

**GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2009**

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**SENATE DRS45021-LN-54 (2/5)**

Short Title:    Reduce Infant Mortality and Preterm Births. (Public)

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Sponsors:     Senator Purcell.

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Referred to:

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A BILL TO BE ENTITLED

AN ACT TO REDUCE INFANT MORTALITY AND REDUCE PRETERM BIRTHS, AS  
RECOMMENDED BY THE CHILD FATALITY TASK FORCE.

The General Assembly of North Carolina enacts:

**SECTION 1.** The Department of Health and Human Services, Division of Medical Assistance, shall seek a Medicaid 1115 waiver or implement other available Medicaid options to provide interconceptional coverage to low-income women with incomes below one hundred eight-five percent (185%) of the federal poverty guidelines who have given birth to a high-risk infant. A high-risk infant is defined as weighing less than 1500 grams, is born less than 34 weeks gestation, is born with a congenital anomaly, or who has died within the first 28 days of life.

**SECTION 2.** Interconceptional care shall be limited to two years following the birth of a high-risk infant, or until a subsequent birth, whichever comes first.

**SECTION 3.** The Division is authorized to develop a benefit package to improve interconceptional care to decrease poor birth outcomes in subsequent pregnancies.

**SECTION 4.** The Division shall provide estimates of the cost savings from improved birth outcomes that will offset the cost of providing Medicaid coverage to this targeted population.

**SECTION 5.** This act is effective when it becomes law.

