

Testimony regarding The Proposed 2023 New York State Medicaid Waiver:

Children Not a Priority, Again!

The Children's Agenda

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May 3, 2022

I am Dr Jeff Kaczorowski, I'm a pediatrician and I work with The Children's Agenda in Rochester NY. I am also Professor and Vice Chair of Pediatrics at the University of Rochester Golisano Children's Hospital. And I am the volunteer Co-Chair of the NYDS First 1000 Days on Medicaid Initiative and Co-Chair of the Child Health Value Based Payment Clinical Advisory Group.

We are excited that this Medicaid Waiver focused on equity is an unprecedented opportunity to improve the health of many New Yorkers, in its immediate implementation over five years, but also into the future with structural change in Medicaid to improve health outcomes and cost-effectiveness.

Given that it is very disappointing and nearly unconscionable that the waiver does not explicitly focus on **children's health especially their mental health, and it does not focus on the tremendous disparities in maternal morbidity and mortality and early childhood health**. This is in spite of the fact that with this proposed waiver focused on equity, **children are the poorest and most diverse segment of our population and the largest proportion of New Yorkers to be covered by Medicaid**. New York State Medicaid and Child Health Plus provide coverage for 41% of the state's children 0-18 years old and for nearly 60% of children under three. In addition, 50% of pregnant women in NY are on Medicaid.

In the last significant Medicaid Waiver ending in 2020, children also were not a priority. Most Regional PPS had no focus at all on child health or maternal health. It is time to change that.

I want to focus my comments on 2 areas children and youth mental health, and maternal and early childhood health.

The mental health for children and youth in the US is a crisis, one that has been more revealed and exacerbated by the pandemic. Every major medical entity including the US Surgeon General, has stated that children's mental health is a crisis. The New York Times has featured weekly headlines regarding the "national emergency" in children's mental health, including this Sunday's April 24, 2022, front page headline "'It's Life or Death': US Teens Face a Mental Health Crisis". 50% of parents say their children's mental health is in crisis—more for children living in poverty and who are Black or brown. This is an equity and pandemic issue! We argue that this is the premier pandemic, equity issue. Yet the NYS proposed Medicaid Waiver does **not** address it with any planned implementation or investment.

There is much that can be done to address this issue including partnership with schools, CBOS and medical practices most importantly, and primary care and mental health care clinics should be expanded to schools. **We ask that the Medicaid Waiver explicitly and specifically indicate that children of all ages with mental health concerns are a priority population that must be addressed with this funding innovation, just as it has for the criminal justice involved and the homeless and long-term institutionalized populations in the current proposal.** Nearly 2 million children on Medicaid in NYS and half of them are experiencing significant mental health concerns. **It is time for the Medicaid to make a significant investment in children’s mental health through the 1115 Waiver. This investment should at a minimum equal the \$1.5 Billion designated to homeless and long-term institutionalized populations housing and services.**

For Maternal and Child Health: New York State Medicaid and Child Health Plus provide coverage for nearly 60% of children under three. In addition, over 50% of pregnant women in NY are on Medicaid. This makes Medicaid a critical and the primary vehicle for promoting healthy development and improving long-term health trajectories. New York State’s maternal mortality rate unfortunately is on par with the poor US overall rate—the worst in the developed world. Black women are 5 times more likely to die of pregnancy related causes than White women. And Black infants in NYS are more than twice as likely to die in the first year of life than White infants. When last measured in 2019, only 24% of children in NY received recommended developmental screening to identify and address early childhood problems. Developmental readiness for school is leads reading proficiency and graduation, so this is a key reason why 66% of NYS fourth graders are not proficient in reading.

There is much that can be done about these concerns. Our Finger Lakes/Rochester FLPPS region was one of the only regions we are aware of that invested significantly in maternal child health in the last Medicaid Waiver ending March 2020. We reduced teen pregnancy rates, improved maternal and infant morbidity, and expanded development screening and access to evaluation and treatment.

I would note that in **addition to long-term effects, some of these investments offer short-term cost savings through reduction in unintended pregnancies and reduced maternal and neonatal morbidity.**

While the recently passed NYS Budget for 2022-23 includes new funding to address maternal health it does not support the breadth and depth of needed population health approaches for women on Medicaid that are necessary and could be achieved by this Waiver.

Specific additional strategies for early childhood and maternal health include:

- **Continuous coverage on Medicaid for children and their mothers from birth to age 3.** Maternity postpartum coverage was just extended by NYS from 60 days to one year after birth. Washington State has just guaranteed continuous coverage for children on Medicaid from 0 to 6 years of age.

- **Support for parents of all newborns.** *Universal home visitation* by nurses to reduce infant mortality and morbidity and maternal mortality and morbidity for all new parents and their babies has been passed as legislation in both Oregon and New Jersey. NYS First 1000 days funding is supporting initial implementation of home visitation/telehealth visits focused on all newborns and parents. This pilot needs to be extended statewide.
- **There is significant and clear value in *two-generational/family-oriented approaches*,** to address parents' mental health concerns, social needs, and the development of children.
- **For *telehealth connections*, both providers and families need to have stable and universal access to the internet, necessary equipment, and training. This is a significant problem for families with young children, the poorest demographic in NYS.**

Thank you and there are resources to consult on this including:

The recommendations of NYS's [First 1,000 Days on Medicaid](#) and the NYS First 1000 Days [Preventive Pediatric Clinical Advisory Group report](#).