



**Black  
Women's  
Health  
Imperative**



NATIONAL LATINA INSTITUTE FOR REPRODUCTIVE HEALTH



**NATIONAL  
WOMEN'S  
HEALTH  
NETWORK**



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## **Mother's Day: Honoring Mom and Medicaid**

### ***Health Policy Groups Warn that Cuts To Medicaid Hurt Women***

Washington, DC – President Woodrow Wilson, in 1914, made Mother's Day—the second Sunday in May—an official national holiday. Wilson stated in his proclamation that the holiday was a way to publicly express “our love and reverence for the mothers of our country.” Nearly a century after Wilson's proclamation, the mothers of our country are at risk of losing Medicaid coverage under proposals in Congress to drastically cut Medicaid funding. The proposed changes, which include converting Medicaid to a block grant and global federal spending caps, would force states to reduce the costs of Medicaid through cuts to eligibility and services.

The Asian & Pacific Islander American Health Forum (APIAHF), Black Women's Health Imperative, Community Health Councils, National Health Law Program (NHeLP), National Latina Institute for Reproductive Health, National Partnership for Women & Families, National Women's Health Network, and Raising Women's Voices for the Health Care We Need have joined together to ask when we remember mom this weekend that we also consider the devastating effect of the proposed cuts to Medicaid, which currently provides coverage to nearly 60 million individuals, including many of the mothers of our country.

“From family planning to prenatal and maternity care, from breast and cervical cancer screenings to long-term care in the community or in nursing facilities, the preventive and primary services that women across the lifespan get through the Medicaid program are crucial for keeping us healthy,” commented Cynthia Pearson,

executive director, National Women's Health Network and co-founder of Raising Women's Voices for the Health Care We Need. "In tough economic times, like we've been facing over the last few years, Medicaid is a lifeline for tens of thousands of women, children and families who would lose all access to health care without it."

Emily Spitzer, executive director of the National Health Law Program asserted, "Medicaid is essential to the health status of women living in rural or remote areas, who would otherwise be uninsured. More low-income women live in rural or remote areas of the U.S. than in urban areas. Rural women are also less likely to be able to obtain preventive health screenings, such as Pap smears and mammograms than their urban counterparts since they cannot afford private health insurance or do not have access to employer-based health insurance. Women living in rural or remote areas are also less likely to have access to prenatal care services, which can result in higher rates of pre-term delivery, complications during delivery, and infant mortality."

"Community health centers and Latinas rely heavily on Medicaid. Compared to the U.S. population, health center patients, many of whom are Latinas, are nearly six times as likely to be poor, two-and-a half times as likely to be uninsured, and nearly three times as likely to be enrolled in Medicaid," said Silvia Henriquez, executive director for the National Latina Institute for Reproductive Health. "In 2009, more than 36% of community health center patients were Latinos, and an additional 865,000 patients were migrant and seasonal farm workers. Additionally, the unique model of community health centers allows Latinas, who experience the highest health risk and the most serious illness of burden, to overcome significant economical, cultural, and linguistic barriers"

"Changes to Medicaid's structure—including funding caps and block granting—will only increase racial, ethnic, gender, and rural health disparities and leave millions of hard-working Americans without reliable access to health care and in poorer health," stated Kathy Lim Ko, APIAHF president and CEO. "Medicaid provides stable health care coverage and services for low-income and vulnerable individuals and families, including more than one in ten Asian Americans and one in seven Native Hawaiians and Pacific Islanders."

Eleanor Hinton Hoytt, president and CEO of the Black Women's Health Imperative noted, "Medicaid is an important source of health care for millions of Black women and converting it to a block grant or imposing a spending cap on it will be disastrous for Black women and families. Medicaid provides a wide range of preventative, primary and long-term health services that are frequently out of reach to Black women who are uninsured or unable to afford medical costs. Women who do not have proper health care experience poorer health outcomes, unnecessary deaths and higher medical expenses."

"Women and girls make up the majority of enrollees in Medicaid, which provides critical coverage for women and children who would otherwise be uninsured," remarked Debra L. Ness, president of the National Partnership for Women & Families. "The program also is a lifeline for the most vulnerable women, particularly older women who have extensive health needs but lack the social supports and resources that might allow them to live independently at home."

"California provides Medicaid coverage to 7.2 million low-income women, children, and the disabled. Medicaid is a vital lifeline to health care services for women. Just over 90% of all single-parent households with Medi-Cal coverage are headed by women. For these women and mothers, Medicaid provides the opportunity to both pay the rent and still obtain needed medical care for themselves and their children," said Lark Galloway-Gilliam, executive director of Community Health Councils. "California's budget crisis has already caused the state to cut its healthcare system. Any additional loss would result in further reductions in eligibility, benefits, and participation by health care providers and send millions deeper into poverty."

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