

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1609 Pregnancy Support Services

SPONSOR(S): Stevenson

TIED BILLS: **IDEN./SIM. BILLS:** SB 1442

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Healthcare Regulation Subcommittee	16 Y, 0 N	Osborne	McElroy
2) Health Care Appropriations Subcommittee			
3) Health & Human Services Committee			

SUMMARY ANALYSIS

Social determinants of health are the external factors of a person's life that impact their health. These are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Housing is an important social determinant of health.

The US is in the midst of a housing affordability crisis. Income growth has not kept up with rising housing costs, and the overall housing market has not responded adequately to the need for affordable housing. The national crisis is being acutely felt in Florida, with low-income renters being especially vulnerable to the rising cost of housing.

In 2022, there were 224,611 recorded births in Florida. Healthy pregnancies and childbirth are foundational to healthy families and communities. Nonetheless, pregnancy remains an essential but often dangerous experience with the potential for many avoidable complications. Maternal and infant health outcomes are an important marker of the overall health of a society. Florida's expecting mothers are not exempt from the state's affordable housing crisis. While the long-term effects of housing instability are detrimental to all who experience it, the impact on pregnant women is especially acute. Homelessness during pregnancy poses significant health risks for mothers and infants.

HB 1609 creates the Florida State Maternity Housing Grant Program within the Department of Health (DOH). The bill states the intent of the Legislature to provide housing resources to resident women and families during the prenatal period, regardless of age or marital status, whose financial resources have been determined inadequate to meet residential costs.

The bill outlines expenses which grant funds may be allocated toward, and directs DOH to make rules for the implementation of the grant. The bill specifies that the total amount of grants awarded by DOH may not exceed the funding appropriated for the grant program.

The bill grants DOH rulemaking authority to adopt rules necessary for the administration of the program.

The provisions of the bill are subject to appropriation; the bill has an indeterminant, negative fiscal impact on DOH. The bill has no fiscal impact on local governments.

The bill provides an effective date of July 1, 2024.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Social Determinants of Health

Social determinants of health (SDOH) are the external factors of a person's life that impact their health. These are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

There are five main categories of SDOH:¹

- Economic stability;
- Education access and quality;
- Health care access and quality;
- Neighborhood and built environment; and
- Social and community context.

SDOH influence a persons' health in several ways. Some SDOH have causal relationships that are clear and relatively direct; for example, the presence of mold, or poor air and water quality, are part of the built environment that a person lives in and while consequences may be delayed, the causal relationship is easily established.² Living in such environmental conditions are often influenced by other SDOH, such as economic stability and community context where the connections to health outcomes are evident, but less easily conceptualized.³

Some aspects of health are especially sensitive to the environments that a person find themselves in.

Housing Insecurity

Housing is an important social determinant of health. The lack of housing, or poor-quality housing, negatively affects a person's health and well-being. Tangible housing defects resulting from damp and mold, unregulated indoor temperatures, overcrowding, and safety factors have a clear impact on physical and mental health. There are also pronounced psychosocial benefits to the concept of "home," which are tied to the social values of housing as reflecting stability, control, autonomy, status, and empowerment. Such qualities have a significant impact on a person's mental health and long-term stability.⁴

The US is in the midst of a housing affordability crisis.⁵ Income growth has not kept up with rising housing costs, and the overall housing market has not responded adequately to the need for affordable housing. The national crisis is being acutely felt in Florida, with one survey showing that 25 percent of Floridians identifying "housing costs," as the most important problem facing Florida today.⁶

¹ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion, *Social Determinants of Health*. Available at <https://health.gov/healthypeople/priority-areas/social-determinants-health> (last visited January 21, 2024).

² Braubach, M., Jacobs, D.E., & Ormandy, D. *Environmental burden of disease associated with inadequate housing: a method guide to the quantification of health effects of selected housing risks in the WHO European Region*. (2011). World Health Organization. Regional Office for Europe. <https://iris.who.int/handle/10665/108587>

³ Braveman, P., & Gottlieb, L. *The social determinants of health: it's time to consider the causes of the causes*. (2014) Public health reports, 129:2, 19–31. <https://doi.org/10.1177/00333549141291S206>

⁴ Rolfe, S., Garnham, L., Godwin, J. et al. *Housing as a social determinant of health and wellbeing: developing an empirically-informed realist theoretical framework* (2020). BMC Public Health 20, 1138. <https://doi.org/10.1186/s12889-020-09224-0>

⁵ Desmond, M. *Unaffordable America: Poverty, Housing, and Eviction* (2022). American Journal of Sociology. In The Affordable Housing Reader (pp. 389-395). <https://doi.org/10.4324/9780429299377-34>

⁶ University of North Florida, Public Opinion Research Lab, *Florida Republican Presidential Primary Polling* (2023). Available at https://www.unfporl.org/uploads/1/4/4/5/144559024/unf_mar_statewide_2023_ada.pdf (last visited January 21, 2024).

The precise cause of the shortage of affordable housing is complex and multi-faceted, but it is an issue felt by would-be homebuyers and renters alike. In Florida, the median single-family home prices are approaching the boom-era costs of the mid-2000s; between 2011 and 2022, the median home price has risen 91 percent. Meanwhile, the situation in the rental market is dire for low-income renters. The state has added hundreds of thousands of rental units in the last decade, but simultaneously lost “affordable”⁷ rental units.⁸ Many low-income renters pay more than 40 percent of their income for housing, and there are only 26 affordable and available rental units for every 100 households with an extremely low income.⁹

As a result, more families and individuals are finding themselves in precarious housing situations.¹⁰ Nationally, 5.52 million renter households reported being behind on their rent payment, with 1.87 million fearing imminent eviction in August 2023.¹¹

While the majority of people experiencing homelessness are men, women and families constitute the fastest-growing segment of the homeless population.¹² Black and Hispanic women, particularly single mothers with children, are at the highest risk for housing insecurity. Women experiencing housing insecurity report barriers to health care generally, and as such tend to lack access to adequate contraceptive methods.¹³

Pregnancy Outcomes

In 2022, there were 224,611 recorded births in Florida.¹⁴ Healthy pregnancies and childbirth are foundational to healthy families and communities. Nonetheless, pregnancy remains an essential but often dangerous experience with the potential for many avoidable complications.¹⁵ Maternal and infant health outcomes are an important marker of the overall health of a society.

Maternal Health Outcomes

Maternal mortality refers to deaths occurring during pregnancy or within 42 days of the end of pregnancy, regardless of the duration of the pregnancy, from any cause related to or aggravated by the pregnancy, but not from accidental or incidental causes.¹⁶ In 2021, more than 1,200 women died of maternal causes in the United States compared with 861 in 2020 and 754 in 2019.¹⁷ The national maternal mortality rate for 2021 was 32.9 deaths per 100,000 live births.¹⁸ Racial and ethnic gaps exist between non-Hispanic black, non-Hispanic white, and Hispanic women. The maternal mortality rate of these groups is 69.9, 26.6, and 28.0 deaths per 100,000 live births, respectively.¹⁹

⁷ “Affordable” rental units mean those renting for \$1,000 or less per month.

⁸ University of Florida, Shimberg Center for Housing Studies. *Florida Affordable Housing Trends* (2022). Available at http://www.shimberg.ufl.edu/publications/FL_presentation_121422.pdf (last visited January 22, 2024).

⁹ *Id.*

¹⁰ Greene, S., Richardson, T., Bryon, J., & Cho, R. *Rise in homelessness averted amidst worsening housing needs in 2021. What does this tell us about how to end homelessness in the U.S.?* (2023). HUD User. Available at <https://www.huduser.gov/portal/pdredge/pdr-edge-frm-asst-sec-082223.html> (last visited January 22, 2024).

¹¹ *Id.*

¹² Welch-Lazoritz, M.L., Whitbeck, L.B., & Armenta, B.E. *Characteristics of mothers caring for children during episodes of homelessness*. (2015). *Community Ment Health J.* 51(8):913-920. doi: 10.1007/s10597-014-9794-8

¹³ Kozlowski, Z., Sanders, J.N., Panushka, K., Myers, K., Millar, M.M., & Gawron, L.M. “It’s a Vicious Cycle”: A Mixed Methods Study of the Role of Family Planning in Housing Insecurity for Women (2022). *Journal of Health Care for the Poor and Underserved* 33(1), 104-119. <https://doi.org/10.1353/hpu.2022.0009>

¹⁴ FL Health Charts, *Birth Counts Query System*. Available at https://www.flhealthcharts.gov/FLQUERY_New/Birth/Count (last visited January 9, 2024).

¹⁵ Hernandez, L., Thompson, A., & Burch, D. *Florida’s Pregnancy-Associated Mortality Review 2015 Update* (2017). Florida Department of Health. Available at <http://www.floridahealth.gov/statistics-and-data/PAMR/pamr-2015-update.pdf> (last visited January 22, 2024).

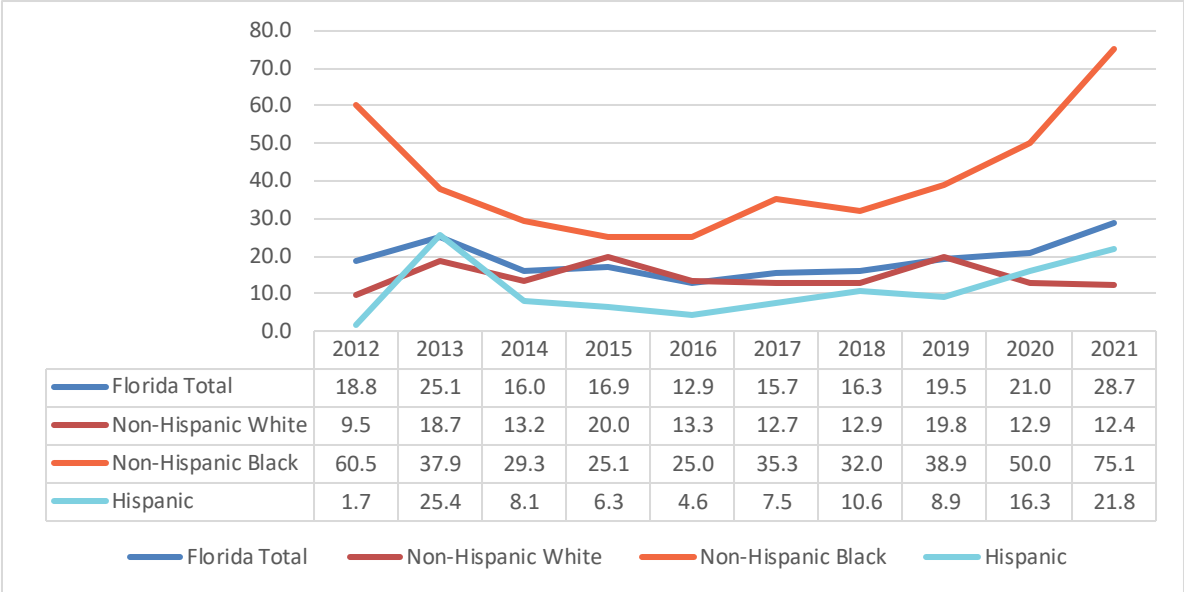
¹⁶ U.S. Dep’t of Health and Human Services, *The Surgeon General’s Call to Action to Improve Maternal Health* (2020). Available at <https://www.hhs.gov/sites/default/files/call-to-action-maternal-health.pdf> (last visited December 5, 2023).

¹⁷ Donna L. Hoyert, Ph.D., Division of Vital Statistics, National Center for Health Statistics, *Maternal Mortality Rates in the United States, 2021*, (March 2023). Available at <https://www.cdc.gov/nchs/data/hestat/maternal-mortality2021/maternal-mortality-rates-2021.pdf> <https://www.cdc.gov/reproductivehealth/maternal-mortality/index.html> (last visited January 8, 2024).

¹⁸ *Id.*

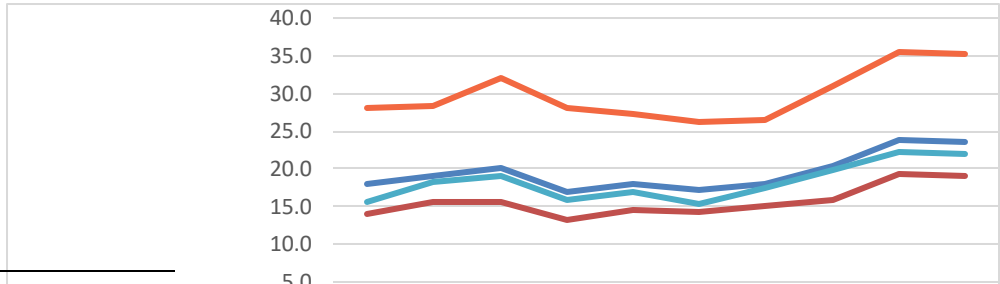
¹⁹ *Id.*

Although Florida’s maternal mortality rate is lower than the national rate, it has been increasing in recent years. As of 2021, the maternal mortality rate in Florida is 28.7 deaths per 100,000 live births, an increase from a low of 12.9 deaths per 100,000 live births in 2016.²⁰ Similar to the national trend, racial and ethnic disparities exist in the maternal mortality rates in Florida as evidenced in the following chart:



For every maternal death, 100 women suffer a severe obstetric morbidity, a life-threatening diagnosis, or undergo a lifesaving procedure during their delivery hospitalization.²¹ Severe maternal morbidity (SMM) includes unexpected outcomes of labor and delivery that result in significant short- or long-term consequences to a woman’s health. SMM has been steadily increasing in recent years.²² The consequences of the increasing SMM prevalence, in addition to the health effects for the woman, are wide-ranging and include increased medical costs and longer hospitalization stays.²³

From 2013 to 2022, there were 51,454 cases of SMM among delivery hospitalization in Florida.²⁴ Similar to maternal mortality rates, rates of SMM are higher in racial and ethnic minority women.²⁵ The following figure shows the trend over time for SMM rates in Florida per 1,000 delivery hospitalizations:²⁶



²⁰ Presentation by Kenneth Schepke, M.D., F.A.E.M.S., Deputy Sec’y for Health, DOH, before the Senate Committee on Health Policy (Nov. 14, 2023), available at https://www.flsenate.gov/Committees/Show/HP/MeetingPacket/5979/10504_MeetingPacket_5979_4.pdf (last visited January 8, 2024).

²¹ Elizabeth A. Howell, MD, MPP, *Reducing Disparities in Severe Maternal Morbidity and Mortality* (2018), CLINICAL OBSTETRICS AND GYNECOLOGY, 61(2). Available at https://journals.lww.com/clinicalobgyn/abstract/2018/06000/reducing_disparities_in_severe_maternal_morbidity.22.aspx (last visited January 8, 2024).

²² *Id.*, and CDC, *Severe Maternal Morbidity in the United States* (2023). Available at <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/severematernalmorbidity.html> (last visited January 8, 2024).

²³ CDC, *Severe Maternal Morbidity in the United States* (2023). Available at <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/severematernalmorbidity.html> (last visited January 8, 2024).

²⁴ Presentation by Kenneth Schepke, M.D., F.A.E.M.S., Deputy Sec’y for Health, DOH, before the Senate Committee on Health Policy (Nov. 14, 2023). Available at https://www.flsenate.gov/Committees/Show/HP/MeetingPacket/5979/10504_MeetingPacket_5979_4.pdf (last visited January 8, 2024).

²⁵ *Supra*, note 21.
²⁶ *Id.*

The consequences of maternal death and severe maternal morbidity are felt throughout a community. High rates of maternal death are associated with infant and child mortality, loss of economic opportunities, and cycles of poverty extending from the family into the broader community.²⁷

Infant Health Outcomes

Infant mortality is the death of an infant before the first birthday. The infant mortality rate is the number of infant deaths for every 1,000 live births. DOH reports annually on fetal and infant deaths through the Florida Vital Statistics Annual Report.²⁸ This report provides the number of fetal deaths per 1,000 live births, the number of deaths by race, and compares that data to national figures. Florida ranks 19th in the nation in infant mortality with a rate of 5.9 deaths per 1,000 live births (1,275 in 2021).²⁹

In Florida, the leading causes of infant mortality, per 1,000 live births, are:³⁰

- Birth defects;
- Preterm and low birth weight;
- Unintentional injuries;
- Maternal complications of pregnancy;
- Complications of placenta, cord, and membranes; and
- Sudden Infant Death Syndrome.

The relationship between infant health outcomes and adequate prenatal care is well established. Adequate prenatal care received regularly throughout a pregnancy can help to detect risks before they manifest dangerously, and can help women to manage both pregnancy and non-pregnancy related health conditions. This is especially important for marginalized populations for whom access to health care services before pregnancy may have been limited.³¹ Adequate prenatal care is closely associated with improved birth weight and reduced rate of preterm births.³²

Housing Insecurity and Pregnancy Outcomes

Florida's expecting mothers are not exempt from the state's affordable housing crisis. While the long-term effects of housing instability are detrimental to all who experience it, the impact on pregnant women is especially acute. Homelessness during pregnancy poses significant health risks for mothers and infants.

Extreme housing insecurity, in the form of homelessness or threatened eviction, among pregnant women is tied to significant pre-birth risk factors. This population is significantly more likely to have comorbidities and higher-risk pregnancies, including higher rates of substance use disorder and major mental health disorders.³³ The need for adequate perinatal health care is heightened for women with high-risk pregnancies, but pregnant women experiencing homelessness report barriers to prenatal

²⁷ Miller, S., & Belizán, J. M. *The true cost of maternal death: individual tragedy impacts family, community and nations* (2015). *Reproductive Health*, 12(1), 56–56. <https://doi.org/10.1186/s12978-015-0046-3>

²⁸ Florida Department of Health, *Florida Vital Statistics Annual Report 2020*. Available at <http://www.flpublichealth.com/VSbook/PDF/2020/Fetal.pdf> (last visited January 22, 2024).

²⁹ Id. See also Centers for Disease Control and Prevention, *Infant Mortality Rates by State* (2019). Available at https://www.cdc.gov/nchs/presroom/sosmap/infant_mortality_rates/infant_mortality.htm (last visited Jan. 12, 2022).

³⁰ Presentation by Shay Chapman, BSN, MBA, Deputy Division Director, Community Health Promotion, Sept. 21, 2021 meeting of the Professions and Public Health Subcommittee. Available at <https://www.myfloridahouse.gov/Sections/Documents/loaddoc.aspx?PublicationType=Committees&CommitteeId=3093&Session=2022&DocumentType=Meeting+Packets&FileName=pph+9-21-21.pdf> (last visited January 22, 2024).

³¹ Shah, J. S., Revere, F. L., & Toy, E. C. *Improving Rates of Early Entry Prenatal Care in an Underserved Population* (2018). *Maternal & Child Health Journal*, 22(12), 1738–1742. <https://doi-org.proxy.lib.fsu.edu/10.1007/s10995-018-2569-z>

³² Alexander, G.R. & Kotelchuck, M. *Assessing the Role and Effectiveness of Prenatal Care: History, Challenges, and Directions for Future Research* (2001). *Public Health Reports* (1974-), 116(4), 306.

³³ Huang, K., Waken, R.J., Luke, A., Carter, E., Lindley, K., & Maddox, K. *Risk of Delivery Complications Among Pregnant People Experiencing Housing Insecurity* (2023). *American Journal of Obstetrics & Gynecology*, 5:2, <https://doi.org/10.1016/j.ajogmf.2022.100819>

health care, and lower rates of adequate prenatal care utilization, further increasing their risk of adverse birth outcomes.³⁴

Women experiencing extreme housing insecurity experience worse birth outcomes than their securely housed counterparts, with higher rates of preterm birth and severe maternal morbidity.³⁵ Infants born to mothers experiencing homelessness or threatened eviction are at a significantly higher risk of being born preterm or with a low birth weight, require stays in neonatal intensive care units, and extended hospital stays after delivery.³⁶ More complex births and extended hospital stays lead to higher delivery-associated costs for this financially insecure population.³⁷

Effect of the Bill

HB 1609 establishes the Florida State Maternity Housing Grant Program within DOH. The bill states the intent of the Legislature to provide housing resources to resident women and families during the prenatal period, regardless of age or marital status, whose financial resources have been determined inadequate to meet residential costs.

The bill outlines the types of expenses for which grant funding may be used, including:

- Housing in an authorized living arrangement for a period of time determined by the mother's due date;
- Services recommended by DOH to encourage economic independence and positive health outcomes;
- Staffing and reimbursements for housing providers; and
- All other costs related to the administration of the program, not to exceed 5 percent of the total grant funds.

The bill specifies that the total amount of grants awarded by DOH may not exceed the funding appropriated for the grant program.

The bill grants DOH rulemaking authority to adopt rules necessary for the administration of the program. The bill does not restrict the rules that DOH may adopt to administer the program, but provides that DOH may adopt rules pursuant to the following:

- A framework for the payment or reimbursement for expenses related to the "authorized living arrangement;"
- Eligibility criteria for expecting mothers and families seeking maternity housing services;
- Requirements for maternity housing grant applications; and
- Guidelines for assessing the appropriateness of living situations and the determination of approval.

The bill provides an effective date of July 1, 2024.

B. SECTION DIRECTORY:

- Section 1:** Creates s. 381.97, F.S., relating to the Florida State Maternity Housing Grant Program.
Section 2: Provides an effective date of July 1, 2024.

³⁴ DiTosto, J., Holder, K., Soyemi, E., Beestrum, M., & Yee, L. *Housing Instability and Adverse Perinatal Outcomes: A Systematic Review* (2021). *American Journal of Obstetrics & Gynecology*, 3:1, <https://doi.org/10.1016/j.ajogmf.2021.100477>; see also, Bloom, K.C., Bednarzyk, M.S., Devitt, D.L., Renault, R.A., Teaman, V., & Van Look, D.M. *Barriers to prenatal care for homeless pregnant women* (2004). *J Obstet Gynecol Neonatal Nurs*. 2004;33(4):428-435. doi: 10.1177/0884217504266775

³⁵ Leifheit, K.M., Schwartz, G.L., Pollack, C.E., Edin, K.J., Black, M.M., Jennings, J.M., & Althoff, K.N. *Severe Housing Insecurity during Preanancy: Association with Adverse Birth and Infant Outcomes* (2020). *International Journal of Environmental Research and Public Health*. 2020; 17(22):8659. <https://doi.org/10.3390/ijerph17228659>

³⁶ *Id.*

³⁷ Yamamoto, A., Gelberg, L., Needleman, J., Kominski, G., Vangala, S., Miyawaki, A., & Tsugawa, Y. *Comparison of Childbirth Delivery Outcomes and Costs of Care Between Women Experiencing vs Not Experiencing Homelessness* (2021). *JAMA network open*, 4(4), e217491. <https://doi.org/10.1001/jamanetworkopen.2021.7491>

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

The provisions of the bill are subject to appropriation; the bill has an indeterminant, negative fiscal impact on DOH.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable. The bill does not appear to affect county or municipal governments.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

The bill provides sufficient rulemaking authority for DOH to implement its provisions.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES