

**Department of Health and Human Services
Study on Risk-Appropriate Maternal and Neonatal Care**

Session Law 2018-93, Section 1



**Report to the
House Health Committee
and
Senate Health Care Committee**

By

North Carolina Department of Health and Human Services

September 28, 2020

Background

Section 1 of Session Law 2018-93 (SL 2018-93) directed the North Carolina Department of Health and Human Services (DHHS) to study and analyze North Carolina's ability to provide women with timely and equitable access to high-quality, risk-appropriate maternal and neonatal care. Further, the study is to examine at least all the following:

- (1) The complexity levels of care currently being provided by all delivering hospitals in caring for birth mothers and newborns.
- (2) How current systems of referral and transport to different facilities and specialty providers based on patient risk are being managed.
- (3) Disparities in access to risk-appropriate maternal and hospital care.
- (4) Service gaps.
- (5) Issues that impact the ability to most appropriately match patient need with provider skill.
- (6) Recommendations for actionable steps that can be taken in North Carolina to best ensure that pregnant women receive quality prenatal care and that mothers and newborns are cared for in a facility that can meet their specific clinical needs.
- (7) Any other issues the Department deems relevant to this study.

DHHS is directed to provide a final report of its findings and recommendations, including any recommended legislation, to the 2020 General Assembly. DHHS Division of Public Health (DPH) contracted with the NC Institute of Medicine (NCIOM) to convene the Perinatal Systems of Care Task Force and publish a report containing the recommendations of the Task Force. The report, titled "***Healthy Moms, Healthy Babies: Building a Risk-Appropriate Perinatal System of Care for North Carolina***," was released on April 7, 2020, and widely distributed.

This report provides a brief overview of the NCIOM Task Force process and duties, an overview of their recommendations, and the link to the final report. A list of Task Force and Steering Committee members is included in *Appendix 1*.

NCIOM Perinatal System of Care

SL 2018-93 and the current North Carolina's Perinatal Health Strategic Plan (PHSP) 2016-2020, developed by DPH and its partners, were used to determine the scope of work of the Task Force. Point 3E of the PHSP intersects with the requirements of SL 2018-93 and is outlined below:

Point 3E: Ensure that pregnant women and high-risk infants have access to the risk appropriate level of care through a well-established regional perinatal system.

- *Decrease the percent of Very Low Birthweight (VLBW) and high-risk babies who are born at Level 1 and Level 2 hospitals*
- *Define, identify, and promote centers of excellence for VBAC (vaginal birth after cesarean)*
- *Assess the levels of neonatal and maternity care services for hospitals using the consensus recommendations of the American Academy of Pediatrics (AAP), the American College of Obstetricians and Gynecologists (ACOG), and the Society for Maternal-Fetal Medicine (SMFM)*

Task Force Meeting Summaries

The Perinatal Systems of Care Task Force convened eleven meetings between the January 2019 and October 2019. All meeting materials can be accessed on the NC Institute of Medicine website at: <http://nciom.org/perinatal-system-of-care/>

The Task Force included a focus on: 1) Inpatient Care Labor and Delivery; 2) Preconception, Prenatal, and Postpartum Care; 3) Postpartum Care; and 4) Support for Pregnant Women, Infants, and Their Families.

Below are the recommendations from the Task Force:

Inpatient Care Labor and Delivery:

- Adopt National Maternal and Infant Risk-Appropriate Level of Care Standards
- Assess Levels of Care Utilizing the Centers for Disease Control and Prevention (CDC) LOCATE Tool
- Require External Verification of Birthing Facilities Maternal and Neonatal Level of Care Designations
- Re-establish North Carolina Perinatal and Neonatal Outreach Coordinator Program
- Support Outpatient Risk-Appropriate Perinatal System of Care

Preconception, Prenatal, and Postpartum Care:

- Expand Access to Health Care Services
- Expand Access to Comprehensive Prenatal Care for Women Ineligible for Medicaid
- Extend Coverage for Group Prenatal Care and Doula Support
- Increase the Utilization and Completion Percentages of Childbirth Education Classes
- Full Practice Authority for Certified Nurse-Midwives
- Standardize Screening and Treatment for Perinatal Mental Health and Substance Use
- Collect and Report Data on Maternal and Infant Outcomes by Race and Ethnicity
- Engage Insurers in Quality Improvement Efforts that Address Racial and Ethnic Disparities in Care
- Patient and Family Advisory Councils
- Align Perinatal Care Regional Maps with Medicaid Transformation Maps

Postpartum Care:

- Develop Parent Navigator Programs in Birthing Facilities

Support for Pregnant Women and Their Families:

- Use Community Health Workers to Support Pregnant Women in Their Communities
- Implement Family-Friendly Workplace Policies

The final NCIOM Task Force report, *“Healthy Moms, Healthy Babies: Building a Risk-Appropriate Perinatal System of Care for North Carolina”*, can be accessed at

Appendix 1

NC Institute of Medicine Perinatal System of Care Task Force

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