

The Department of Public Health Report on Maternal Health October 2018 and the General Assembly Response under SB1909

SB 1909 as passed by the Senate is in response to an Illinois Department of Public Health report released in October 2018. Out of 47 states ranked, Illinois ranked 18th in maternal deaths, with a death rate of 14.7 per 100,000 births between 2012 and 2016. After reviewing maternal deaths in the state for over a year beginning in 2015, the Department's Maternal Mortality Review committee discovered that each year, an average of 73 Illinois women die within one year of pregnancy. The committee also found that black women are six times as likely to die of a pregnancy-related condition as white women, that 72% of the pregnancy related deaths and 93% of violent pregnancy associated deaths could have been prevented, and that obesity contributed to 44% of pregnancy related deaths in Illinois in 2015.

The report recommends that health insurance plans separate payment for visits in the postpartum period from labor and delivery.

- *The bill requires certain group health insurance policies and other specified policies to provide coverage of medically necessary treatment for postpartum complications as determined by the woman's treating physician. The bill provides that doula services, perinatal depression screenings, and other services shall be covered by all payers.*

The report recommends that Illinois create and expand home visiting programs to target high risk mothers.

- *The Department of Human Services is to create the Nurse-Family Partnership. The program is to be a voluntary nurse home visitation program that improves the health and well-being of low income first time pregnant women and their children.*

The report recommends that Illinois expand Medicaid coverage for the postpartum period from 60 days to 12 months.

- *SB 1909 provides that medical assistance be provided to eligible women during pregnancy and for 12 months postpartum rather than the 60 day postpartum period. The Department of Children and Family Services will submit a State Plan Amendment to expand coverage for family planning services to women whose income is at or below 200% of the federal poverty level.*

Hospitals should have clear policies for emergency departments to identify pregnant and postpartum women and to consult with an obstetrician for all such women about possible postpartum complications.

- *The bill requires birthing facilities to have obstetric hemorrhage protocols and conduct a simulation of protocols.*