

Stricken language would be deleted from and underlined language would be added to present law.

State of Arkansas
95th General Assembly
Regular Session, 2025

As Engrossed: H4/7/25

A Bill

HOUSE BILL 1869

By: Representative L. Johnson

By: Senator Irvin

For An Act To Be Entitled

AN ACT TO CREATE THE MATERNAL OUTCOMES MANAGEMENT SYSTEM WITHIN THE DEPARTMENT OF HEALTH; TO ORGANIZE MATERNAL HEALTH RESOURCES; AND FOR OTHER PURPOSES.

Subtitle

TO CREATE THE MATERNAL OUTCOMES MANAGEMENT SYSTEM WITHIN THE DEPARTMENT OF HEALTH; AND TO ORGANIZE MATERNAL HEALTH RESOURCES.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code Title 20, Chapter 16, is amended to add an additional subchapter to read as follows:

Subchapter 26 – Maternal Outcomes Management System

20-16-2601. Legislative intent.

It is the intent of this subchapter to establish a comprehensive statewide system of care addressing maternal health by organizing resources, educating providers and patients, incentivizing best practices, and collecting critical data to drive improvement.

20-16-2602. Maternal Outcomes Management System.

(a) The Department of Health shall create a comprehensive statewide system of care addressing maternal health to be called the "Maternal Outcomes Management System".

(b) The Maternal Outcomes Management System shall without limitation:



(1)(A) Research and organize maternal health resources.

(B) The Department of Health, in conjunction with other state agencies as appropriate, shall maintain on the website of the Department of Health resources pertaining to maternal health including without limitation information regarding:

(i) Enrollment in the Arkansas Medicaid Program;

(ii) Lactation education;

(iii) Provider access;

(iv) Transportation resources;

(v) Maternal health education; and

(vi) Local community support services;

(2) Provide education to patients and clinicians regarding maternal health issues;

(3) Incentivize best practices for maternal health through the grant program described in § 20-16-2603;

(4) In conjunction with the Arkansas Hospital Association, the Department of Human Services, and the Department of Health, collect data concerning maternal health from birthing and delivery hospitals to promote best practices and to identify opportunities for improvement in maternal health care;

(5) Develop a platform for structured peer review; and

(6) Coordinate care through the continuum of services needed to ensure the best maternal health outcomes.

(c) The activities of the Maternal Outcomes Management System under this section and the additional requirements under this subchapter are contingent upon the availability and appropriation of funding.

20-16-2603. Grants for birthing and delivery hospitals – Designation system.

(a)(1) As part of the Maternal Outcomes Management System, the Department of Health shall establish a grant program for birthing and delivery hospitals that includes a designation system for birthing and delivery hospitals based on the individual hospital's capability to provide clinical care for pregnant women.

(2) The department shall:

(A) Accept applications from birthing and delivery

hospitals to participate in the grant program under subdivision (a)(1) of this section;

(B) Determine conditions for designation in the grant program under subdivision (a)(1) of this section; and

(C) Set the time frame for review and renewal of the applications under subdivision (a)(2)(A) of this section.

(3) The designation system for birthing and delivery hospitals described in subdivision (a)(1) of this section shall:

(A) Be in accordance with the levels of maternal care from the American College of Obstetricians and Gynecologists, as existing on January 1, 2025; and

(B) Evaluate the capabilities of a hospital to deliver high-quality maternity care and ensure that all mothers receive the appropriate level of care.

(4) The birthing and delivery hospitals under subdivision (a)(1) of this section shall be organized into the appropriate hospital regions to meet regularly as determined by the department to discuss maternal health data and to provide a forum for regional peer review and performance feedback to and from the department and the birthing and delivery hospitals.

(b) To qualify for a grant under the grant program established under subsection (a) of this section, a birthing and delivery hospital shall meet requirements set by the department including without limitation:

(1) Community outreach and education;

(2) Clinician education on maternal health;

(3) Peer review of all birthing and delivery complications;

(4) Participation in regional meetings of birthing and delivery hospitals;

(5) An on-site maternal health coordinator;

(6) Local site visits from inspectors of the department; and

(7) Achievement of certain clinical metrics consistent with evidence-based practices proven to improve maternal health outcomes.

(c) A grant under this section shall be distributed in a manner that provides the greatest financial support to birthing and delivery hospitals with the fewest resources.

(d) The department may promulgate rules to implement this section.

20-16-2604. MOMS Care Connect – Coordinating call center.

The Department of Health shall establish a call center to be called the "MOMS Care Connect" to operate in conjunction with the Arkansas Trauma Call Center and to coordinate transfers of pregnant women between hospitals to ensure an appropriate level of care is provided.

20-16-2605. Postpartum Support Hotline – Post-delivery call center.

(a)(1) The Department of Health shall establish a call center to be called the "Postpartum Support Hotline" to proactively reach out to mothers post-delivery.

(2) The call center established in this section shall be separate from MOMS Care Connect established under § 20-16-2604.

(3) The department may partner with another state entity or an institution of higher education to establish the call center established in this section.

(b) The call center under this section shall screen mothers through a standardized questionnaire developed by the department to determine which mothers need follow-up information, including without limitation information regarding:

(1) The mental well-being of the mother;

(2) Access to follow-up healthcare;

(3) Lactation or feeding concerns;

(4) Healthy sleep for infants; and

(5) Screening for certain medical conditions.

(c) The call center under this section shall provide connections directly to resources to support mothers identified as needing follow-up information.

/s/L. Johnson