

## Rebekah E. Gee MD, MPH

## SECRETARY

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### State of Louisiana

Louisiana Department of Health

Office of Public Health

# John Bel Edwards

## GOVERNOR

**LOUISIANA COMMISSION ON PERINATAL CARE AND PREVENTION OF INFANT MORTALITY**

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November 10, 2016

Members Attendees: Dr. Scott Barrilleaux, Dr, Robert Blereau, Gaye Dean, Emily Stevens, Dr. Tina Stefanski, Dr. Rodney Wise, Amy Zapata,

Guests: Berkley Durbin, Becky Majdoch, Karis Schoellmann, Robin Gruenfeld, Rebecca Gurvich, Rosa Bustamante-Forest, Kelly Bankston, Nicole Soudelier, Martha Hennegan, Mary Lingwall, Allison Hagan, Piia Hanson, Eleanor Holleman

**Meeting Notes:**

1. Legislative updates  
   Notice of Parental Rights (HB 318) – Feedback was gathered from Commission members regarding the Notice of Parental Rights – Disposition of Fetal Remains document. Commission members noted that:

* The reading level of the document was too high,
* It was not clear what will occur if the document is provided outside the 24 hour window allowed in the legislation, and
* There should be clarification if that 24 hour window begins at delivery or at diagnosis.

1. Medicaid

Piia Hanson, Director of Quality Improvement for Louisiana Medicaid, shared that the deadline for reviewing the request for proposals (RFPs) for upcoming contracts has been adjusted to the end of the year. Ms. Hanson noted that she would meet with the individual coordinating feedback and would circle back around to the Perinatal Commission. The Commission may be particularly helpful in crafting performance metrics for the RFPs.

1. Neonatal Abstinence Syndrome (NAS)

* The NAS Toolkit, created by the Office of Behavioral Health (OBH) was reviewed by Commission members and the following feedback was shared:
  + The document was generally thorough and well-constructed, and
  + Commission members noted that revisions to the formatting could make the document far easier to use for clinicians.
* The Commission on Preventing Opioid Abuse (HCR 113) has a subcommittee on maternal and child health issues. Robin Gruenfeld, State Maternal and Child Health Coordinator, will chair the subcommittee. She is working with her team to develop a document that captures background information, current policies, best practices, and short and long term findings and recommendations.
* The Commission discussed physician fees in medication assisted treatment of substance use disorder, in keeping with the Commission’s pledge to review recommendations at each meeting from the Commission’s response to HCR No. 162. It was noted that the physician fee attached to Buprenorphine and Methadone treatment is not covered in all five Medicaid Plans. The Commission plans to scan the whole response to HCR No. 162 for sections that pertain to Medicaid in advance of the RFP feedback process.

1. Reports and Updates

* Office of Behavioral Health (OBH) – OBH provided the Commission with lists of outcome measures from the OBH Data Warehouse and from the Temporary Assistance for Needy Families data so the Commission could request data pertaining to pregnancy outcomes and substance use disorder treatment. A list will be assembled and provided to OBH for analysis.
* AIM – The first priority of the AIM Perinatal Quality Collaborative is maternal hypertension, a project that originated with the Louisiana Hospital Association. A two-year contract has been executed with the Institute for Healthcare Improvement for support in establishing this collaborative in Louisiana.
* 17-P – 17-P workgroup calls will immediately precede Perinatal Commission meetings for the foreseeable future. Some issues noted on that call included:
  + A lack of an effective outreach system to target providers
  + The high risk registry that helps link patients with 17-P currently captures both singletons and multiple births. It was recommended that the multiple births be excluded to improve the efficacy of the registry, and that the registry be updated more frequently.

1. Membership

Pam Egan is retiring. Current vacancies include a nurse practitioner, a pediatrician, and an obstetrician (though Dr. St. Amant was recommended, he has not yet been confirmed). Legislative members undergo a separate process and that is underway.

1. Adjourn

Meeting dates will remain on the second Thursday of every other month in 2017. A workgroup call will be scheduled for early to mid-December, and the next in-person meeting will be on January 12, 2017.