SENATE BILL 1147*

Short Title: Funds to Prevent Infant Mortality. (Public)

Sponsors: Senators Purcell; Allran, Atwater, and Forrester.

Referred to: Appropriations/Base Budget.

May 17, 2010

A BILL TO BE ENTITLED
AN ACT TO APPROPRIATE FUNDS TO PREVENT INFANT MORTALITY IN NORTH CAROLINA.

Whereas, the 2008 infant mortality rate in North Carolina was 8.2 infant deaths per 1,000 live births; and

Whereas, there has been a 35% decline in this rate in the past two decades, North Carolina still ranks 44th among the states; and

Whereas, much of the decline in the infant mortality rate can be attributed to an array of services that were either eliminated or reduced in the 2009-2010 budget; and

Whereas, the NC Child Fatality Task Force recommends that no further reductions be made to the critical services aimed at preventing infant mortality; Now, therefore, The General Assembly of North Carolina enacts:

SECTION 1.(a) There is appropriated from the General Fund to the Department of Health and Human Services, Division of Health Services, the sum of one million three hundred eighty-seven thousand dollars (\$1,387,000) for the 2010-2011 fiscal year to be allocated as follows:

- (1) \$350,000 for the March of Dimes to continue to provide outreach, educational materials, and vitamins through the NC Folic Acid Campaign to reduce the occurrence of neural tube defects.
- (2) \$330,000 for the East Carolina School of Medicine to continue to operate a high-risk maternity clinic to improve the birth outcomes of women in the 29 eastern counties.
- (3) \$150,000 for the Healthy Start Foundation to continue to provide education and public awareness through the Safe Sleep Campaign to reduce the occurrence of SIDS and sleep-related suffocations.
- (4) \$97,000 to the UNC School of Medicine to continue to provide education and progesterone to reduce preterm births among low-income non-Medicaid women who have already experienced at least one preterm birth.
- (5) \$460,000 for the Healthy Start Foundation to continue to provide education, outreach, and the distribution of materials to reduce infant mortality by improving maternal health prior to and during pregnancy.

SECTION 1.(b) The Department of Health and Human Services, Division of Medical Assistance, shall not lower the current provider reimbursement rates for prenatal and maternity care, as well as maternity care coordination.

SECTION 2. This act becomes effective July 1, 2010.



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