin, indigenous people and people of color, rural communities, and people with low incomes are more likely to have worse outcomes when it comes to maternal and birthing care. It is also stated that research shows that in Connecticut, babies born to Black women are four times more likely to die before their first birthday when compared to babies born to white women.

<u>Connecticut General Assembly, Matt Blumenthal State Representative:</u> supports this bill stating the importance of strengthening reproductive healthcare access in Connecticut. It is stated that in Connecticut, 33 percent of rural hospitals lack obstetric services. It is stated that the severe the severe maternal morbidity rate for Black individuals is twice than the rate for non-Hispanic white families in our state. It is stated that states that have already reimbursed doula services have repeatedly seen birth-related costs significantly decrease. It stated research has shown that when doulas are present, there are lower rates of cesarean sections, shorter labor durations, and improved health outcomes for both the parent and child. It is also stated that through the expansion of state Medicaid reimbursement packages for birth doula services, Connecticut has the opportunity to improve care quality and health outcomes for both parents and their newborns while lowering overall Medicaid expenditures.

<u>Women's Health Connecticut, Paula Greenberg, President and CEO:</u> supports this bill with the recommendation that an assessment for birth centers in underserved areas in Connecticut should focus on a limited number of regional based birth centers and be aware of the fact that there is equity backed birth center companies emerging in this space and understanding this landscape is important to the assessment.

CT Affiliate of American College of Nurse-Midwives, Richard F. Jennings, Treasurer, ;

supports increasing the number of birth centers in Connecticut. It is stated that in 2023 Connecticut ranked 46th in vaginal births in the United States with a cesarean rate of 35.1% and the third highest low risk cesarean rate at 30%. It is stated that there exist severe outcome disparities among racial groups and there exists maternity "deserts" in Connecticut where women need to travel great distances for care in rural area since there is only one birth center in Connecticut. It is also stated that a 4-year study by the Center for Medicare and Medicaid Services Innovations, CMSI, found that birth center care for low-income women were massive and that reducing barriers to access is key to expanding the use of birth centers while also allowing for Medicaid recipients to use birth centers and reducing the cost for the Medicaid program.

<u>CTAFT-WUSH, Rose Reyes, Educator</u>: supports this bill stating that it will reducing maternal mortality, closing racial disparities in birth outcomes, and strengthening our healthcare infrastructure. It is stated that it will increase Medicaid reimbursement rates and provide critical financial relief to birthing hospitals. It is also stated that hospitals receiving this support, need to be held to high standards of care, with strong oversight and accountability measures in place.

<u>St Patrick St Anthony Church, Stephanie Sliver, Member & Volunteer:</u> supports this bill stating the importance of supplying necessary healthcare resources those in need given rising costs.

NATURE AND SOURCES OF OPPOSITION:

The following individuals have submitted testimony in opposition of the bill.

David Cardoza

Derek Sharpe

Leslie Nartey

Reported by: Caleb Jean-Pierre

Date: April 3, 2025