Legislative Analysis



PERINATAL QUALITY COLLABORATIVES

Phone: (517) 373-8080 http://www.house.mi.gov/hfa

House Bill 5166 as reported from committee Sponsor: Rep. Stephanie A. Young

Analysis available at http://www.legislature.mi.gov

Committee: Health Policy Complete to 6-26-24

SUMMARY:

House Bill 5166 would amend the Public Health Code to require the Department of Health and Human Services (DHHS) to maintain a perinatal quality collaborative (PQC).¹

The PQC would have to do all of the following to support and improve maternal and infant health outcomes:

- Promote quality improvement efforts.
- Identify processes.
- Mobilize resources.
- Advance equity.
- Implement and expand care for families affected by perinatal substance use disorder.
- Expand and improve access to quality and respectful care and support throughout the pregnancy and afterward.

The state PQC would have to establish regional perinatal quality collaboratives based on the state's 10 prosperity regions. Each regional PQC would have to designate a lead agency in the region to invite participation from entities (including governmental entities) that provide services and supports to individuals during the perinatal period,² such as families, health facilities or agencies, health professionals, local health departments, home visitation programs, insurers, community-based organizations, and federally recognized tribes.

Subject to appropriation, DHHS would have to provide resources to each regional PQC and require each regional PQC to do both of the following:

- Convene regular meetings to review qualitative and quantitative data on maternal and infant health outcomes in the region.
- Develop plans of action to improve birth outcomes. In developing the plans of action, the regional PQC would have to engage families and communities and use strategies proven to address the region's primary perinatal challenges.

Proposed MCL 333.9130

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¹ DHHS launched the Michigan Perinatal Quality Collaborative in 2015. It consists of nine regional perinatal quality collaboratives representing the state's 10 prosperity regions, all of which were established by 2019. The bill would codify this DHHS initiative in state law. See https://www.michigan.gov/mdhhs/keep-mi-healthy/maternal-and-infant-health/michigan-perinatal-quality-collaborative

For PQCs nationally, see https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pqc/working-together-improve-maternal-outcomes/pdfs/PQCs-working-together-H.pdf and https://nnpqc.org/

² "Perinatal" relates to the period starting a few weeks before birth and including the birth and a few weeks after birth.

FISCAL IMPACT:

House Bill 5166 would likely have no additional fiscal impact on state expenditures for the Department of Health and Human Services. The FY 2023-24 DHHS budget appropriated \$10.0 million, of which \$5.0 million was appropriated on an ongoing basis, to provide grants to local collaboratives to support perinatal quality collaboratives. The fiscal impact on local units of government is dependent on the administrative cost of supporting the perinatal quality collaboratives initiative that would not be funded by the grants provided by the state.

POSITIONS:

Representatives of the Southeast Michigan Perinatal Quality Improvement Coalition testified in support of the bill. (10-19-23)

The following entities indicated support for the bill:

- Michigan Nurses Association (10-26-23)
- Michigan League for Public Policy (10-26-23)
- Michigan Council for Maternal and Child Health (10-19-23)

Legislative Analyst: Rick Yuille Fiscal Analyst: Sydney Brown

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[■] This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.