

1 AN ACT concerning State government.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Department of Public Health Powers and
5 Duties Law of the Civil Administrative Code of Illinois is
6 amended by changing Section 2310-222 as follows:

7 (20 ILCS 2310/2310-222)

8 Sec. 2310-222. Obstetric hemorrhage and hypertension
9 training.

10 (a) As used in this Section:

11 "Birthing facility" means (1) a hospital, as defined in
12 the Hospital Licensing Act, with more than one licensed
13 obstetric bed or a neonatal intensive care unit; (2) a
14 hospital operated by a State university; ~~or~~ (3) a birth
15 center, as defined in the Alternative Health Care Delivery
16 Act; or (4) a birth center, as defined in the Birth Center
17 Licensing Act.

18 "Postpartum" means the 12-month period after a person has
19 delivered a baby.

20 (b) The Department shall ensure that all birthing
21 facilities have a written policy and conduct continuing
22 education yearly for providers and staff of obstetric medicine
23 and of the emergency department and other staff that may care

1 for pregnant or postpartum women. The written policy and
2 continuing education shall include ~~yearly educational modules~~
3 ~~regarding~~ management of severe maternal hypertension and
4 obstetric hemorrhage, addressing airway emergencies
5 experienced during childbirth, and management of other leading
6 causes of maternal mortality for units that care for pregnant
7 or postpartum women. Birthing facilities must demonstrate
8 compliance with these written policy and ~~education,~~ ~~and~~
9 ~~training~~ requirements.

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

1 (d) In order to better facilitate continuity of care, the
2 Department, in consultation with the Illinois Perinatal
3 Quality Collaborative, shall make available to all birthing
4 facilities best practices for timely identification and
5 assessment of all pregnant and postpartum women for common
6 pregnancy or postpartum complications in the emergency
7 department and for care provided by the birthing facility
8 throughout the pregnancy and postpartum period. The best
9 practices shall include the appropriate and timely
10 consultation of an obstetric or other relevant provider to
11 provide input on management and follow-up, such as offering
12 coordination of a post-delivery early postpartum visit or
13 other services that may be appropriate and available. Birthing
14 facilities shall incorporate these best practices into the
15 written policy required under subsection (b). Birthing
16 facilities may use telemedicine for the consultation.

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

19 (Source: P.A. 101-390, eff. 1-1-20; 102-558, eff. 8-20-21;
20 102-665, eff. 10-8-21.)

21 Section 99. Effective date. This Act takes effect upon
22 becoming law.