



**PUBLIC HEALTH INSTITUTE
OF WESTERN MASSACHUSETTS**
PARTNERS FOR HEALTH EQUITY

July 25, 2023

The Honorable John Lawn, Chair
Joint Committee on Health Care Financing
State House, 24 Beacon St., Room 236
Boston, MA 02133

The Honorable Cindy Friedman, Chair
Joint Committee on Health Care Financing
State House, 24 Beacon St., Room 313
Boston, MA 02133

Submitted via email

**Re: Testimony in SUPPORT of An Act to ensure equitable health coverage for children,
H.1237/S.740**

Dear Chair Lawn, Chair Friedman and Members of the Joint Committee on Health Care Financing,

We are grateful for this opportunity to provide testimony so we may express our strongest possible support for *An Act to ensure equitable health coverage for children* (H.1237/S.740), also known as the “Cover All Kids” bill. Enacting this legislation would expand MassHealth coverage to fully insure children and young adults whose only barrier to eligibility is their immigration status. Our Commonwealth has a goal to promote health equity and to move towards universal coverage for children, and this Cover All Kids bill is a key ingredient to achieving that goal.

I represent the Public Health Institute of Western Massachusetts (PHIWM), a Springfield-based non-profit organization that provides “backbone” support to partners in a variety of ways. We convene multi-sector partnerships; lead coalitions of community-based partners; design and implement health programs targeted for specific populations; conduct research, evaluations, and assessments; and advocate for policy and systems changes that build on community assets while simultaneously increasing community capacity. At the core of our work is our organizational commitment to help advance health equity and dismantle institutional racism. PHIWM is proud to have a history of creating successful campaigns and systems to improve health and well-being.

Massachusetts is a leader in access to health care for children, yet we are still leaving behind a growing number of immigrant families. Tens of thousands of children and young adults—including those with disabilities—cannot get the preventative services and health care they need simply due to their immigration status. While most of these young people have access to a complex patchwork of safety net programs, such as the Children’s Medical Security Plan, Health Safety Net, and/or MassHealth Limited, these programs are incredibly difficult to navigate. Also, they have strict limits on covered benefits, such as mental health services, prescription drugs, and dental care. These programs do not provide any coverage at all for important services that children with disabilities need, such as home-based care, rehabilitation services, applied behavioral analysis (ABA) therapy, or durable medical equipment which includes things like wheelchairs and hearing aids.

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In 2016, 2019, and 2022, PHIWM conducted [Community Health Needs Assessments](#) for the hospitals and health insurer in Western Massachusetts. From this work, we know that **insurance and health care related challenges are a *priority need* in the region, with mental health, infant health, and chronic health conditions—especially asthma—being top concerns.** We also know that the COVID-19 pandemic disproportionately impacted existing inequities for health care for immigrants, especially those who are undocumented.¹ Inadequate coverage results in increased health system costs through emergency room visits, longer inpatient hospital stays, or more acute, intensive interventions, which in many instances, **could be avoided with more inclusive coverage.**

With reports of **youth mental health problems on the rise, comprehensive health insurance for all kids is essential.** As part of the community health needs assessments we conducted, focus group participants and key informant interviewees **overwhelmingly reported a need for neuropsychology and other specialists for children with disabilities.** Also, providers spoke of health education needs, including increasing parents' knowledge of typical developmental milestones so they can identify if their child is delayed, and increasing knowledge of resources available to children with disabilities. Inadequate health coverage puts additional stress on families who already experience barriers to linguistically and culturally appropriate care, and may face discrimination, trauma, and socioeconomic hardship.

An Act to ensure equitable health coverage for children (H.1237/S.740) would help address many of these issues by removing immigration status as a barrier to MassHealth coverage for children and young adults in the Commonwealth. **Twelve other states have already passed similar policies.** Massachusetts and New Hampshire are the only remaining New England states that restrict Medicaid eligibility based on immigration status for children of all ages. **It is time for Massachusetts to cover all kids.**

We respectfully ask you to support and favorably report *An Act to ensure equitable access to health coverage for children (H.1237/S.740)* from this Committee.

Please do not hesitate to contact me (jcollins@publichealthwm.org, 413-794-7739 or Suzanne Curry with Health Care For All (scurry@hcfama.org) with any questions or to discuss this issue further. Thank you for your consideration.

Sincerely,



Jessica Collins
Executive Director

CC:
Members, Joint Committee on Health Care Financing
Western MA Delegation

¹[2022 Community Health Needs Assessment for Health New England](#)