

Testimony of Bianca Holder
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Ohio Senate Hearing on HB 96 – Medicaid and Maternal-Infant Health
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Chairman Cirino, Vice-Chairman Chavez, Ranking Member Hicks-Hudson, and Members of the Committee thank you for the opportunity to offer this testimony. March of Dimes advocates for the health and well-being of mothers and babies across Ohio.

Ohio is facing a maternal and infant health crisis. According to our 2024 *March of Dimes Report Card*, Ohio received a D+ for preterm births, with one in nine babies born too early, and 912 babies dying before their first birthday. These numbers are unacceptable, and the situation is even more alarming for Black women, whose preterm birth rate is 51% greater than that of other women.

Adding to these disparities, 14.8% of Ohio counties are identified as maternity care deserts, lacking hospitals, birth centers, or obstetric providers. For Black women, those living in high environmental vulnerability areas are 31% more likely to receive inadequate prenatal care. These challenges demand urgent attention.

On behalf of March of Dimes and the thousands of families we serve in Ohio, we respectfully urge the Ohio Senate to restore Governor DeWine's critical investments in Amended Substitute House Bill 96. Specifically, we ask that you:

- **Restore full funding for Help Me Grow** evidence-based home visiting programs, including scaling the Family Connects model statewide.
- **Restore Community Infant Vitality Funding to Reduce Maternal and Infant Deaths** to reduce maternal and infant mortality rates.
- **Preserve continuous Medicaid coverage** for children from birth to age three, ensuring essential care during their most critical years of development.
- **Remove restrictions on Medicaid coverage for doula services**, allowing all Ohioans to benefit from this vital support.

These programs and services are proven, cost-effective solutions that create a strong continuum of support for Ohio families.

1. Restore Funding for Evidence-Based Home Visiting Programs

Help Me Grow's proven home visiting programs connect expectant mothers and new parents with trained professionals who offer tailored support during the earliest and most vital stages of a child's development. These visits improve maternal and infant health, enhance school readiness, and help prevent child abuse and neglect. The need is clear:

- Ohio ranks 30th in the U.S. for infant maltreatment and 43rd for infant mortality.
- Just 8.8% of eligible infants currently receive home visiting services.
- Children in these programs are 50% less likely to be born with low birthweight—a key predictor of long-term health.

2. Restore Community Infant Vitality Funding to Reduce Maternal and Infant Deaths

Ohio faces a severe preterm birth problem, with 1 in 9 babies born too early. Preterm birth, birth defects, and other factors remain the leading causes of infant mortality. Our maternal mortality rate, at 24.5 maternal deaths out of 100,000 live births is greater than the national rate and reflects the persistent and dangerous risks women face during pregnancy and childbirth. Strategic, community-driven investments can help turn these statistics around. These outcomes are unacceptable. To ensure every mom and baby has the best possible start, we must prioritize strategic, community-driven investments that save lives and support healthy families. When lives are at stake, every dollar makes a difference.

3. Remove Proposed Restrictions to Multi-Year Continuous Coverage for Medicaid

The first 1,000 days of a child's life are critical for brain development, with a child's brain being 80% developed by age three. Nearly 48% of Ohio's children under six rely on Medicaid for health coverage, making continuous access to health care from birth to age three essential for ensuring children get well-child visits, immunizations, and early developmental screenings. Removing proposed cuts to this coverage will help children thrive and succeed long-term. Continuous Medicaid coverage from birth to age three is a vital strategy to help every child start strong and thrive.

4. Medicaid Coverage for Doula Services

Expanding Medicaid coverage for doula services is equally vital. Doulas provide continuous support throughout pregnancy, childbirth, and postpartum care. They help reduce preterm births, low birthweight, and cesarean delivery rates while addressing postpartum mental health issues, with 13% of Ohio mothers experiencing postpartum depression. Doulas help address these challenges by offering consistent, compassionate support and connecting mothers to critical mental health resources. In many Ohio counties, especially those with no maternity care providers, doulas help bridge gaps in access to care. Yet under current law, HB 96 limits Medicaid reimbursement for doulas to just six counties, restricting access and hindering statewide data

collection. To ensure all moms and babies in Ohio have the opportunity to thrive, we urge the removal of these restrictions and full Medicaid coverage for doula services statewide. We urge you to remove these limits and provide statewide access to doula services.

In conclusion, Ohio's future depends on the investments we make today to improve maternal and infant health. These programs provide proven solutions that can save lives, reduce health disparities, and support families across the state. March of Dimes thanks the committee for your attention to this public health crisis, and we stand ready to work with you to advance these critical investments and improve the health of Ohio's moms and babies.

Thank you.

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