

Columbus Office

Vern Riffe Center
77 S. High Street
12th Floor
Columbus, Ohio 43215-6111
(614) 644-5076
Rep55@ohiohouse.gov
www.ohiohouse.gov



Gayle L. Manning
State Representative

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Chair Merrin, Vice Chair Manning, Ranking Member Boyd, and members of the Ohio House Health Committee, thank you for the opportunity to provide sponsor testimony on House Bill 11, which works to reduce the rate of infant mortality in Ohio.

Governor DeWine has shown that mothers, children, and families are among his top priorities, and this legislation expands on that. Mothers receiving Medicaid funded services in Ohio consistently face lower health outcomes across the state due to lack of access to quality health care. HB 11 focuses on four components: tobacco cessation, oral healthcare, lead, and group prenatal care.

To start, HB 11 would require that Medicaid health plans cover all FDA approved tobacco cessation medications and therapies. As we know, smoking during pregnancy increases the risk of health problems for developing babies, including preterm birth rate and low birth weight. Coverage of tobacco cessation products is one way to reduce these problems, and it also will improve the health of the mother.

Secondly, the bill allows for pregnant women who are on Medicaid to receive two cleanings during the year in which they are pregnant. Right now, Medicaid only covers one cleaning annually for individuals 21 and over. Pregnancy causes hormonal changes that increases the risk of gum disease, which will affect the developing baby. Additionally, HB 11 allows for dental hygienists to provide oral education to pregnant mothers, both who are on Medicaid and those who are not, in a group prenatal setting. The group prenatal setting is beneficial for pregnant women to share their experiences and build a sense of community.

Thank you for the opportunity to testify. I will turn it over to Representative Howse to speak on the other components of this bill, lead and group prenatal health care. At the conclusion of her testimony, we will be happy to take any questions you may have.