



March 21, 2013

Senator Kathy Campbell, Chair

Health and Human Services Committee
Room 1402, State Capitol
Lincoln, NE 68509

RE: Opposition to LB 518

Chairwoman Campbell and members of the Health and Human Services Committee,

My name is James Goddard and I am the Director of the Economic Justice and Health Care Access Programs at Nebraska Appleseed. Nebraska Appleseed is a nonprofit organization that fights for justice and opportunity for all Nebraskans. I am here today to testify in opposition to LB 518.

For decades Nebraska had the common sense, compassionate, and fiscally responsible policy of ensuring that all low-income women, regardless of immigration status, had access to prenatal care. In 2010, the Department of Health and Human Services chose to discontinue this coverage. In 2012, the full Nebraska Legislature had a thoughtful and reasoned debate regarding the merits of providing this care to unborn children, and subsequently passed LB 599.

Passing LB 599 to reinstate prenatal care was the right thing to do nine months ago, and it remains the right thing today.

The arguments in favor of prenatal care have not changed. Prenatal care is a quintessential example of the benefits of preventative care, which leads to better health outcomes and cost savings.ⁱ Indeed, there are immediate cost benefits. Prenatal care helps to avoid serious and expensive costs to the state by avoiding birth complications, which can lead to significant costs when a child is born.ⁱⁱ To be sure, the fiscal note reminds us that every dollar spent on prenatal care can save from \$1.70 to \$3.80 by reducing neonatal complications. That return on the investment has not changed in the last nine months. Similarly, prenatal care also has long-term benefits by avoiding preventable complications that can damage a child for life and result in life-long costs to the state.

It is noteworthy that the Department of Health and Human Services only estimates a savings equal to the appropriation given to this program last year, rather than offer any

analysis on what they have actually spent on the program. This approach also does not account for the future savings the state would forgo with the repeal of this policy.

Finally, providing prenatal care to all low-income women in Nebraska remains the right thing to do. Our current policy ensures that the most vulnerable among us, unborn children, will have the best start in life and best chance to grow up healthy.

For these reasons, we respectfully urge this Committee to indefinitely postpone LB 518.

Sincerely,
NEBRASKA APPLESEED

James Goddard, J.D.
Director
Economic Justice & Health Care Access

ⁱ Although studies vary, there is wide agreement prenatal care saves medical care costs. See National Conference of State Legislatures, Funding Prenatal Care for Unauthorized Immigrants: Challenges Lie Ahead for States, (“Studies estimate that every dollar spent on prenatal care yields between \$1.70 and \$3.38 in savings by reducing neonatal complications) *available at* <http://www.ncsl.org/issues-research/immig/funding-prenatal-care-for-unauthorized-immigrants.aspx>; Health Services Research, The cost effectiveness of prenatal care in reducing low birth weight in New Hampshire (“For each additional \$1 spent on prenatal care, \$2.57 in medical care costs would be saved.”), *available at* <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1065587/pdf/hsresearch00087-0008.pdf>

ⁱⁱ A child eligible for prenatal care will be income eligible for medical assistance and thus the state will bear the cost for treating any birth complications.