



**Infant and Maternal Mortality Task Force Among African Americans (IMMT)  
Systems Subcommittee  
Friday, October 30, 2020  
1:30 pm-2:00 pm (cst)**

**Meeting Minutes**

**Present**

Ann Border  
Glendean Burton  
Shondra Clay  
Jessica Davenport-Williams  
Arden Handler  
Catherine Harth  
Jessica Lamberson

Cindy Mitchell  
Timika Anderson Reeves  
Cynthia Wilson

**IDPH**

Kenya McRae  
Alexander Smith

***Virtual Meeting to occur via Cisco WebEx***

**Video Conference:**

Meeting number: 133 283 4003

Password: 9xMmJHiFQ33

<https://illinois.webex.com/illinois/j.php?MTID=me7ff363655a0f63de138223b85f48d71>

**Join by phone:**

+1-415-655-0002 US Toll

Access code: 133 283 4003

**Call to Order**

The subcommittee meeting began at 1:33 pm. Roll was taken, and the agenda reviewed.

**Approval of Minutes**

Minutes from the October 12, 2020 meeting were approved. Ann Borders made the motion to approve, Cindy Mitchell seconded the motion, and the minutes were unanimously approved.

**Discussion and Voting on Strategies and Activities**

The group reviewed the results of the strategy ranking exercise.

**Strategies considered:**

- Support the reimbursement of services provided by Doula's, Breastfeeding Support Counselors, Certified Lactation Counselors, and Community Health Workers (with the exclusion of lay midwives).

- Support the un-bundling Medicaid reimbursement for OB care, separating billing/reimbursement for postpartum health visits from prenatal and delivery services.
- Using patient data collected from JACO and patient satisfaction surveys broken down by race/ethnicity to drive equity and quality dashboards.
- Expanding acceptability of telehealth for reimbursement, establish standards of care utilizing telehealth as modality of contact and making sure all patients have access.
- Enhancing the Birth Equity Initiative to go beyond current focus of hospitals to outpatient settings such as FQHCs.
- Protect and support the range of comprehensive reproductive health services for all women of reproductive age in Illinois, in all forms of health coverage, which includes reducing barriers to access of contraception of choice and allowing access through various medical points of contact.
- Collaborate with MCO's and private insurance groups and state officials to expand the work of MCO's to help address Social Determinants of Health - Expanding scope of work of MCO's to include resources and efforts around SDOH within the communities they cover.
- Ensure provider education (equity though out the state by ensuring that providers have the same level of competency and need for enforcement) - topics such as Trauma Informed Care, Implicit Bias, Racial Equity and impact of these issues on health and health outcomes.
- Review current state activities to address Maternity Care deserts in Illinois and identify solutions and accountability.

#### Voting Results:

	Reimbursement of Services	Unbundling of OB Care	Equity and Quality Dashboards	Telehealth	Birth Equity Initiative	Comprehensive Reproductive Health Services	MCO's and Private Insurance	Provider Education	Maternity Care Deserts
<b>Voter 1</b>	5	9	2	1	4	7	6	3	8
<b>Voter 2</b>	2	1	7	8	3	4	5	6	9
<b>Voter 3</b>	6	7	5	3	8	4	9	1	2
<b>Voter 4</b>	2	1	8	7	4	3	6	5	9
<b>Voter 5</b>	1	9	8	7	5	2	3	4	6
<b>Voter 6</b>	3	2	9	4	5	8	7	1	6
<b>Voter 7</b>	6	7	9	4	2	5	3	1	8
<b>Voter 8</b>	7	1	9	2	4	5	8	6	3
<b>Voter 9</b>	2	3	4	7	8	5	6	9	1
<b>Voter 10</b>	9	2	8	1	7	5	6	3	4
<b>Mean</b>	4.3	4.2	6.9	4.4	5.0	4.8	5.9	3.9	5.6
<b>Mode</b>	2	1	8	7	4	5	6	1	8
<b>Final Ranking</b>	3	2	9	4	6	5	8	1	7

Members indicated that they liked the strategies and thought the ranking process was effective. Another member indicated that she felt some of the strategies reflected strategies adopted by other task forces and subcommittees. This was a nice development because there is potential for synergy between the groups.

The group agreed to put forth the following strategies:

1. Ensure provider education (equity though out the state by ensuring that providers have the same level of competency and need for enforcement) - topics such as Trauma Informed Care, Implicit Bias, Racial Equity and impact of these issues on health and health outcomes.
2. Support the un-bundling Medicaid reimbursement for OB care, separating billing/reimbursement for postpartum health visits from prenatal and delivery services.
3. Support the reimbursement of services provided by Doulas, Breastfeeding Support Counselors, Certified Lactation Counselors, and Community Health Workers (with the exclusion of lay midwives).
4. Given COVID 19, the increased prevalence maternity deserts and rural maternal health crisis, expand the acceptability of telehealth for reimbursement, establish standards of care utilizing telehealth as modality of contact and making sure all patients have access.

### **Public Comments**

There were no public comments.

### **Next Steps**

Kenya will send Glendean language regarding unbundling for strategy #2. Kenya will also pull information from I PROMOTE IL action steps to try to align the relevant strategies.

### **Adjournment**

With nothing further to discuss, the meeting was adjourned at 2:08 pm.