

## Medicaid benefits for pregnant immigrants surpass costs, says research

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Providing Medicaid to pregnant undocumented immigrants more than makes up for the initial costs, according to University of Michigan research.

Providing public health insurance coverage to undocumented immigrant



women during pregnancy leads to better health care access, improved infant outcomes at birth, and downstream gains in education and economic well-being for those children later in life—all while recouping the initial investments of providing Medicaid coverage, the study shows.

The study examined changes in birth-related health measures before and after California expanded Medicaid coverage to undocumented women in 1988. The findings indicate that investing <u>public resources</u> to ensure pregnant undocumented immigrants receive adequate prenatal and delivery care has lifelong payoffs for the next generation of Americans—the citizen children born to those mothers.

"One out of every 13 births in the United States are to an undocumented immigrant. But in most states, pregnant undocumented immigrants remain excluded from Medicaid coverage for routine pregnancy care," said study co-author Sarah Miller, associate professor of business economics and <u>public policy</u> at U-M's Ross School of Business.

"Our study shows that increasing their access to health coverage during pregnancy benefits not only the mothers, but also their infants over the long run."

The U-M-led study matched birth certificate data to later-life surveys tracking developmental outcomes and program participation for children born in California over a decade. This allowed Miller and colleagues to compare changes over time in health and public program involvement for California citizen children born to undocumented vs. U.S.-born mothers.

The researchers found that after Medicaid income eligibility was expanded to include undocumented immigrant mothers in 1988, babies born to non-U.S. citizen mothers experienced notable improvements in health at birth.



For example, the study documents decreased rates of infants born smaller than usual for the gestational age—an indication of restricted growth in utero. The citizen children born after the expansion also exhibit higher <u>educational attainment</u> and lower participation in public assistance programs as young adults.

"Once you account for the longer-term <u>economic benefits</u> experienced by babies born healthier as a result of (Medicaid) serving their immigrant mothers, our calculations indicate the government fully recovers the upfront costs over time," Miller said.

The researchers conclude that while cultural barriers like limited English skills or unfamiliarity navigating <u>health systems</u> may pose enrollment obstacles, extending pregnancy-related Medicaid access to undocumented immigrant mothers confers real health advantages for their babies.

They recommend that policymakers weigh those tangible lifelong gains for U.S. citizen children against any fiscal or ideological concerns around expanding public services for undocumented immigrant residents.

Currently, 22 states and Washington, D.C., offer some type of prenatal coverage for pregnant undocumented immigrant women, leaving most uncovered in most of the country, including states such as Florida and Georgia, which have large <u>immigrant</u> populations.

There are ongoing debates around legal immigration and eligibility for taxpayer-funded programs in this country, but policymakers remain divided.

"Our findings demonstrate that expansions of public prenatal coverage generate both short- and long-term benefits that should be accounted for



by policymakers engaged in these debates," Miller said.

Co-authors include Laura Wherry of New York University and Gloria Aldana of the U.S. Census Bureau.

**More information:** Sarah Miller et al, Covering Undocumented Immigrants: The Effects of a Large-Scale Prenatal Care Intervention, (2022). DOI: 10.3386/w30299

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