

House Bill 1499

By: Representatives Cannon of the 58th, Park of the 107th, Beverly of the 143rd, Roberts of the 52nd, Bennett of the 94th, and others

A BILL TO BE ENTITLED
AN ACT

1 To amend Chapter 2A of Title 31 of the Official Code of Georgia Annotated, relating to the
2 Department of Public Health, so as to provide for a grant program to prevent maternal
3 mortality by managing risk factors, conditions, and circumstances; to establish the Maternal
4 Mortality Prevention Grant Program; to provide for the Department of Public Health to
5 administer such program; to provide for grant criteria; to provide for certain services; to
6 provide for an annual report; to provide for legislative findings; to provide for related
7 matters; to repeal conflicting laws; and for other purposes.

8 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

9 **SECTION 1.**

10 The Georgia General Assembly finds that:

- 11 (1) The United States has the highest maternal mortality rate in the developed world, and
12 Georgia is among the states with the highest maternal mortality rate in the United States;
13 (2) In Georgia, the Maternal Mortality Review Committee determined that 85 percent of
14 pregnancy related deaths in 2019 to 2021 were preventable, and 68 percent of the
15 pregnancy related deaths occurring after delivery in 2018 to 2020 were insured by
16 Medicaid at the time of delivery;

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- 17 (3) All women in Georgia should have equitable access to health and healthcare before,
 18 during, and after pregnancy to eliminate preventable maternal deaths in Georgia; and
 19 (4) Georgia is dedicated to saving women's lives by encouraging innovations, promoting
 20 best practices, and providing and expanding free or lower cost services, including
 21 healthcare, education, nutrition, housing, and transportation, to pregnant women, women
 22 within a year of pregnancy termination, and mothers of newborns and infants.

23

SECTION 2.

24 Chapter 2A of Title 31 of the Official Code of Georgia Annotated, relating to the Department
 25 of Public Health, is amended in Code Section 31-2A-16, relating to Maternal Mortality
 26 Review committee established, by revising subsection (c) as follows:

27 "(c) The committee shall:

- 28 (1) Identify maternal death cases;
 29 (2) Review medical records and other relevant data;
 30 (3) Contact family members and other affected or involved persons to collect additional
 31 relevant data;
 32 (4) Consult with relevant experts to evaluate the records and data;
 33 (5) Make determinations regarding the preventability of maternal deaths;
 34 (6) Develop recommendations for the prevention of maternal deaths; ~~and~~
 35 (7) Disseminate findings and recommendations to policy makers, ~~health-care~~ healthcare
 36 providers, ~~health-care~~ healthcare facilities, and the general public; ~~and~~
 37 (8) Advise and make recommendations to the Department of Public Health in its
 38 administration of the Maternal Mortality Prevention Grant Program, as provided for in
 39 Code Section 31-2A-16.1."

40

SECTION 3.

41 Said chapter is further amended by adding a new Code section to read as follows:

42 "31-2A-16.1.

43 (a) There is established the Maternal Mortality Prevention Grant Program. The purpose
44 of such program shall be to reduce maternal mortality in the state by awarding grants to
45 nonprofit organizations that provide products and services to pregnant women, postpartum
46 women, and women within one year of the end of pregnancy. Such program is created as
47 a separate fund in the state treasury and shall be expended only as provided in this Code
48 section.

49 (b) The department shall oversee such program, including setting grant criteria, evaluating
50 grant applications, awarding grants, monitoring each grant recipient's compliance,
51 maintaining proper records, and assessing the success of each grant recipient's program.
52 The department shall post the grant criteria, application, application process, award
53 recipients, and grant assessment on its public website.

54 (c) The department may solicit data, opinions, and recommendations on best practices,
55 procedures, and services to prevent maternal mortality from the Maternal Mortality Review
56 Committee and from healthcare providers, experts, hospitals, perinatal facilities, neonatal
57 facilities, educational institutions, community based organizations, and other like resources.
58 Winning grant recipients shall demonstrate new and innovative approaches to providing
59 products and services to pregnant women, postpartum women, and women within one year
60 of the end of pregnancy, such approaches to include, but not be limited to:

61 (1) Healthcare innovations and initiatives, including the use of technology;

62 (2) Programs addressing language, race, and cross-cultural barriers;

63 (3) Healthcare services, including mental health;

64 (4) Nutritional services, including healthy food, clean water, and vitamins and
65 supplements;

66 (5) Housing, education, transportation, and employment assistance;

67 (6) Childcare assistance and parenting education;

68 (7) Community and family engagement; and

69 (8) Financial and economic innovations, education, and assistance.
70 (d) The commissioner of public health shall submit an annual report summarizing the grant
71 program to the chairpersons of the House Committee on Public Health and the Senate
72 Health and Human Services Committee no later than July 1, 2025, and annually thereafter.
73 Such report shall include the number of applications received, the number of grants
74 awarded, the subject of the grants awarded, and such other information as the chairperson
75 of each committee shall desire.
76 (e) This Code section is subject to specific appropriation by the General Assembly.
77 However, the department is authorized to accept donations, gifts, and federal and private
78 grants."

79 **SECTION 4.**
80 All laws and parts of laws in conflict with this Act are repealed.