



# Ohio Legislative Service Commission

## Bill Analysis

Jennifer A. Parker

### S.B. 279

130th General Assembly  
(As Introduced)

**Sens.** Jones and Tavares

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## BILL SUMMARY

- Requires the Director of Health to establish and operate a two-year prenatal group health care pilot program that is based on the centering pregnancy model of care.
- Makes an appropriation.

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## CONTENT AND OPERATION

### Pilot program

Under the bill, the Director of Health must establish, no later than June 30, 2014, a prenatal group health care pilot program that is based on the centering pregnancy model of care developed by the Centering Healthcare Institute. The program is to be operated for two years at four federally qualified health centers or federally qualified health center look-alikes selected by the Director. Two participants must be located in a rural area and the other two, in an urban area.<sup>1</sup>

A "**federally qualified health center**" is a health center that receives a federal public health services grant or any other health center designated as such by the U.S. Health Resources and Services Administration. A "**federally qualified health center look-alike**" is a public or not-for-profit health center that meets the eligibility requirements to receive a federal public health services grant but does not receive that funding.<sup>2</sup>

The goals of the program include:

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<sup>1</sup> Section 1(A).

<sup>2</sup> R.C. 3701.047(A), not in the bill.

(1) Decreasing the number of infants born preterm (prior to 37 weeks of pregnancy) whose birth weight is less than 2,500 grams;

(2) Increasing the number of pregnant patients who begin prenatal care during their first trimester of pregnancy, consume appropriate amounts of folic acid, stop smoking, and are screened for depression, the human immunodeficiency virus (HIV), diabetes, and poor oral health;

(3) Increasing the number of women who breastfeed their infants.<sup>3</sup>

### **Selection of program participants**

The bill requires the Director to develop a process to be used in issuing a request for proposals (RFPs) to federally qualified health centers and federally qualified health center look-alikes in Ohio, receiving responses to the request, and evaluating the responses on a competitive basis. In the RFPs, the Director is to specify that a program participant must be able to demonstrate that it:

--Has space to comfortably host centering pregnancy groups consisting of up to 20 pregnant patients;

--Has adequate in-kind resources to contribute to the program, including existing medical staff;

--Has had, on average, at least 100 patients give birth annually in the years recently preceding the bill's effective date;

--Is able to identify at least one employee who champions the centering pregnancy model of care by gaining support for the model from peers and others;

--Is able to implement a centering pregnancy model of care quickly; and

--Meets any other requirements the Director establishes.

The Director is to convene a committee to assist in evaluating submitted proposals and selecting program participants. At least one member of the committee must represent the Ohio Association of Community Health Centers.<sup>4</sup>

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<sup>3</sup> Section 1(D).

<sup>4</sup> Section 1(B) and (C).

## Operation of the program

The Ohio Association of Community Health Centers is charged with assisting the Director in the program's operation. To that end, the Association must employ a part-time infant mortality program coordinator whose duties include providing technical assistance to program participants, collecting data regarding the program, and monitoring the program's success.<sup>5</sup>

## Reporting requirements

Beginning in 2015, the Director must prepare a written report no later than July 1 of each year that (1) summarizes the data that has been collected on the program in the preceding 12 months, (2) evaluates the program's achievement toward its goals, (3) makes recommendations for the program's future, and (4) provides any other information the Director considers appropriate. The report is to be submitted to the Governor and the General Assembly.<sup>6</sup>

## Appropriation

The bill appropriates \$500,000 from the GRF in both FY 2015 and FY 2016 for implementation of the program.<sup>7</sup>

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## HISTORY

ACTION	DATE
Introduced	02-12-14

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<sup>5</sup> Section 1(E).

<sup>6</sup> Section 1(F).

<sup>7</sup> Sections 2 and 3.

