

# Covering the Undocumented: The Effects of a Large-Scale Prenatal Care Intervention

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## Disclaimer

This research was conducted as a part of the U.S. Census Bureau's Evidence Building Project Series. Any opinions and conclusions expressed herein are those of the authors and do not necessarily represent the views of the U.S. Census Bureau or the California Department of Public Health. All results were approved for release by the Census Bureau's Disclosure Review Board, authorization numbers CBDRB-FY19-532 and CBDRB-FY20-045.

## Introduction

- ▶ We examine one of the first state expansions of publicly-funded prenatal coverage to undocumented immigrants in the U.S.
- ▶ In 1988, California extended Medicaid eligibility to low-income, undocumented pregnant immigrants who previously did not qualify for coverage
- ▶ By 1991, 45% of Medi-Cal funded births were to undocumented immigrant women; 1/6th of all births in the state (Norton, Kenney, and Ellwood 1996)

## Contribution

- ▶ Provide first evaluation of this landmark policy change
- ▶ Use a new dataset that links California birth certificate data to federal survey data under the U.S. Census Bureau's Evidence Building Project Series, which enables us to overcome existing empirical challenges
- ▶ Document significant changes in health care utilization during pregnancy and improved birth outcomes among the target population

## Background

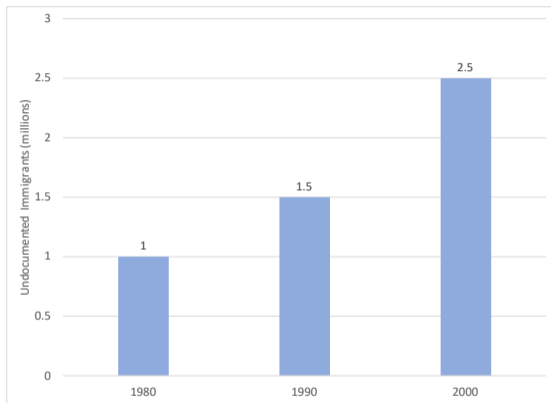
- ▶ Prior to expansion, Medi-Cal required legal U.S. residency status for immigrant women to qualify for pregnancy-related coverage
- ▶ Effective October 1988, new state law extended eligibility to all women meeting the income requirements regardless of legal status
- ▶ Coverage included all pregnancy-related medical care, delivery-related care, and 60 days of postpartum care

# Tremendous Growth in Medi-Cal Enrollment

Evaluation of Medi-Cal Claims by Norton, Kenney, and Ellwood (1996)

- ▶ Between 1987 and 1991, the number of Medi-Cal funded-births nearly doubled: from 116,000 to 228,000
- ▶ Almost 80% of the growth was due to the undocumented expansion
- ▶ Vast majority (88%) of undocumented immigrants enrolled prior to last month of pregnancy; average of 5.2 months of enrollment

## But...Also Increase in Undocumented Immigrants in California



Large influx of low-income immigrants to California

- ▶ Immigration and Reform Control Act of 1986
- ▶ Immigration Act of 1990

Sources: Passel and Woodward (1984) and Warren (2011).

## Research Approach = Take Advantage of New Data Linkages

- ▶ Huge changes in number and composition of immigrants - how do we isolate the impact of the policy?
- ▶ We use information on family relationships from the Census and American Community Survey linked to the California birth records
- ▶ This allows us to **compare children who were born to *the same mother*** before and after the policy change
- ▶ We also use Census/ACS data to **identify immigrant mothers most likely to have undocumented status** at the time of the policy



## Empirical Strategy

- ▶ Quasi-experimental research design compares change in outcomes for treated group (foreign-born) to comparison group (U.S.-born) after the policy change
- ▶ Control for individual mothers to compare outcomes for siblings
- ▶ Control for changes in outcomes over time unrelated to policy
- ▶ Other controls: birth order, sex, plurality

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- ▶ **Alternative version: estimate effects for mothers likely to be undocumented**

# Change in Health Care Utilization Following Expansion

	Any prenatal care	Early prenatal care	Hospital delivery	Doctor delivery	C-section
<b>All foreign-born mothers</b>					
Expansion effect	1.2	1.7	0.3	1.9	0.4
Baseline mean	97.6%	68.9%	99.3%	92.3%	18.6%
<b>Undocumented immigrant mothers</b>					
Expansion effect	2.8	5.4	0.5	5.8	0.6
Baseline mean	96.1%	59.2%	99.4%	88.6%	15.0%

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- ▶ Increase in prenatal care use, early initiation, hospital births, and doctor deliveries; no change in c-sections
- ▶ Estimates indicate  $\approx 50\%$  reduction in share of women with no prenatal care, 43% reduction in share of women without hospital deliveries

## Change in Birth Outcomes Following Expansion

	Gestation days	Birth weight (grams)	Small for gestational age (SGA)
<b>All foreign-born mothers</b>			
Expansion effect	0.5	23.6	-0.8
Baseline mean	278.4	3378	9.7%
<b>Undocumented immigrant mothers</b>			
Expansion effect	1.5	74.2	-2.1
Baseline mean	278.5	3348	10.5%

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- ▶ Increase in average gestation length and birth weight, 2x + among births to undocumented immigrants
- ▶ Decrease in SGA, approximately 8% over the baseline mean (20% for undocumented immigrants)

## Conclusions

- ▶ Project is showing significant benefits of pregnancy-related coverage for undocumented immigrants
- ▶ Relevant to today's environment: only 19 states offer coverage for this group; federal option to cover this group was only introduced in 2002
- ▶ As one of the first states to offer coverage, the California experience provides a valuable opportunity to learn about its short and long-reaching consequences