



Minnesota Coalition
FOR FAMILY HOME VISITING

March 28, 2023

Representative Tina Liebling
Chair, Health Finance & Policy Committee
Room 5, State Office Building
Saint Paul, MN 55155

Dear Chair Liebling and Members of the Committee:

Minnesota's Coalition for Family Home Visiting (MCFHV) writes in support of HF 2930 DE1 amendment, to fully fund the programs that support Minnesota's families. Thank you for prioritizing infants and young children in this bill, this legislature's historic investment will help all families have a strong start in life, regardless of income level. Please join us in supporting HF 238 DE1 to ensure more children have access to the early childhood care and learning programs they need to be successful in school and in life.

Please consider the following programs and provisions and support the HF 2930 DE1 amendment:

Home Visiting [145.87] Article 3. Sec. 121 & Line 211.7

Voluntary family home visiting services, whether short term, mid-term or long-term, have proven successful in stabilizing families and improving health outcomes for families and young children. Short term home visiting programs can reduce long-term health care costs and connect families to child care, early learning programs and other key community programs when needed. Using a two-generation approach, home visiting connects families to critical community resources and services that are culturally appropriate and responsive to the needs of all families in Minnesota.

Medicaid 12-month Eligibility Article 2. Sec 12 Subd. 7 & Line 67.27

Children represent the largest population on Medicaid. We believe providing 12-month eligibility through age six years of age and annually for children and youth under age 19 will help ensure children and their families will address health needs early. These changes will also help families plan for their health needs and avoid being dropped due to "funding cliffs", which keep families from accepting season bonus, small raises, and unnecessarily for administrative errors.

Community Solutions for Health Child Development Grant Program [145.9257] Article 3. Sec. 125 & Line 218.19

Strategies and programs to address perinatal health, child well-being and community connections among children and families are essential to positioning each family for stability and success. Funding these programs long-term will help Minnesota's state and community leaders work together to best meet the unique challenges that exist within communities of color and Indigenous communities.

Healthy Beginnings, Healthy Families [145.9571] Article 3. Sec. 191 & Line 273.1

Every family deserves a healthy start, regardless of their parent's involvement with the justice system. The benefits of keeping babies with their parents include improved parent-child attachment, reduced recidivism, re-entry support for parents returning to the community and increased family stability. Funding Healthy Beginning, Healthy Families Program will keep justice-involved parents involved in the growth and development of their young children.

Maternal and Child Health Equity

We are pleased to see support for elimination of the doula NPI number, which allows doulas to bill Medicaid directly. Doulas play a significant role in reducing health care costs and related to cesarean and preterm births. This change can increase access to doula care for Medicaid eligible families. We also believe the healthy development of babies program (HF 1059) and task force for SUD (HF 2099) work to reduce health inequities for birthing persons and children.

Lead Remediation in Schools & Child Care Settings [145.9272] Article 3. Sec. 126 & Line 221.25

Lead exposure in young children exponentially increases their odds of permanently impaired growth and development. The CDC has found that even low levels of lead in children may result in impaired growth, cognitive and learning disabilities, hearing problems, nerve damage, blood diseases, and other severe health outcomes. Lead remediation is necessary for all care and learning environments because no amount of lead is safe for babies and young children.

In addition, we'd like to highlight some key provisions we believe need to be included and/or funded this Legislative Session:

Children's Mental Health Supports

We support increased access to infant and early childhood services and consultation services. These programs and resources help families mitigate mental health challenges for our youngest children and provide those working with families and young children with the skills and tools to provide ongoing supports. Please consider adding policies changes that would allow for increased access in currently funded programs and consider funding to keep families intact.

Funding for Help Me Connect

Investing in the coordination between federal, state, and local health agencies will help parents and families navigate the early childhood health care system and connect with the programs and resources needed to address health disparities that disproportionately impact communities of color. Much work has been done over the past several years to educate families and providers about this important tool. Investing in this resource will help families across the state and we encourage the committee to add this to your final bill.

Thank you,

Laura LaCroix-Dalluhn,
Minnesota Coalition for Family Home Visiting
Coordinator

Cati Gómez,
Minnesota Coalition for Family Home Visiting
Policy Associate