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Minnesota Association of

COMMUNITY HEALTH CENTERS

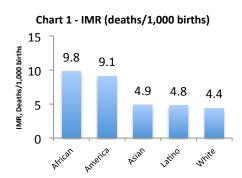
Representative Matt Dean, Chair MN House Health & Human Services Finance Committee 100 Rev. Dr. Martin Luther King Jr. Blvd. Saint Paul, Minnesota 55155

Chair Dean and Members of the House HHS Finance Committee:

The purpose of this letter to express our support of HF3236. The Minnesota Association of Community Health Centers (MNACHC) represents the interests the state's Federally Qualified Health Centers (FQHCs). These 17 organizations – also known Community Health Centers (CHCs) - provide primary medical, dental and mental health services to 175,000 low-income Minnesotans. In addition, nearly 70% of CHC patients are from Minnesota's communities of color.

In 2014, Minnesota's CHCs served 3,100 children under one year of age and provided prenatal care services to nearly 3,200 low-income women in Minnesota. Consequently, CHCs have a keen interest in the provisions of HF3236. The proposal builds upon the infrastructure of the state's CHC in order to promote health equity.

HF3236 would target the distribution of "baby **boxes**" to a population that unfortunately experiences high infant mortality rates. Minnesota's infant mortality rate (IMR) is lower than the US average - 4.9 deaths per 1,000 births in Minnesota versus 6.0 deaths per 1,000 births in the US. Unfortunately, the infant mortality rate in Minnesota's African American and American Indian populations are nearly twice the **statewide rate** -- 9.8/1,000 deaths and 9.1/1,000 births respectively. (Advancing Health Equity in MN, MDH,



2014.) Given our patient population, CHCs would serve as a strategic to address this disparity.

In addition, HF3236 proposes to study and make recommendations related to the provision of prenatal care to women of color in Minnesota. In 2014, 87% of the 3,200 prenatal care visits were provided to women of color. CHCs are proud to report that nearly 80% of these women received care in the first trimester – only 3% points below the statewide average (2014 MN County Health Tables, MDH). Nonetheless, we are certainly willing to continue to explore strategies to increase the number of women access prenatal care during the first trimester.

Again, MNACHC strongly supports this legislation. Please contact me with any questions that you may have at jonathan.watson@mnachc.org. Thank you for considering this request.

Respectfully,

Jonathan Watson

Associate Director | Director of Public Policy

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