March 20, 2023



Representative Tina Liebling Chair, Health Finance and Policy Committee 503 State Office Building Saint Paul, MN 55155

Dear Chair Liebling and Members of the Committee:

Minnesota's Prenatal to Three Coalition (PN-3) is pleased to support HF 2930 DE1. We appreciate your commitment to invest in Minnesota's children and families. Families are struggling to meet daily expenses and challenges, many of the investments in HF 2930 DE1 will help families with young children have a great start, regardless of race, zip code or income level. The PN-3 Coalition would like to highlight key provisions that are necessary to improve the health and wellbeing of young children, birthing people, and families.

A 3. Sec. 125 & Line 218.19 Community Solutions for Health Child Development Grant Program Allowing

communities of color and communities experiencing geographic inequities to identify their needs and challenges related to maternal and child health provides opportunities to develop locally driven solutions to help address maternal and child inequities. We are pleased to see this program continue to receive support.

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

A 3. Sec. 191 & Line 273.1 Healthy Beginnings, Healthy Families

Expanding the Healthy Start Act to county jails improves the health outcomes of justice involved families and helps stabilize and improves parent-child attachment.

A 3. Sec. 121 & Line 211.7 Home Visiting for Priority Populations

Expanding funding for family home visiting programs will help improve maternal and child outcomes, address the mental health needs of both parents and their children whilst providing housing, food, and employment support. We are particularly pleased to see funding will target priority populations that aren't currently served through family home visiting programs.

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.

A 3. Sec. 119 & Line 206.23 988 Suicide and Crisis Lifeline [145.561]

Expanding the capacity of Minnesota's crisis response is critical to meet the mental health needs of our communities and will increase factors that promote resilience by increasing access to immediate care and mental health support.

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 for your work to promote health and wellness for Minnesota's families. We are available to respond to any questions you might have related to our letter of support and requests for changes. Thank you,

Deb Fitzpatrick, Children's Defense Funds-MN, Co-Chair Nancy Jost, West Central Initiative, Co-Chair Laura LaCroix-Dalluhn, MN Prenatal to Three (PN-3) Coalition, Coalition Coordinator