UNOFFICIAL COPY 22 RS BR 235

1	AN ACT relating to the Perinatal Advisory Committee.
2	Be it enacted by the General Assembly of the Commonwealth of Kentucky:
3	→SECTION 1. A NEW SECTION OF KRS 211.672 TO 211.678 IS CREATED
4	TO READ AS FOLLOWS:
5	(1) (a) The secretary shall appoint the Perinatal Advisory Committee to make
6	recommendations for the improvement of the following statewide health
7	status indicators that relate to pregnancy and perinatal care:
8	1. Infant mortality;
9	2. Preterm birth;
0	3. Substance abuse during pregnancy;
1	4. Neonatal Abstinence Syndrome (NAS);
2	5. Maternal mortality; and
3	6. Maternal and postpartum depression.
4	(b) The advisory committee shall make recommendations on evidence-based
5	guidelines and programs to improve the outcomes of pregnancies, including
6	ways to improve coordination of existing programs operated by the cabinet
17	and private organizations.
8	(2) The advisory committee shall be attached to the cabinet for administrative
9	purposes and be composed of the following members:
20	(a) The director of the Division of Maternal and Child Health, Department for
21	Public Health, who shall serve as chair of the advisory committee;
22	(b) The director of the Division of Maternal-Fetal Medicine, University of
23	Kentucky College of Medicine;
24	(c) The director of the Division of Maternal-Fetal Medicine, University of
25	Louisville School of Medicine;
26	(d) The director of a maternal-fetal medicine program from a pediatric
27	teaching hospital with a Level III NICU that has a minimum of thirty (30)

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1		beds, to be selected by the secretary;
2	<u>(e)</u>	The director of the Division of Neonatology, University of Kentucky College
3		of Medicine;
4	<u>(f)</u>	The director of the Division of Neonatology, University of Louisville School
5		of Medicine;
6	<u>(g)</u>	One (1) practicing obstetrician from rural practice in a hospital with a Level
7		I nursery, to be selected by the secretary;
8	<u>(h)</u>	One (1) practicing obstetrician from rural practice in a hospital with a Level
9		II neonatal intensive care unit (NICU), to be selected by the secretary;
10	<u>(i)</u>	One (1) practicing pediatrician from rural practice in a hospital with a
11		Level I nursery, to be selected by the secretary;
12	<u>(j)</u>	One (1) practicing pediatrician or one (1) practicing neonatologist from
13		rural practice in a hospital with a Level II NICU, to be selected by the
14		secretary;
15	<u>(k)</u>	One (1) practicing pediatrician or one (1) practicing neonatologist from a
16		non-university urban practice hospital with a Level II NICU, to be selected
17		by the secretary;
18	<u>(l)</u>	One (1) practicing pediatrician or one (1) practicing neonatologist from a
19		pediatric teaching hospital with a Level III NICU that has a minimum of
20		thirty (30) beds, to be selected by the secretary;
21	<u>(m)</u>	The president of the Kentucky Perinatal Association or designee;
22	<u>(n)</u>	The president of the Kentucky Academy of Family Practice or designee;
23	<u>(0)</u>	The president of the Kentucky Chapter of the American Academy of
24		Pediatrics or designee;
25	<u>(p)</u>	The president of the Kentucky Section of the American College of
26		Obstetricians and Gynecologists or designee;
27	(q)	The president of the Kentucky Chapter of the Association of Women's

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1		Health, Obstetric, and Neonatal Nurses or designee;
2		(r) The chair of the Kentucky Medical Association's Committee on Maternal
3		and Neonatal Health or designee;
4		(s) The chair of the Kentucky Medical Association's Committee on Maternal
5		Mortality or designee;
6		(t) One (1) board-certified pediatric surgeon, to be selected by the secretary;
7		(u) One (1) board-certified pediatrician specializing in medical genetics, to be
8		selected by the secretary;
9		(v) One (1) perinatal social worker, to be selected by the secretary; and
10		(w) One (1) representative from a non-university hospital with a Level II or a
11		Level III NICU, selected by the secretary.
12	<u>(3)</u>	Other subject matter experts may be represented as members of the advisory
13		committee at the discretion of the secretary.
14	<u>(4)</u>	The advisory committee shall meet at least quarterly and shall hold its first
15		meeting no later than thirty (30) days after the effective date of this Act.
16	<u>(5)</u>	The advisory committee shall submit an annual report of its activities and
17		recommendations by December 1 of each year to the secretary, the commissioner,
18		and the Interim Joint Committee on Health, Welfare, and Family Services.