



State of Louisiana
Louisiana Department of Health
Office of Public Health

January 16, 2025
1:00 p.m. - 3:00 p.m.

Location:
Louisiana State Capitol
900 N Third Street
Baton Rouge, LA
Governor's Press Room

**Meeting Minutes: LOUISIANA COMMISSION ON PERINATAL CARE AND PREVENTION OF
INFANT MORTALITY – Regular Meeting**

I. Call to Order

- a. The meeting was called to order at 1:10 PM by the Chair, Dr. Scott Barrilleaux.

II. Roll Call – Nine members were in attendance and a quorum was present.

- a. The following members were present:

- i. Dr. Scott Barrilleaux
- ii. Dr. Joseph Biggio
- iii. Dr. Karli Boggs
- iv. Representative Stephanie Berault
- v. Ms. Aundria Cannon
- vi. Ms. Leslie Lewis
- vii. Ms. Erika Moss
- viii. Dr. Steve Spedale
- ix. Ms. Amy Zapata

b. The following members were absent:

- i. Senator Regina Barrow
- ii. Dr. Courtney Campbell
- iii. Dr. Marshall St. Amant
- iv. Dr. Rodney Wise
- v. Ms. Emily Stevens

c. The following guests attended:

- i. Ms. Berkley Durbin
- ii. Mr. Matthew Wallace
- iii. Ms. Yoruba Baltrip-Coleman, (BFH administrative support)

III. Public Comment

- a. The Chair called for public comments. There were no public comments.

IV. Approval of Minutes

- a. The meeting minutes from the September 19, 2024 and November 21, 2024 meetings were reviewed. Dr. Spedale motioned for both meeting minutes to be approved, seconded by Dr. Biggio. The meeting minutes for September 19, 2024 and November 21, 2024 were approved unanimously by members present.

V. Perinatal Commission Statute/Charge Review- Louisiana Legislative Resolution RS 40:2018.

Subsection F

- a. Dr. Barrilleaux reviewed the Perinatal Commission charge and operating guidelines found in the Louisiana Legislative Resolution RS 40:2018, Subsection F.

VI. Public Comment

- a. The Chair called for public comments. There were no public comments.

VII. New Business

- a. Chair Barrilleaux informed members that the Chair position will be up for voting at the March 20, 2025 meeting and requested that members consider nominees and send the names to the BFH Administrative Support person, Ms. Baltrip-Coleman.

VIII. Levels of Maternal Care Physician Recruitment Announcement

Dr. Veronica Gillispie-Bell, Bureau of Family Health (BFH) Medical Director for Louisiana Perinatal Quality Collaborative (LaPQC) and Pregnancy-Associated Mortality Review (PAMR) and Ochsner Health obstetrician-gynecologist.

Dr. Gillispie-Bell informed members that there were two physician vacancies for the Louisiana Department of Health (LDH), an obstetrician-gynecologist and a maternal fetal medicine Physician. These positions will help assist the Health Standards Section (HSS) in performing on-site surveys to evaluate birthing facilities' level of maternal care. Dr. Gillispie-Bell will send further information to the Commission regarding time commitment and other expectations for these two vacancies. Ms. Zapata added that the commitment would be between 12-18 months.

IX. Public Comment

- a. The Chair called for public comments. There were no public comments.

X. Other Business

- a. The four 2024 Calendar Year (CY) Workgroups provided a brief explanation of the scope of work and findings for their respective workgroups.
 - i. Ms. Paulette Carter, Co-Chair of the Mental Health workgroup reported the MHWG is focusing on strategies and actions needed to facilitate the implementation of universal mental health and substance use screening into key care systems with a particular focus on screening in the prenatal period. The strategies and actions being considered are: Medicaid reimbursement for screening and screening follow-up in prenatal visits; A guide/toolkit for providers on screening type, frequency, tools, and follow-up; Development of a screening tool and guidance that encompasses depression, anxiety, and substance use that has been tested with both providers and patients; Expand and increase the promotion of the Provider-to-Provider Consultation Line (PPCL); Ensure that the mental health and substance use treatment network is accessible and able to effectively meet the needs of the perinatal population; Solve for the lack of engagement of pregnant/postpartum persons in the care coordination services provided by the MCO's.
 - ii. Dr. Boggs, Co-Chair of the Care Coordination workgroup informed members of challenges regarding ongoing knowledge and trust gaps between patients and providers and the providers and the insurance companies. Dr. Boggs also discussed the benefits of possibly changing the "opt-in" requirement for case management to "opt-out" requirement in order to increase the number of patients utilizing case management. Another challenge was reported data only consists of enrollment data and not outcomes data, which she acknowledged would be more helpful. Other helpful measures that were identified were to incorporate the use of QR codes for persons and plans. Dr. Wise noted that there is upcoming legislation that will become effecting in the first four months of CY 2025 that may help patient's opt out rather than in for services.
 - iii. Dr. Spedale noted that the Person Power workgroup was a large undertaking and that the group followed and monitored both the report by the HCR 83 Task Force established by House Concurrent Resolution 83 of the 2023

legislative session and the SCR 20 Task Force established by the Senate Concurrent Resolution 20 of the 2023 Legislative Session. The workgroup acknowledged the extensive work already ongoing by both HCR 83 and SCR 20 Task Forces. HCR 83 included three (3) suggested phases of study, with the first phase completed in 2024. Based on its ongoing status, broad-based membership and legislative support, the workgroup felt that continued review of additional information in the next two phases should be monitored and reported back to the Perinatal Commission. The report from the SCR 20 task force included final recommendations and legislative action on these recommendations should also be monitored and reported back to the Perinatal Commission.

- iv. Dr. Barrilleaux, Co-Chair of the Congenital Syphilis workgroup read the charge of the workgroup which is to focus on the root cause of nationwide surge in cases of congenital syphilis and develop recommendations to connect patients with resources. The group found that some of the increased positivity was due to diagnostic code screening errors, suspected reinfections that may have not been reinfections due to insufficient titer data for treated patients, and timing of titers during pregnancy and treatment. More information will be sent and reported to the Commission and administrative support person. Noted challenges include overtreatment of the pediatric population due to insufficient maternal titers.
- b. Discussion and Feedback from the Managed Care Organization (MCO) Presentations and Care Coordination
 - i. The Chair expressed his thanks for every presentation with next steps being a formal letter of thanks sent to every MCO who presented information. Noted challenges included the number of resources available and the disconnect between providers and patients in accessing the resources. Discussed remedies included having designated point persons for each MCO for providers, increased phone staff, having around the clock phone in options and eliminated “opt-in” care management. Increased hospital engagement could help with the disconnect but can be challenging. The big message was that providers should work with hospitals more. Additionally, trust was discussed from a patient’s perspective in following doctor recommendations and insurance recommendations. Dr. Spedale suggested that incentives should be aimed at addressing problems rather than checking boxes and simply answering questions. Dr. Gillispie-Bell and Ms. Zapata discussed identifying and reporting on care coordination and new recommendations being implemented in the future.
- c. Discussion on Special Dietary Formula Payouts and Next Steps from the Newborn Screening Presentation
 - i. Ms. Baltrip-Coleman informed members about discussions with Ms. Cheryl Harris Program Manager, Children’s Special Healthcare Services Programs in the Bureau of Family Health (BFH) and Ms. Shannon Kelly, Clinical Services Team Lead as possible legislation is explored and drafted for the 2025 Legislative Session. Ms. Zapata clarified that BFH will internally meet with Newborn Screening to explore action steps.

XI. Perinatal Commission Announcements

- a. Vacancies
 - i. Family Practitioner
 - ii. Neonatologist
 - iii. Interested individuals are encouraged to submit an application online at the [Boards and Commissions application link](#) or send an email to PerinatalCommission@la.gov for instructions on applying to open positions.

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- iv. During the next planning meeting, the chair, co-chair and planning advisors will discuss having a state of the state presentation in either May or July 2025.
- v. The November 20, 2025 meeting will be in an alternate location, hosted by Dr. Spedale, who suggested space within Woman's Hospital in Baton Rouge could accommodate the Perinatal Commission.
- b. Next Meeting
 - i. Date: March 20, 2025
Time: 1:00 PM
Location: Louisiana State Capitol, 900 N. Third Street, Baton Rouge, LA, Governor's Press Room

XII. Adjournment

- a. Dr Spedale motioned to adjourn the meeting. Dr. Biggio seconded the motion. The meeting was adjourned at 2:30 PM.

The Commission will undertake all of its responsibilities assigned by Louisiana Legislative Resolution RS 40:2018. Subsection F. outlines the functions of this Commission to: §2018. Commission on Perinatal Care and Prevention of Infant Mortality; maternal and infant mortality studies; confidentiality; prohibited disclosure and discovery

A. There shall be established within the Louisiana Department of Health, a commission which shall be designated the "Commission on Perinatal Care and Prevention of Infant Mortality", composed of sixteen members, as provided in Subsection B of this Section.

1. Research and review all state regulations, guidelines, policies, and procedures that impact perinatal care and, when appropriate, make recommendations to the secretary of the Department of Health and Hospitals.
2. Research and review all state laws that impact perinatal care and, when appropriate, make recommendations to the legislature.
3. Accept grants and other forms of funding to conduct maternal and infant mortality studies
4. Contract, in accordance with the applicable provisions of state law, for the performance of maternal and infant mortality studies

Note: the order of the agenda may not be followed as listed in order to accommodate presenter schedules.

Presenters, members, and guests may submit requests for accessibility and accommodations prior to a scheduled meeting. Please submit a request to PerinatalCommission@la.gov at least 48 hours prior to the meeting with details of the required accommodations.

In lieu of verbal public comment, individuals may submit a prepared statement in accordance with Senate Rule 13.79. Statements should be emailed to PerinatalCommission@la.gov and must be received at least 24 hours prior to the meeting to be included in the record for the meeting.