



**TESTIMONY OF  
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CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
HUMAN SERVICES COMMITTEE  
Tuesday, February 21, 2023**

**HB 6587, An Act Concerning Medicaid Coverage For Diapers**

Good afternoon. My name is Megan Smith, and I am Senior Director, Community Health Transformation at the Connecticut Hospital Association. I am here to testify in support of **HB 6587, An Act Concerning Medicaid Coverage For Diapers**.

Connecticut hospitals continue to meet the challenges posed by the COVID-19 pandemic and are now facing new challenges of treating sicker patients than they saw before the pandemic, with a dedicated but smaller workforce who are exemplary but exhausted. They are also experiencing significant financial hardships brought on by record inflation. Through it all, hospitals have been steadfast, providing high-quality care for everyone who walks through their doors, regardless of ability to pay.

Diapers are a material basic need, like food and shelter, and are essential to health and the economic success of families. “Diaper need” is defined as the “difference between the numbers of diapers infants and young children require to stay clean and comfortable less the amount of diapers a family can afford without cutting back on other basic essentials.” The percentage of families nationally reporting diaper need has been consistently estimated to hover around 30%. Diapers are not a covered product under benefit programs like Women Infants and Children (WIC) and the Supplemental Nutrition Assistance Program (SNAP), yet they are a basic material need necessary for infant, child, and maternal health and an important structural factor related to a family’s ability to participate in the workforce.

Specific to health, diaper need is related to several maternal and child health conditions, including maternal depression, poor infant sleep, infant and child urinary tract infections, and diaper dermatitis (known as “diaper rash”). Not surprisingly, children without enough clean, dry diapers suffer a higher incidence of urinary tract infections, diaper dermatitis, and more days with diaper rash. The coverage of diapers under Medicaid is a potentially powerful structural intervention to address maternal and infant health, an assertion supported by a 2018 economic modeling study of diaper provision by the Diaper Bank of Connecticut and the

University of Connecticut. This study found that the incidence of diaper rash declined by 33% when families received supplies of clean diapers, and babies experienced 77% fewer days of diaper rash. This study also predicted that every dollar spent relieving diaper need produced an 11-fold increase in personal income for families struggling to afford diapers. Extensive research demonstrates the value of increasing family income as a specific pathway to reducing racial and ethnic health disparities.

In addition to the impacts of diaper need on infant and child health, the psychological weight of diaper need on caregivers — with such a profound impact on the flow of daily life — is a common cause of maternal depression and stress. Children whose parents are stressed or depressed are at greater risk for social, emotional, and behavioral problems. In one study conducted by Yale University investigators, diaper need was found to be a larger predictor of postpartum depressive symptoms than food insecurity and housing instability. In 2022, the Centers for Disease Control and Prevention (CDC) named maternal mental health as the number one contributor to preventable maternal deaths in the U.S. The mounting maternal mortality crisis necessitates a focus on health-related social needs like diapers that disproportionately impact mothers on Medicaid.

Diaper need is also an important structural issue impacting a family's income and the amount of money available to pay for other necessities such as the rent or mortgage or utility bill. Most child care centers and family child care providers require at least seven days' supply of diapers to leave a child at a child care center so that the caregiver can attend work or school. A seven day supply of diapers is an expense that many low-income families cannot afford. In addition, parents who have a job, may not have the financial means to pay for diapers in advance and may often miss work or school and in many cases, lose wages due to work absenteeism. In fact, emerging data from the National Diaper Bank Network find that on average families are missing 5 days a month of work due to diaper need. For a family of four living at the federal poverty line in 2023, missing five days of work a month for a year, equates to over \$6,000 dollars of lost income.

As a direct result of the research linking diaper need to adverse maternal and child health conditions and family economic success, CHA, the Diaper Bank of Connecticut, and the Connecticut Department of Housing launched a first-of-its-kind, hospital-based statewide diaper distribution network called Diaper Connections. Established in November 2022, Diaper Connections offers diaper distribution through Connecticut's acute care hospitals and partnerships between hospitals and community-based organizations, to ensure supplies of diapers are available each month to families who need them. The Diaper Connections program aims to improve the health of families by preventing problems associated with diaper need.

Joining efforts, Connecticut's hospitals and the Diaper Bank of Connecticut have developed an infrastructure through hospital collaborations with community partners and across hospital departments, to address the very significant problem of diaper need. In addition, the program has the potential to increase parents' ability to gain education or start or advance their career, thus increasing the potential for economic success for families. CHA is proud to partner with

the Diaper Bank of Connecticut on this initiative to systematically address diaper need through Connecticut's hospitals.

The Centers for Medicare and Medicaid Services (CMS) uses the term "health related social needs" (HRSN) to define adverse social conditions that contribute to poor health. These needs – including food insecurity, housing instability, unemployment, and/or lack of reliable transportation – can drive health disparities and inequities. Diaper insecurity is a health-related social need that substantially impacts maternal and child health and can be addressed through Medicaid coverage for diapers.

In conclusion, we strongly support this forward-looking proposal to address diaper insecurity through Medicaid coverage for diapers thereby advancing maternal and child health across the state.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.