

By: Representative Barker

To: Medicaid

HOUSE BILL NO. 910
(As Sent to Governor)

1 AN ACT TO CREATE THE INFANT MORTALITY REDUCTION COLLABORATIVE
2 AND PROVIDE FOR ITS MEMBERSHIP; TO PROVIDE THAT THE COLLABORATIVE
3 SHALL BE ASSIGNED TO THE STATE DEPARTMENT OF HEALTH FOR
4 ADMINISTRATIVE PURPOSES; TO PROVIDE THAT THE COLLABORATIVE SHALL
5 ANNUALLY MAKE POLICY RECOMMENDATIONS TO THE LEGISLATURE AND
6 RECOMMENDATIONS FOR REGULATORY CHANGES TO STATE AGENCIES ON THE
7 FOLLOWING MATTERS: INSURING THE AVAILABILITY, ACCESSIBILITY AND
8 AFFORDABILITY OF A HORMONAL SUPPLEMENT THAT IS USED TO PREVENT
9 PRETERM DELIVERIES IN PREGNANT WOMEN, INSURING ACCESS TO
10 PRECONCEPTION HEALTH CARE, REDUCING THE NUMBER OF EARLY ELECTIVE
11 DELIVERIES, AND THE DEVELOPMENT OF PERINATAL REGIONS OF CARE; AND
12 FOR RELATED PURPOSES.

13 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

14 **SECTION 1.** (1) There is created the Infant Mortality
15 Reduction Collaborative, to be composed of eleven (11) members as
16 follows:

17 (a) The Chairman of the House Medicaid Committee or the
18 designee of the chairman;

19 (b) The Chairman of the Senate Public Health and
20 Welfare Committee or the designee of the chairman;

21 (c) The State Health Officer or the designee of the
22 health officer;



23 (d) The Director of the Division of Pharmacy of the
24 State Department of Health;

25 (e) The Executive Director of the Division of Medicaid
26 or the designee of the executive director;

27 (f) The Pharmacy Director of the Division of Medicaid;

28 (g) Two (2) licensed physicians who are certified in
29 obstetrics and gynecology appointed by the State Health Officer;

30 (h) One (1) representative of the pharmaceutical
31 industry appointed by the State Health Officer;

32 (i) One (1) representative of private insurance
33 providers appointed by the Governor; and

34 (j) One (1) representative of the Blair E. Batson
35 Hospital for Children appointed by the Vice Chancellor for Health
36 Affairs of the University of Mississippi Medical Center.

37 (2) The State Health Officer shall be the chairman of the
38 Infant Mortality Reduction Collaborative. The collaborative shall
39 adopt bylaws and rules for its efficient operation, which may
40 include designation of its organizational structure including
41 other officers and committees, duties of officers and committees,
42 a process for selecting officers, quorum requirements for
43 committees, provisions for special or ad hoc committees, staff
44 policies and other such procedures as may be necessary. The
45 collaborative may establish committees responsible for conducting
46 specific collaborative programs or activities.



47 (3) The Infant Mortality Reduction Collaborative shall be
48 assigned to the State Department of Health for administrative
49 purposes only, and the department shall designate staff to assist
50 the collaborative.

51 (4) The Infant Mortality Reduction Collaborative shall meet
52 and conduct business at least quarterly. All meetings of the
53 collaborative and any committees of the collaborative shall be
54 open to the public, with opportunities for public comment provided
55 on a regular basis. Notice of all meetings shall be given as
56 provided in the Open Meetings Act (Section 25-41-1 et seq.) and
57 appropriate notice also shall be given to all persons so
58 requesting of the date, time and place of each meeting.

59 (5) The Infant Mortality Reduction Collaborative may apply
60 for and expend grants or other contributions for the purpose of
61 promoting maternal and infant health in Mississippi.

62 (6) The Infant Mortality Reduction Collaborative shall
63 annually make policy recommendations to the Legislature and
64 recommendations for regulatory changes to state agencies on the
65 following matters:

66 (a) Ensuring the availability, accessibility and
67 affordability of a hormonal supplement that is used to prevent
68 preterm deliveries in pregnant women;

69 (b) Ensuring access to preconception health care;

70 (c) Reducing the number of early elective deliveries;

71 and



72 (d) The development of perinatal regions of care.

73 (8) In developing its recommendations, the collaborative may
74 consult with experts and shall examine actions taken in other
75 states.

76 (9) This section shall stand repealed on July 1, 2017.

77 **SECTION 2.** This act shall take effect and be in force from
78 and after its passage.

