

GENERAL ASSEMBLY OF NORTH CAROLINA  
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SENATE BILL DRS45189-MG-15 (01/10)

Short Title: DHHS Study/Maternal and Neonatal Care. (Public)

Sponsors: Senators D. Davis and Krawiec (Primary Sponsors).

Referred to:

1 A BILL TO BE ENTITLED  
2 AN ACT DIRECTING THE DEPARTMENT OF HEALTH AND HUMAN SERVICES TO  
3 STUDY ISSUES PERTAINING TO HIGH-QUALITY, RISK-APPROPRIATE  
4 MATERNAL AND NEONATAL CARE.

5 Whereas, pregnant and postpartum women require timely, comprehensive medical  
6 services matched to their clinical complexity; and

7 Whereas, medically complex pregnant mothers and newborns should be cared for in  
8 a medical facility that can meet their specific medical needs; and

9 Whereas, maternity and newborn care providers are not geographically distributed  
10 to best meet health care needs; and

11 Whereas, studies have demonstrated that timely access to risk appropriate neonatal  
12 and obstetric care can reduce infant mortality and maternal severe morbidity and mortality; and

13 Whereas, health care facilities across North Carolina have varied capabilities to care  
14 for mothers and newborns with complex needs; and

15 Whereas, designating facilities with specific "levels of care" offers uniform criteria  
16 about the capability of health care facilities to provide complexity of care to pregnant women  
17 and newborns; and this approach is endorsed by the American College of Obstetricians and  
18 Gynecologists, the Society for Maternal-Fetal Medicine, the American Academy of Pediatrics,  
19 and a number of other national medical organizations; Now, therefore,  
20 The General Assembly of North Carolina enacts:

21 **SECTION 1.(a)** The Department of Health and Human Services shall study and  
22 analyze North Carolina's ability to provide women with timely and equitable access to  
23 high-quality, risk-appropriate maternal and neonatal care. The study shall examine at least all  
24 of the following:

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



- 1                   (7) Any other issues the Department deems relevant to this study.  
2                   **SECTION 1.(b)** The Department shall make an interim report of its findings and  
3 recommendations to the 2018 Regular Session of the 2017 General Assembly on or before May  
4 1, 2018, and a final report of its findings and recommendations, including any recommended  
5 legislation, to the 2019 General Assembly.  
6                   **SECTION 2.** This act is effective when it becomes law.