GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2017

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HOUSE BILL 741

Short Title:	DHHS Study/Maternal and Neonatal Care.	(Public)
Sponsors:	Representatives Murphy, Boswell, Adcock, and Cunningham (Primary Sponsors). For a complete list of sponsors, refer to the North Carolina General Assembly web site.	
Referred to:	Health	

April 13, 2017

1		A BILL TO BE ENTITLED
2	AN ACT DIRECT	ING THE DEPARTMENT OF HEALTH AND HUMAN SERVICES TO
3	STUDY ISS	UES PERTAINING TO HIGH-QUALITY, RISK-APPROPRIATE
4	MATERNAL A	AND NEONATAL CARE.
5	Wherea	s, pregnant and postpartum women require timely, comprehensive medical
6	services matched to	o their clinical complexity; and
7	Wherea	s, medically complex pregnant mothers and newborns should be cared for in
8	•	hat can meet their specific medical needs; and
9	Wherea	s, maternity and newborn care providers are not geographically distributed
10	to best meet health	care needs; and
11	Wherea	s, studies have demonstrated that timely access to risk appropriate neonatal
12		can reduce infant mortality and maternal severe morbidity and mortality; and
13	Wherea	s, health care facilities across North Carolina have varied capabilities to care
14	for mothers and ne	wborns with complex needs; and
15		s, designating facilities with specific "levels of care" offers uniform criteria
16		y of health care facilities to provide complexity of care to pregnant women
17		I this approach is endorsed by the American College of Obstetricians and
18		Society for Maternal-Fetal Medicine, the American Academy of Pediatrics,
19		her national medical organizations; Now, therefore,
20		nbly of North Carolina enacts:
21		ON 1.(a) The Department of Health and Human Services shall study and
22		rolina's ability to provide women with timely and equitable access to
23		appropriate maternal and neonatal care. The study shall examine at least all
24	of the following:	
25		The complexity levels of care currently being provided by all delivering
26		hospitals in caring for birth mothers and newborns.
27		How current systems of referral and transport to different facilities and
28		specialty providers based on patient risk are being managed.
29	• •	Disparities in access to risk-appropriate maternal and hospital care.
30		Service gaps.
31	· ,	Issues that impact the ability to most appropriately match patient need with
32	-	provider skill.
33		Recommendations for actionable steps that can be taken in North Carolina to
34]	best ensure that pregnant women receive quality prenatal care and that



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1	mothers and newborns are cared for in a facility that can meet their specific
2	clinical needs.
3	(7) Any other issues the Department deems relevant to this study.
4	SECTION 1.(b) The Department shall make an interim report of its findings and
5	recommendations to the 2018 Regular Session of the 2017 General Assembly on or before May
6	1, 2018, and a final report of its findings and recommendations, including any recommended
7	legislation, to the 2019 General Assembly.
8	SECTION 2. This act is effective when it becomes law.