Think Babies™ NC 2021-2025 Prenatal to Age 3 Policy Priorities for Infants, Toddlers, and their Families



Accept Resources to Expand Medicaid Expansion

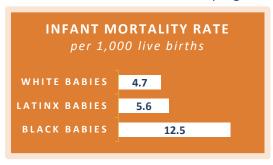
High-quality, affordable health care helps parents work and support their babies. Parents can't go to work and provide for their children when they are not healthy. Healthier adults have healthier babies and raise healthier children. Unfortunately, North Carolina is one of just 12 states that has not adopted Medicaid Expansion and continues to deny many of its citizens access to affordable health care, even in the face of the COVID-19 pandemic.¹ Research continues to show that expanding access to Medicaid has beneficial health effects in the short and long term.² The Think Babies™ NC Alliance endorses "closing the coverage gap" in NC in order to positively impact the health and economic well-being of babies and parents now and into the future.

Why Is This Important to Do Now?

Expanding Medicaid coverage leads to better health outcomes for babies.

Although Medicaid expansion is generally directed at providing coverage for low-income adults, it has also been shown to improve children's health. NC exceeds the national average of babies born with low birthweight. Of NC's approximately 361,000 babies, more than 33,000 were born at a low birth weight, putting them at risk of later developmental concerns.³ Expanded access to Medicaid can increase pregnant

women's participation in prenatal screenings and access to prenatal nutrition, leading to healthier births.⁴ An additional study shows that Medicaid expansion has beneficial trends towards decreasing infant mortality, particularly for Black babies,⁵ who suffer from an infant mortality rate more than double that of white babies in NC.⁶ Furthermore, parents who gain access to health care coverage are more likely to enroll their children in health insurance and take them to the doctor for regular check-ups and preventive care.⁷



Expanding Medicaid coverage improves families' abilities to provide for their children.

Healthy parents miss fewer workdays, leading to increased earnings and job retention. When parents' employment status is more stable, they are better positioned to provide financially secure environments for their infants and young children. Increasing the financial health of families by expanding health care coverage will help to decrease the level of poverty experienced by babies across the state. Early experiences of poverty and trauma can impact a child's brain development, often having an adverse impact on well-being later in life. The economic impacts of COVID-19 have exacerbated these adverse experiences, putting even more babies and young children at greater risk. Expanding parents' access to health insurance through Medicaid expansion can reduce children's exposure to the chronic stress and insecurity of poverty.⁸

In addition to increasing parents' ability to provide for their children through consistent employment, Medicaid expansion will help alleviate family stress due to costly medical bills, yet another problem further exposed through the COVID-19 public health challenge. Expansion of Medicaid has been shown

to lead to a 7.1% decrease in the inability to pay for medical bills. Families without access to health coverage are more likely to fall into debt and financial distress when unexpected health care issues arise. This financial stress on parents has adverse effects on their children as well.

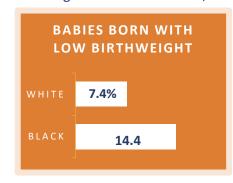
Expanding Medicaid coverage better positions North Carolina to respond to public health crises.

The ongoing COVID-19 pandemic has exposed weaknesses in our current model of employment-based health insurance coverage. The early days of the pandemic saw record numbers of families experience unemployment, and many lost their access to affordable health insurance, particularly in non-expansion states such as NC.¹⁰ Many of these families fell into the "coverage gap" and found themselves unexpectedly without medical coverage. While states that had already expanded Medicaid eligibility had some safety mechanism in place, NC is among the states that were unprepared to provide health care to a substantial number of families,¹¹ just when COVID-19 made the need for health care services even more critical. Accepting the federal funds to expand Medicaid coverage to economically vulnerable families and children will better prepare NC to respond to future public health challenges.

Expanding Medicaid reduces inequities for children of color.

Medicaid expansion addresses complex economic and health care issues that have a disproportionately negative effect on infants and families of color. Therefore, adopting a policy of expanding eligibility for Medicaid has immense potential to narrow disparities based on race and ethnicity. 1213 Overall, NC's 6.7% rate of mothers not receiving prenatal care exceeds that national average of 6.2%. However, the

discrepancy widens for Black and Hispanic mothers, to 9% and 8.7% respectively. ¹⁴ In NC 14.4% of Black infants are born with low birth weight compared to 9.2% overall. ¹⁵ Low-income Asian and Hispanic infants and toddlers in NC are uninsured at approximately double the rate of white and Black children in families with low income. ¹⁶ Across demographic groups, 3% more NC infants and toddlers are growing up in poor families than nationwide. ¹⁷ These numbers present NC with the opportunity to enact policies that bring greater equity across the population. Accepting the federal support to expand Medicaid eligibility will allow NC to offer



dependable and affordable health care coverage to a greater number of families and is a policy decision that can generate better health and financial outcomes for over 150,000 NC babies. 18



The Think Babies™ NC Alliance seeks to ensure that North Carolina's youngest children, prenatal to age 3, benefit from effective and equitable public policies, programs, and funding so that all children have what they need to thrive: healthy beginnings, supported families, and quality early care and learning experiences.

For more information:

Think Babies™ NC Alliance: Info@ThinkBabiesNC.org

¹ www.kff.org/medicaid/issue-brief/status-of-state-medicaid-expansion-decisions-interactive-map/ (Oct 8, 2021).

² Prenatal to Three. (2020). Clearinghouse Evidence.

³ Zero to Three. (2021). State of Babies, NC state data.

⁴ Adams, K., Dunlop, A., Strahan, A., Applegate, M., & Sierra, E. (2019). Pre-pregnancy Insurance and Timely Prenatal Care: Before and After the Affordable Care Act in Ohio. Journal of Women's Health.

⁵ Bhatt, C. & Beck-Sagué, C. (2018). Medicaid Expansion and Infant Mortality in the United State. American Journal of Public Health.

⁶ Zero to Three. (2021). State of Babies Yearbook, NC state data.

⁷ CCF. (2021).

⁸ Georgetown University Center for Children and Families (CCF). (2021). Children are Left Behind When States Fail to Expand Medicaid.

⁹ Prenatal to Three. (2020). State Policy Roadmap.

¹⁰ Williams, E., Rudowitz, R., Garfield, R., & Hinton, E. (2021). Medicaid and State Financing: Key Indicators to Watch through the Pandemic and Recovery. Kaiser Family Foundation.

¹¹ CFF. (2021).

¹² Guth, M. & Ammula, M. (2021). Building on the Evidence Base: Studies on the Effects of Medicaid Expansion, February 2020 to March 2021. Kaiser Family Foundation.

¹³ Prenatal to Three. (2020). State Policy Roadmap.

¹⁴ Zero to Three. (2021). State of Babies Yearbook, NC state data.

¹⁵ Ibid.

¹⁶ Number calculated from NC state data, State of Babies Yearbook. (2021). Zero to Three.

¹⁷ Ibid.

¹⁸ Ibid.