



Sen. Elgie R. Sims, Jr.

Filed: 5/20/2019

10100HB2895sam001

LRB101 08505 RPS 60914 a

1 AMENDMENT TO HOUSE BILL 2895

2 AMENDMENT NO. _____. Amend House Bill 2895 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Department of Public Health Powers and
5 Duties Law of the Civil Administrative Code of Illinois is
6 amended by adding Section 2310-223 as follows:

7 (20 ILCS 2310/2310-223 new)

8 Sec. 2310-223. Obstetric hemorrhage and hypertension
9 training.

10 (a) As used in this Section, "birthing facility" means (1)
11 a hospital, as defined in the Hospital Licensing Act, with more
12 than one licensed obstetric bed or a neonatal intensive care
13 unit; (2) a hospital operated by a State university; or (3) a
14 birth center, as defined in the Alternative Health Care
15 Delivery Act.

16 (b) The Department shall ensure that all birthing

1 facilities conduct continuing education yearly for providers
2 and staff of obstetric medicine and of the emergency department
3 and other staff that may care for pregnant or postpartum women.
4 The continuing education shall include yearly educational
5 modules regarding management of severe maternal hypertension
6 and obstetric hemorrhage for units that care for pregnant or
7 postpartum women. Birthing facilities must demonstrate
8 compliance with these education and training requirements.

9 (c) The Department shall collaborate with the Illinois
10 Perinatal Quality Collaborative or its successor organization
11 to develop an initiative to improve birth equity and reduce
12 peripartum racial and ethnic disparities. The Department shall
13 ensure that the initiative includes the development of best
14 practices for implicit bias training and education in cultural
15 competency to be used by birthing facilities in interactions
16 between patients and providers. In developing the initiative,
17 the Illinois Perinatal Quality Collaborative or its successor
18 organization shall consider existing programs, such as the
19 Alliance for Innovation on Maternal Health and the California
20 Maternal Quality Collaborative's pilot work on improving birth
21 equity. The Department shall support the initiation of a
22 statewide perinatal quality improvement initiative in
23 collaboration with birthing facilities to implement strategies
24 to reduce peripartum racial and ethnic disparities and to
25 address implicit bias in the health care system.

26 (d) The Department, in consultation with the Maternal

1 Mortality Review Committee, shall make available to all
2 birthing facilities best practices for timely identification
3 of all pregnant and postpartum women in the emergency
4 department and for appropriate and timely consultation of an
5 obstetric provider to provide input on management and
6 follow-up. Birthing facilities may use telemedicine for the
7 consultation.

8 (e) The Department may adopt rules for the purpose of
9 implementing this Section.

10 Section 99. Effective date. This Act takes effect January
11 1, 2020.".