



## 2021 FEDERAL LEGISLATIVE AGENDA

### SUSTAINABILITY & GROWTH

#### MIECHV

The **Maternal, Infant and Early Childhood Home Visiting (MIECHV)** program provides funds for developing and implementing voluntary, evidence-based home visiting programs like Nurse-Family Partnership (NFP) and Child First. A meaningful increase to MIECHV could make a significant impact on the maternal mortality and morbidity crisis. The National Service Office (NSO) supports a five-year reauthorization completed by the end of 2022 that increases MIECHV funds \$200 million annually to add a total of \$1 billion, bringing the program to a total of \$1.4 billion by 2027.

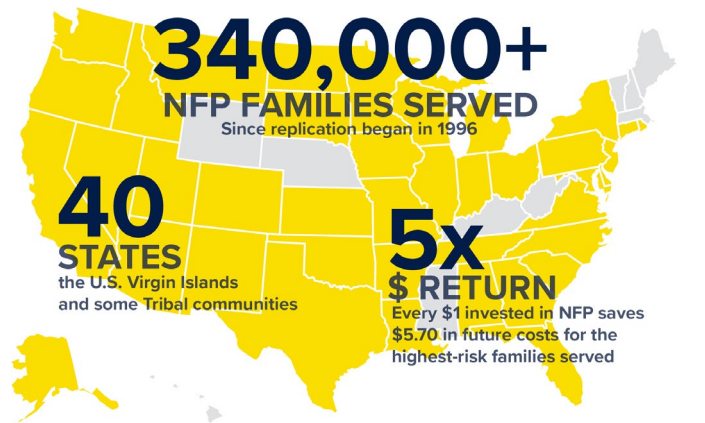
#### MEDICAID

NFP nurses provide preventive health care services to mothers and babies at a critical point in their lives and most of these families are eligible for Medicaid. We seek opportunities to improve and simplify Medicaid coverage and payment of NFP's nursing services, including opportunities to establish a mandatory Medicaid benefit that covers evidence-based home visiting during pregnancy and through at least the first year postpartum. The NSO supports legislation to **expand postpartum Medicaid coverage from**

**the current 60 days to 365 days postpartum** to help reduce maternal mortality and morbidity. We would like to see the introduction of legislation that allows licensed providers such as registered nurses to receive direct payment from Medicaid for providing evidence-based home visiting services to Medicaid beneficiaries.

#### NURSING WORKFORCE

NFP's workforce is comprised of dedicated registered nurses and other trusted community members who form a long-term relationship with their clients, becoming a constant, trusted presence in their lives. The NSO supports legislation that would establish loan forgiveness and repayment programs for medical and professional training held by health care workers that acknowledges the critical care that NFP nurses and health care workers provide to families nationwide.



## IMPACT

### MATERNAL HEALTH LEGISLATION

The NSO knows that healthy, strong mothers mean healthy, strong babies and children. Parents face a range of challenges, and the NSO supports a variety of efforts to help them and their children thrive. Black, Tribal, Indigenous and other women of color face persistent barriers during the prenatal and postpartum periods and experience significantly disparate rates of maternal mortality and severe morbidity. We are committed to addressing maternal and infant mortality rates in the U.S. The NSO supports legislation that addresses inequities in outcomes by investing in the **social determinants of health**, funds **implicit bias** training for health care professionals and provides supports for **rural maternal health care**.

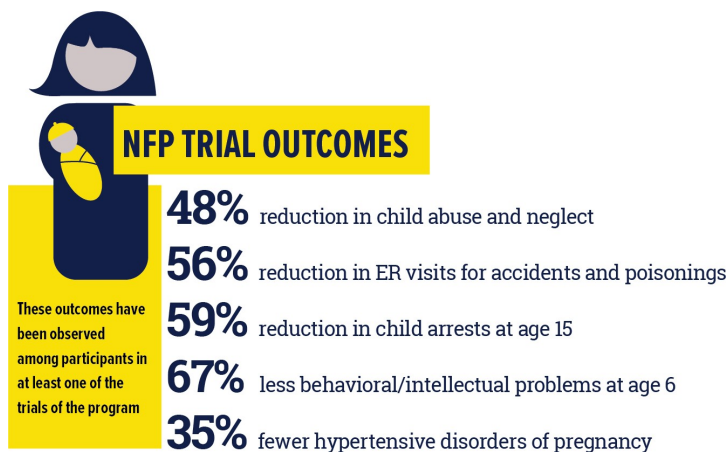
### FAMILY SUPPORTS & EQUITY

Economic and social conditions have a powerful impact on our health and wellness. Known as social determinants of health, a focus on these non-medical factors can improve health outcomes and wellbeing. Our mothers' ability to provide safe, stable homes and childcare for their children are important priorities for the NSO. We support legislation and funding that helps families meet their basic needs including **nutrition assistance** such as WIC and SNAP, safe and **affordable**

**housing, mental and behavioral health supports**, protections for women & children experiencing intimate partner violence and increased access to **telehealth** beyond the current public health emergency. The NSO is committed to improving and expanding support for home visiting services that meet the unique needs of Tribal Nations and indigenous people.

The NSO supports the **Family and Medical Insurance Leave (FAMILY) Act** which would provide workers up to 12 weeks of partial income when they take time for their own serious health conditions, including pregnancy and childbirth recovery and covers workers in all companies, no matter their size.

The NSO supports the highest funding levels for the Child Care and Development Block Grant. We also support the **Child Care for Working Families Act**. The bill ensures that no family under 150 percent of the state median income pays more than seven percent of their income on childcare. Families under 75 percent of the state median income will not have to pay anything at all. The bill would also support universal access to high-quality preschool programs for all 3- and 4-year-olds.



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