ILLINOIS DEPARTMENT OF PUBLIC HEALTH

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Meeting Minutes of:

Task Force on Infant and Maternal Mortality Among African Americans

Thursday, October 16, 2025 | 2:00 PM - 4:00 PM | Location: WebEx

Attendees

Members	Members	IDPH	Guest/Non-Voting Members
Present 1. Masinter, Lisa (Voting member) 2. Green, Lisa 3. Brodie, Paula 4. Burton, Glendean 5. Elam, Gloria 6. **Ellison, Angela (Chair)** 7. Floyd, Cheryl 8. Gray-Basley, Dara M. 9. Harth, Catherine 10. Julion, Virginia 11. Lee King, Patricia 12. **Milan-Alexander, Tamela (Co-Chair)**	**Not Present (Excused)** 1. Fleming, Shirley 2. James, Stephanie 3. Logan, Jeanine 4. Martin, Jasmine 5. Stoller, Ananya 6. Versher, Marie 7. Wheat, Santina 8. Johnson, Daniel	1. Aditi Patel 2. Alexander Smith 3. Joquine Nege 4. Kelly, Hillary 5. Leandra Diaz 6. Trishna Harris 7. Wang, Jessica	1. Cynthia Price 2. Jose Ortiz 3. Ellen Mason 4. Timika Anderson-Reeves 5. Anquenette Perkins 6. Jessica Wilkerson 7. Kelly Hubbard

MOTIONS

1. **Motion to approve Minutes from July 17, 2025**
   1st Masinter, Lisa, 2nd Green, Lisa, the group unanimously approved

2. **Motion to adjourn the meeting.**
   1st Harth, Catherine, 2nd Milan-Alexander, Tamela, the group unanimously approved.

AGENDA ITEMS

Call to Order & Roll Call

Milan-Alexander, Tamela called the meeting to order at 2:03 pm and roll call was conducted. Quorum was reached.

Review and Vote Minutes: 7/17/2025- VOTE

1st Masinter, Lisa, 2nd Green, Lisa, the group unanimously approved

IDPH UPDATE

- **IDPH Annual Mandatory Trainings** are **available now— Login:** https://OneNet.Illinois.gov/MyTraining **(5 Trainings) --Due 12/31/2025.**
- **Maternal Health Summit:** Save the Date, **Nov 18-19, 2025**- More details to come.
- **EMTALA** guidance has been updated, but Illinois state laws will continue to protect emergency and reproductive health services.
- **Budget for Fiscal Year 2026** shows Title V funding is reduced but not eliminated, with concerns over sustaining state-funded work.
- **Illinois Perinatal Regionalization Map of Hospitals (Levels of Care Virtual Map):** Any suggestions are welcome please email Cara.Bergo@Illinois.gov
- https://dph.illinois.gov/topics-services/life-stages-populations/maternal-child-family-health-services/perinatal-health/infant-mortality/perinatal-regionalization.html
- **2023-2024 Report to The General Assembly: Illinois Task Force on Infant and Maternal Mortality Among African Americans** https://dph.illinois.gov/about/annual-reports/immt/report-20232024.html
- IDPH has issued a letter advocating for **Narcan** availability in hospitals as part of the **Illinois DOPP program** to counter opioid overdoses. Illinois Saves Overdose https://share.google/8VbYcoZ6HSxDfg6XW
- **Maternal Health Blueprint: LIVE**
- Press Release: https://gov-pritzker-newsroom.prezly.com/gov-pritzker-releases-illinois-birth-equity-blueprint
- Document: https://dph.illinois.gov/content/dam/soi/en/web/idph/publications/idph/topics-and-services/life-stages-populations/maternal-child-family-health-services/maternal-health/blueprint-for-birth-equity-2025.pdf

TASK FORCE: 2026 NOMINATING COMMITTEE REPORT UPDATES

- Open Nominations.
- An email will be sent to all voting members asking for nominations.
- Nominations will be offered to all eligible voting members for fair and open participation.
- Subcommittees will elect their own Chairs and co-Chairs prior to the December meeting. Approval by the main task force will be needed.
- The task force is actively auditing membership to identify vacant roles by professional category (e.g., doulas, OB-GYNs, nurses) and will notify members who have been inactive or whose terms are ending.

PRESENTERS

Timika Anderson-Reeves: Home Visiting Program

- **Dr. Tamika Reeves Anderson** outlined that the program builds on existing lactation and doula services, now active and billing Medicaid.
- Illinois is preparing to launch a **Medicaid-reimbursed home visiting - November 1, 2024**, targeting both nurse-led and non-nurse-led evidence-based home visiting models.
- Nurse models like Family Connects and Nurse Family Partnership will be reimbursed at **$39.54 per 15-minute increment**, totaling **$158.16 per hour**.
- Non-nurse models: will receive **$26.12 per 15-minute increment**, or **$104.48 per hour**.
- A telehealth billing allows virtual home visits conducted within the Medicaid recipient's home environment.

- Enrollment into Medicaid requires certification and documentation from each home visiting organization; multiple state agencies (IDHS, IDEC, ISBE).
- **Town Hall on December 9th at 1 PM** to train providers on billing, enrollment, and program details, aiming for broad community engagement.
- Challenges remain, including the lack of universal MCO enrollment and billing complexities, particularly affecting smaller community-based organizations.

Shirley Fleming/Virginia Julion: Legislative/Policy Recommendations (listening sessions).

- The Community Engagement Subcommittee presented policy recommendations addressing **five key gaps** in Illinois maternal care:
    1. Inconsistent, sometimes disrespectful care
    2. Inadequate postpartum monitoring and response
    3. Fragmented discharge education
    4. Structural barriers (transportation, childcare, insurance)
    5. Desire for relational, trusted support (e.g., doulas)
- Recommendations include providing home blood pressure cuffs with 24/7 nurse line access and scheduling timely postpartum blood pressure and follow-up visits.
- Discharge education should use plain language and the teach-back method, with documentation integrated into electronic health records to ensure comprehension and follow-up.
- Universal community screening each trimester and up to one year postpartum, along with navigation for transportation, childcare, and medical benefits, should be expanded to all insurance types.
- The group recommended expanding access to community health workers, doulas, midwives, and peer support groups, and recognizing family and support persons' roles during medical visits.
- Childcare vouchers: Enhanced telehealth options beyond audio only, and warm handoffs between providers respecting patient preferences.
- Accountability measures urge IDPH to establish statewide standards and audits, Medicaid to reimburse support services, and healthcare facilities to operationalize training and report stratified quarterly metrics targeting equity gaps.
- The subcommittee stressed the need to acknowledge ongoing disrespectful care and the necessity of culturally appropriate education, highlighting the power of navigators in bridging gaps post-discharge.

BYLAWS REVISIONS—UPDATES

- IDPH legal reviewed and approved the current bylaws permitting two consecutive terms, but the group chose to revise to avoid losing 80% of members. Who simultaneously started in 2020.
- **Updated Membership Terms**: The Main Task Force plans to finalize the bylaws with the updated membership terms during the December 2025 meeting, reflecting the consensus for membership renewal practices.
    1. Chairs and Co-Chair's remain subject to term limits, ensuring leadership rotation while general members have ongoing eligibility with periodic check-ins.
    2. The task force will send emails prompting members to confirm their interest every three years, creating a manageable renewal process and helping identify vacancies.
    3. Only **22 appointed voting members** have decision rights; other attendees are guests without voting privileges, clarifying quorum and voting procedures to avoid confusion.

SUB-COMMITTEE UPDATES:

- The Main Task Force expects a detailed updates from the subcommittees for the December 2025 meetings, start planning a strategic plan.
- The subcommittees are to conduct meetings to elect subcommittee-specific Chairs and co-Chairs; submit nominations to Task Force for final approval.

A. COMMUNITY ENGAGEMENT

Sub Listening Sessions Report:

- Provided update with presentation: Legislative/Policy Recommendations (note above).

B. PROGRAMS and BEST PRACTICES

- The **Programs and Best Practices Subcommittee** is resuming meetings with an upcoming session on October 28th to continue reviewing state-led maternal health programs and gather insights for future recommendations.
- They are collecting evidence from administrative to refine program priorities.

C. SYSTEMS

- The Systems Subcommittee formed focused workgroups in late August to address access to care, specifically targeting social determinants: homelessness and food insecurity.
- The group meets biweekly and has secured expert input on medical workforce diversity pathways.
- Preliminary reports will be prepared for the end-of-year task force report, aiming to highlight structural barriers affecting maternal health equity.
- The group faces challenges accessing current demographic data due to recent changes but continues to utilize relevant older data, emphasizing the urgency of addressing these determinants.

EVENTS/COMMUNITY SHARING:

- **Town Hall on December 9th at 1 PM** to train providers on billing, enrollment, and program details, aiming for broad community engagement.

NEW BUSINESS:

- An email will be sent to all eligible voting members soliciting interest as a Chair or Co-Chair positions.
- A special emergency meeting is planned for **11/20/25 at 2 PM** to finalize nominations, followed by elections in December 2025.
- All members: Respond promptly to nomination interest emails; attend emergency November 20 meeting; prepare for December leadership elections.

ADJOURNMENT: With nothing further to discuss, Harth, Catherine made a motion to adjourn, Milan-Alexander, Tamela seconded the motion, and the group unanimously approved.