

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1989

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SENATE BILL 658*

Short Title: Infant Mortality Prev. Funds.

(Public)

Sponsors: Senators Marvin; Allran, Barker, Basnight, Block, Bryan, Cochrane, Conder, Ezzell, Goldston, Guy, Harris, Hunt of Durham, Hunt of Moore, Johnson of Wake, Kaplan, Martin of Guilford, Murphy, Odom, Parnell, Richardson, Sands, Smith, Speed, Staton, Tally, Walker, and Ward.

Referred to: Appropriations.

March 27, 1989

A BILL TO BE ENTITLED

AN ACT TO APPROPRIATE FUNDS TO REDUCE INFANT MORTALITY AND
INFANT MORBIDITY IN NORTH CAROLINA.

Whereas, the State of North Carolina has the sixth worst infant mortality rate in this nation; and

Whereas, the infant mortality rate increased from 11.6 deaths to 12.1 deaths per 1000 live births between 1986 and 1987, a four and one-third percent (4 1/3%) increase; and

Whereas, babies who are born prematurely or weigh less than five and one-half pounds at birth are 40 times more likely to die within the first month of life as are normal weight babies; and

Whereas, the cost of intensive care of one low birth weight baby costs from thirty thousand dollars (\$30,000) to several hundred thousand dollars in our premature nurseries to save its life; and

Whereas, premature infants are at a high risk of long-term handicapping conditions including mental retardation, cerebral palsy, and blindness, which require continued support from tax dollars for their care; and

Whereas, the cost of intensive neonatal care for five low birth weight babies would pay for the prenatal care of 149 women; and

1 Whereas, demonstration projects and medical experience have shown that the
2 number of premature infants or low birth weight babies can be dramatically reduced by
3 early and continuous prenatal care throughout pregnancy; and

4 Whereas, 13 counties no longer provide prenatal care in their public health
5 clinics and the other 87 health departments have inadequate facilities and staff to serve
6 prenatal patients in a timely manner; and

7 Whereas, many family practitioners and obstetricians no longer provide
8 prenatal care and deliver babies because of high malpractice insurance costs; and

9 Whereas, the Task Force of the North Carolina Institute of Medicine, after a
10 two-year review of the infant mortality and infant morbidity problem in North Carolina,
11 has focused on the importance of preventing prematurity by identifying high risk
12 mothers, providing early and adequate prenatal care, and intensively educating the
13 patients and providers about the costliness of failure to prevent premature births; Now,
14 therefore,

15 The General Assembly of North Carolina enacts:

16 Section 1. There is appropriated from the General Fund to the Department of
17 Human Resources, Division of Health Services, the sum of three hundred thousand
18 dollars (\$300,000) for the 1989-90 fiscal year and the sum of six hundred thousand
19 dollars (\$600,000) for the 1990-91 fiscal year to employ four teams of obstetricians and
20 nurses, trained in obstetrics, to serve critically underserved counties in the eastern and
21 western portions of North Carolina.

22 Sec. 2. There is appropriated from the General Fund to the Department of
23 Human Resources, Division of Health Services, the sum of one million dollars
24 (\$1,000,000) for the 1989-90 fiscal year and the sum of two million dollars
25 (\$2,000,000) for the 1990-91 fiscal year to provide discretionary funds to county local
26 health departments to fill gaps including preconceptional, prenatal, delivery, and
27 postnatal services, to low income women. Such funds may be used for transportations,
28 staffing, space, special tests, services and medications as needed.

29 Sec. 3. There is appropriated from the General Fund to the Department of
30 Human Resources, Division of Health Services, the sum of one hundred twenty
31 thousand dollars (\$120,000) for the 1989-90 fiscal year and the sum of one hundred
32 twenty thousand dollars (\$120,000) for the 1990-91 fiscal year to establish one
33 community consultant in each of the four DHR Regional offices. These consultants will
34 work with each county, in their region, to identify needed services for care of women
35 from preconception to the first postpartum month. They will work with community
36 organizations, churches, county commissioners, businesses, schools to form a
37 connecting link to State maternal and child services.

38 Sec. 4. There is appropriated from the General Fund to the Department of
39 Human Resources, Division of Health Services, the sum of one hundred thousand
40 dollars (\$100,000) for the 1989-90 fiscal year and the sum of one hundred sixty
41 thousand dollars (\$160,000) for the 1990-91 fiscal year to pay for an educational
42 program, an awareness campaign through TV, radio, and news media, to alert the
43 general public, the patients, and the physicians of the urgency of providing early,
44 continuous, good prenatal care to all women of childbearing age. Continuing efforts will

1 be made to prevent teenage pregnancy, pregnancy in women on alcohol or drugs, and
2 other high risk conditions.

3 Sec. 5. This act shall become effective July 1, 1989.