

1 State of Arkansas  
2 95th General Assembly  
3 Regular Session, 2025  
4

# A Bill

HOUSE BILL 1869

5 By: Representative L. Johnson  
6 By: Senator Irvin  
7

## For An Act To Be Entitled

8  
9 AN ACT TO CREATE THE MATERNAL OUTCOMES MANAGEMENT  
10 SYSTEM WITHIN THE DEPARTMENT OF HEALTH; TO ORGANIZE  
11 MATERNAL HEALTH RESOURCES; AND FOR OTHER PURPOSES.  
12  
13

## Subtitle

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15 TO CREATE THE MATERNAL OUTCOMES  
16 MANAGEMENT SYSTEM WITHIN THE DEPARTMENT  
17 OF HEALTH; AND TO ORGANIZE MATERNAL  
18 HEALTH RESOURCES.  
19

20 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:  
21

22 SECTION 1. Arkansas Code Title 20, Chapter 16, is amended to add an  
23 additional subchapter to read as follows:

24 Subchapter 26 – Maternal Outcomes Management System  
25

26 20-16-2601. Legislative findings and intent.

27 (a) The General Assembly finds that:

28 (1) In this state, the maternal mortality rate has consistently  
29 surpassed the national average, with an estimated ninety-two percent (92%) of  
30 maternal deaths being preventable;

31 (2) Approximately seventy-five (75) to one hundred (100) women  
32 in this state die from pregnancy-related complications each year,  
33 underscoring the urgency of effective maternal health interventions;

34 (3) This state has successfully addressed trauma and stroke-  
35 related mortality issues by developing a statewide system of care that has  
36 resulted in a fifty percent (50%) reduction in preventable trauma mortality



1 and a move from fiftieth in the nation in 2011 for stroke mortality to  
 2 thirty-seventh in 2021; and

3 (4) It is critical to the health of the residents of this state  
 4 to ensure that every mother in this state has access to the resources and  
 5 care that she needs.

6 (b) It is the intent of this subchapter to establish a comprehensive  
 7 statewide system of care addressing maternal health by organizing resources,  
 8 educating providers and patients, incentivizing best practices, and  
 9 collecting critical data to drive improvement.

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11 20-16-2602. Maternal Outcomes Management System.

12 (a) The Department of Health shall create a comprehensive statewide  
 13 system of care addressing maternal health to be called the "Maternal Outcomes  
 14 Management System".

15 (b) The Maternal Outcomes Management System shall without limitation:

16 (1)(A) Research and organize maternal health resources.

17 (B) The Department of Health, in conjunction with other  
 18 state agencies as appropriate, shall maintain on the website of the  
 19 Department of Health resources pertaining to maternal health including  
 20 without limitation information regarding:

21 (i) Enrollment in the Arkansas Medicaid Program;

22 (ii) Lactation education;

23 (iii) Provider access;

24 (iv) Transportation resources;

25 (v) Maternal health education; and

26 (vi) Local community support services;

27 (2) Provide education to patients and clinicians regarding  
 28 maternal health issues;

29 (3) Incentivize best practices for maternal health through the  
 30 grant program described in § 20-16-2603;

31 (4) In conjunction with the Arkansas Hospital Association, the  
 32 Department of Human Services, and the Department of Health, collect data  
 33 concerning maternal health from birthing and delivery hospitals to promote  
 34 best practices and to identify opportunities for improvement in maternal  
 35 health care;

36 (5) Develop a platform for structured peer review; and

1           (6) Coordinate care through the continuum of services needed to  
2 ensure the best maternal health outcomes.

3           (c) The activities of the Maternal Outcomes Management System under  
4 this section and the additional requirements under this subchapter are  
5 contingent upon the availability and appropriation of funding.

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7           20-16-2603. Grants for birthing and delivery hospitals – Designation  
8 system.

9           (a)(1) As part of the Maternal Outcomes Management System, the  
10 Department of Health shall establish a grant program for birthing and  
11 delivery hospitals that includes a designation system for birthing and  
12 delivery hospitals based on the individual hospital’s capability to provide  
13 clinical care for pregnant women.

14           (2) The department shall:

15                   (A) Accept applications from birthing and delivery  
16 hospitals to participate in the grant program under subdivision (a)(1) of  
17 this section;

18                   (B) Determine conditions for designation in the grant  
19 program under subdivision (a)(1) of this section; and

20                   (C) Set the time frame for review and renewal of the  
21 applications under subdivision (a)(2)(A) of this section.

22           (3) The designation system for birthing and delivery hospitals  
23 described in subdivision (a)(1) of this section shall:

24                   (A) Be in accordance with the levels of maternal care from  
25 the American College of Obstetricians and Gynecologists, as existing on  
26 January 1, 2025; and

27                   (B) Evaluate the capabilities of a hospital to deliver  
28 high-quality maternity care and ensure that all mothers receive the  
29 appropriate level of care.

30           (4) The birthing and delivery hospitals under subdivision (a)(1)  
31 of this section shall be organized into the appropriate hospital regions to  
32 meet regularly as determined by the department to discuss maternal health  
33 data and to provide a forum for regional peer review and performance feedback  
34 to and from the department and the birthing and delivery hospitals.

35           (b) To qualify for a grant under the grant program established under  
36 subsection (a) of this section, a birthing and delivery hospital shall meet

1 requirements set by the department including without limitation:

- 2 (1) Community outreach and education;
- 3 (2) Clinician education on maternal health;
- 4 (3) Peer review of all birthing and delivery complications;
- 5 (4) Participation in regional meetings of birthing and delivery
- 6 hospitals;
- 7 (5) An on-site maternal health coordinator;
- 8 (6) Local site visits from inspectors of the department; and
- 9 (7) Achievement of certain clinical metrics consistent with

10 evidence-based practices proven to improve maternal health outcomes.

11 (c) A grant under this section shall be distributed in a manner that  
 12 provides the greatest financial support to birthing and delivery hospitals  
 13 with the fewest resources.

14 (d) The department may promulgate rules to implement this section.

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 16 20-16-2604. MOMS Care Connect – Coordinating call center.

17 The Department of Health shall establish a call center to be called the  
 18 "MOMS Care Connect" to operate in conjunction with the Arkansas Trauma Call  
 19 Center and to coordinate transfers of pregnant women between hospitals to  
 20 ensure an appropriate level of care is provided.

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 22 20-16-2605. Postpartum Support Hotline – Post-delivery call center.

23 (a)(1) The Department of Health shall establish a call center to be  
 24 called the "Postpartum Support Hotline" to proactively reach out to mothers  
 25 post-delivery.

26 (2) The call center established in this section shall be  
 27 separate from MOMS Care Connect established under § 20-16-2604.

28 (3) The department may partner with another state entity or an  
 29 institution of higher education to establish the call center established in  
 30 this section.

31 (b) The call center under this section shall screen mothers through a  
 32 standardized questionnaire developed by the department to determine which  
 33 mothers need follow-up information, including without limitation information  
 34 regarding:

- 35 (1) The mental well-being of the mother;
- 36 (2) Access to follow-up healthcare;

- (3) Lactation or feeding concerns;
- (4) Healthy sleep for infants; and
- (5) Screening for certain medical conditions.

(c) The call center under this section shall provide connections directly to resources to support mothers identified as needing follow-up information.

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