

MATERNAL AND CHILD HEALTH ADVISORY BOARD
MINUTES
May 5, 2023
9:00 AM

The Maternal and Child Health Advisory Board (MCHAB) held a public meeting on May 5, 2023, beginning at 9:00 A.M. at the following locations:

Call in Number: 1-775-321-6111

Access Code: 900 708 287#

Video: https://teams.microsoft.com/l/meetup-join/19%3ameeting_YWYzYzAzODItNTkzMS00N2ZjLWl4MzYtMWU1MGZIMTlhYWE4%40thread.v2/0?context=%7b%22Tid%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22Oid%22%3a%2264e2ca4f-1880-4f05-b138-a7bbc32db396%22%7d

BOARD MEMBERS PRESENT

Chair Linda Gabor, MSN, RN
Melinda Hoskins, MS, APRN, CNM, BCLC
Keith Brill, MD
Katie Hackler, BSN, RN, RNC-OB, CGN
Marsha Matsunaga-Kirgan, MD
Fatima Taylor, M.Ed., CPM

BOARD MEMBERS NOT PRESENT

Fred Schultz
Noah Kohn, MD
Lora Carlson, BSN, RNC-OB, C-FMC
Senator Marilyn Dondero Loop
Assemblywoman Claire Thomas

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH) STAFF PRESENT

Tami Conn, MPH, Section Manager, Maternal, Child, and Adolescent Health (MCAH) Section, CFCW
Kagan Griffin, MPH, RD, Manager, Title V Maternal and Child Health (MCH), MCAH, CFCW
Jazmin Stafford, Program Coordinator, Teen Pregnancy Prevention, MCAH, CFCW
Chayna Corpuz, MPH, Sexual Risk Avoidance Education Program Officer I, MCAH, CFCW
Tierra Sears, Administrative Assistant II, MCAH, CFCW
Vanessa Rauch, Account for Family Planning Program Coordinator, MCAH, CFCW
Desiree Wenzel, Office Manager, MCAH, CFCW
Lisa Light, Management Analyst II, DPBH, CFCW

OTHERS PRESENT

Ghasi Phillips-Bell, ScD, MS, Centers for Disease Control and Prevention (CDC) MCH Epidemiology Assignee to Nevada

Praseetha Balakrishnan, MS, Biostatistician II, Office of Analytics, Department of Health and Human Services (DHHS)

Cimi Neal, Patient Advocate, Unified Women's Health, Women's Health Associations of Southern Nevada

Denise Tanata, JD, Early Childhood Comprehensive Systems Director, The Children's Cabinet

Marcia O'Malley, Project Coordinator, Family Navigation Network (FNN), Nevada Center for Excellence in Disabilities (NCED), University of Nevada, Reno (UNR)

Mimi Annan, MPH, CHES, Management Analyst, Nevada Office of Minority Health and Equity (NOMHE)

April Cruda, Program Officer II, NOMHE

Cheryl Rude, Practice Administrator, Serenity Birth Center

April Clyde, CNM, Clinical Director, Serenity Birth Center

Joyce Abeng, MPH, Public Health Diversity Advisor, Larson Institute, UNR School of Public Health

Lisa Lottritz, MPH, RN, Division Director, Community and Clinical Health Services, WCHD

Tina Dortch, MPA, Program Manager, NOHME, DHHS, Director's Office

Tawanda McIntosh, M.A.Ed., Community Educator, Dignity Health, St. Rose Dominican

Jennifer Vanderlaan, Ph.D., MPH, CNM, FNP, Assistant Professor, University of Nevada, Las Vegas School of Nursing

Kelly Verling, RN, BSN, Washoe County Health District

Rachel Warner, School/Childcare Coordinator, Immunization Section, DPBH

1. Call to Order- Roll Call and Introductions- Linda Gabor, MSN, RN, Chair

Chair Linda Gabor called the May 5, 2023 meeting to order at 9:02 A.M.

Roll call was taken, and it was determined a quorum of the MCHAB was present.

Desiree Wenzel requested attendees identify themselves in the Microsoft Teams chat box.

2. FOR POSSIBLE ACTION: Approval of draft minutes from the Maternal and Child Health Advisory Board (MCHAB) meeting on February 10, 2023 – Linda Gabor, MSN, RN, Chair

KATIE HACKLER ENTERTAINED A MOTION TO APPROVE THE FEBRUARY 10, 2023, MEETING MINUTES. MELINDA HOSKINS SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

No Public Comment.

3. FOR POSSIBLE ACTION: Discussion and possible action to recommend new appointees and/or to renew expiring terms on July 1, 2023, for MCHAB members. Recommendations will be submitted to the Administrator for consideration of submission to the Nevada State Board of Health for consideration, pursuant to Nevada Revised Statutes (NRS) 442.133(2)a –

Kagan Griffin, MPH, RD

Kagan Griffin asked if Chair Gabor wanted to make a statement.

Chair Gabor stated she will be moving out of state in late June and will no longer qualify to be a member of the MCHAB. Chair Gabor stated it has been an honor to be Chair.

Ms. Griffin thanked Chair Gabor for her leadership and contribution to the Board.

Ms. Griffin stated this agenda item is to confirm if current members with expiring terms will continue their service on the Board or will be resigning. Ms. Griffin stated if the Board approves a motion, the MCAH Section will submit the recommendation for members interested in renewing their term with MCHAB to the Administrator. Dr. Brill, Fatima Taylor, Dr. Matsunaga-Kirgan, and Melinda Hoskins confirmed their intent to serve another term with MCHAB. Chair Gabor confirmed that she will be resigning. Ms. Griffin stated that since Katie Hackler's term is on a different cycle, her renewal will not be until next year. Ms. Griffin stated she will confirm with members not in attendance their intent to continue or resign.

Ms. Griffin stated an updated Request for Interest letter will be distributed after the meeting, as the number of open positions on the Board changed from four to three.

Chair Gabor reiterated the need for a motion for approval to renew expiring terms for Board members planning on continuing their service and to distribute the Request for Interest application to search for replacement members.

MELINDA HOSKINS ENTERTAINED A MOTION FOR LETTERS TO BE SENT TO THE NEVADA STATE BOARD OF HEALTH FOR ALL MCHAB MEMBERS REQUESTING TERM RENEWAL AND TO DISTRIBUTE THE REQUEST FOR INTEREST APPLICATION TO SEARCH FOR REPLACEMENT BOARD MEMBERS. DR. MARSHA MATSUNAGA-KIRGAN SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

No Public Comment.

4. FOR POSSIBLE ACTION: Discussion and possible action to elect MCHAB Chair and Vice Chair, pursuant to NRS 442.135. – Kagan Griffin, MPH, RD

Ms. Griffin stated that due to Chair Gabor's resignation, the Board will need to elect an MCHAB Chair. Ms. Griffin stated this could occur today, or the Board could choose to appoint someone to lead the meeting in August and vote during that meeting.

Melinda Hoskins stated that she would be willing to continue serving as Vice Chair and would lead the August meeting.

Chair Gabor asked for public comment, and there was none.

DR. KEITH BRILL ENTERTAINED A MOTION FOR MELINDA HOSKINS TO LEAD THE AUGUST MCHAB MEETING AND CONTINUE IN THE ROLE OF VICE CHAIR, AND TO ELECT A CHAIR AND VICE CHAIR FOR THE UPCOMING TERM AT THE AUGUST MEETING. FATIMA TAYLOR SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

No Public Comment.

5. INFORMATIONAL: Presentation on Doula Medicaid Implementation Efforts in Nevada– Joyce Abeng, MPH, Public Health Diversity Advisor, Larson Institute, University of Nevada, Reno, School of Public Health

Joyce Abeng presented on doula Medicaid reimbursement efforts across the United States and what is being worked on in Nevada. Ms. Abeng explained the benefits of doulas and the national doula reimbursement by State. Ms. Abeng stated the national average for reimbursement for doulas is \$1,224 for eight visits, and for Nevada the reimbursement rate is \$450 for seven visits. Ms. Abeng explained that Nevada Assembly Bill (AB) 283, introduced on March 14th, 2023, is seeking to increase reimbursement rates for doula services to \$1,500 for seven visits, as well as include incentive payments for doulas providing services in rural Nevada.

Dr. Brill asked if AB 283 is likely to pass, as his concern is that Nevada has one of the lowest Medicaid reimbursement rates in the country. Dr. Brill explained that he does not disagree that an increase is needed, but that the amount proposed in AB 283 seems very high, especially when compared to the average reimbursement rate for a physician for an entire global package for a delivery. Dr. Brill stated the proposed reimbursement rate for doulas is probably at or more than half of what a physician gets paid for an entire delivery. Dr. Brill explained that knowing Nevada has limited funds, while he would love to see more doula participation, the proposed rate in AB 283 does not seem realistic.

Ms. Abeng stated that AB 283 is going to Ways and Means but has not been scheduled yet. Ms. Abeng stated that while the reimbursement amount seems like a lot, when it is broken down into time spent doulas spend in labor and delivery as well as throughout pregnancy and postpartum, it is fair compensation. Ms. Abeng stated that with the current reimbursement rate and the amount of hours doulas spend with clients, the hourly rate is \$7.48, which is below the minimum wage.

Melinda Hoskins stated she would like Ms. Abeng to advocate for nurse midwives too, as the total package for prenatal, delivery, and postpartum care is \$1674 from Medicaid.

Chair Gabor stated that there seems to be concern in general around Medicaid reimbursement from all levels of care which can impact attracting providers to Nevada.

Ms. Griffin stated that there were updates to the slides for the presentation that were not included in the meeting packet, and the updated slides will be emailed and uploaded to the website at the conclusion of the meeting.

Dr. Matsunaga-Kirgan stated that doulas have been helpful in hospital during labor and delivery,

and while they are underpaid, the amount in this bill compared to how midwives and physicians are reimbursed could be a barrier to passing the bill.

No Public Comment

6. FOR POSSIBLE ACTION: Discussion and possible recommendations on legislation of the 82nd Legislative Session – Linda Gabor, MSN, RN, Chair

Chair Gabor explained that during the February MCHAB meeting bills were discussed that could be revisited and asked for the Board to provide comments on bills they want to support. Chair Gabor explained there was an attempt to have a Bill Draft Request (BDR) Subcommittee meeting on several dates but that due to a lack of quorum a meeting of the Subcommittee was unable to occur. Chair Gabor stated that the Board could draft a list of bills of importance and include comments that could be included in a letter to be sent to the Administrator of DPBH, or the Board could decide to discuss legislation but not send any letters.

Fatima Taylor stated it would be appropriate to review the bills discussed at the February meeting.

Chair Gabor stated that Senate Bill (SB) 38, which revises provisions relating to offences against children, had a motion approved to include the recommendation that penalties for crimes be the same regardless of the age of the victim.

Katie Hackler asked for clarification regarding the motion at the February meeting to write a letter of support of SB 38.

Chair Gabor explained that the Board itself must make recommendations on and provide information that is to be sent to the Administrator. Due to the Subcommittee meeting not occurring due to lack of quorum, this information has not been provided yet.

Ms. Griffin stated the Board will need to provide information on why the Board is in support of a particular bill to include in the letter, and the MCAH Section will draft the letter using that information to send to the Administrator.

Chair Gabor asked for Board comments for support of SB 38. There were no comments from the Board.

Chair Gabor stated discussion will move forward to SB 131 which passed the Senate on April 19th. Chair Gabor explained SB 131 revises provisions relating to reproductive health care and prohibits health care licensing board from disqualifying from licensure of disciplining a person for providing or assisting in the provision of certain reproductive health care services. Chair Gabor stated the concern is to ensure that Nevada is a safe harbor for women seeking reproductive care from licensed providers in this state from another state. Chair Gabor stated there are letters of support for SB 131 from other entities and explained there was a motion approved to support this bill in the February MCHAB meeting. Chair Gabor asked the Board for specific comments on why the Board supports SB 131.

Dr. Brill stated that a position of the Board is to not discipline providers of health care for performing healthcare services, and that is a policy the Board would support.

Ms. Taylor agreed with Dr. Brill's statement.

Chair Gabor asked for other comments.

DR. BRILL ENTERTAINED A MOTION FOR THE BOARD TO SUPPORT SB 131, AS THE MCHAB DOES NOT SUPPORT DISCIPLINE OF PROVIDERS FOR PROVIDING ESSENTIAL REPRODUCTIVE HEALTH CARE SERVICES IN THE STATE OF NEVADA. DR. MARSHA MATSUNAGA-KIRGAN SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

Chair Gabor asked for discussion on AB 168, which revises provisions governing the Maternal Mortality Review Committee (MMRC) in the Department of Health and Human Services to include provisions relating to fetal and infant mortality. Chair Gabor stated she will abstain from discussion on motions due to her current employment with the Washoe County Health District as a member of the Fetal Infant Mortality Review (FIMR) team. Chair Gabor stated AB 168 would make a statewide FIMR similar to the current MMRC.

Dr. Brill asked for clarification on if there was a FIMR in Nevada already?

Chair Gabor stated there is only a FIMR for Washoe County, not statewide.

Dr. Brill stated with that information, he strongly supports AB 168. Dr. Brill stated he was aware of discussions to add fetal and infant mortality into the MMRC, and he does not support that, since they are separate issues.

Chair Gabor stated AB 168 would not make one committee but would have two separate committees.

Melinda Hoskins stated that as a member of the MMRC she strongly supports AB 168 as she has seen issues come up that she wishes would be reviewed.

Dr. Brill stated the Board should support AB 168 because fetal and infant mortality deserves to be looked at statewide and not just a county level in similar thinking to the MMRC.

Ms. Hoskins stated the Board should include data on Nevada's status with regard to infant mortality and how a statewide FIMR would impact this.

Ms. Griffin stated the MCAH Section can put data into the letters of support if the Board wishes.

Ms. Hoskins asked what the mechanism of funding for the appropriate support staff would be?

Chair Gabor stated the fiscal note states "no fiscal impact." Chair Gabor asked if this is similar

to the MMRC where it was an unfunded mandate?

Ms. Hoskins stated for MMRC there was little funding and missed CDC funding the first cycle. This meant there was little funding in support doing interviews with families, which is an important part of the review process.

Dr. Matsunaga-Kirgan stated there should be a mention of financial support being needed for this committee for it to function well.

Tami Conn stated the Board could include a statement in the letter about funding if they think it should be attached to the bill.

DR. BRILL ENTERTAINED A MOTION FOR THE BOARD TO SUPPORT AB 168, AS THE MCHAB SUPPORTS A STATEWIDE FIMR SO FETAL AND INFANT MORTALITY CAN BE EXAMINED BEYOND A SINGULAR COUNTY LEVEL AND FOR THIS SUPPORT TO INCLUDE RECOMMENDATION FOR PROPER FINANCING TO ENSURE THE FIMR CAN FUNCTION PROPERLY. KATIE HACKLER SECONDED THE MOTION WHICH PASSED, WITH CHAIR GABOR ABSTAINING.

Chair Gabor asked for discussion on AB 6, which revises the provisions relating to the cost of health care. Chair Gabor stated she read in the Nevada Hospital Association letter on this bill that Nevada ranks 50th in the nation for access to health care. The Nevada Hospital Association's concern with AB 6 is that underserved areas will remain underserved because there is no money to serve them if the State's spending is limited based on benchmarking strategies. This could result in challenges with access to health care, accessing and maintaining health care facilities, and cost growth benchmarks being a disincentive for making capital growth expenditures. Chair Gabor stated the concern is that AB 6, if passed, would cement Nevada's last place ranking for decades. Chair Gabor stated another letter on behalf of the Nevada Association of Health Plans, Nevada Hospital Association, and Nevada State Medical Association opposed AB 6 because of concerns about health care cost growth targets the legislation would codify.

Dr. Brill asked if the Board could write a letter of opposition that states the Board supports comments of the Nevada Hospital Association and the Nevada State Medical Association?

Chair Gabor stated she believes so, and that the Nevada Hospital Association and Nevada State Medical Association did a great job on their letters and asked for clarification from the State.

Ms. Griffin stated that is appropriate. Ms. Conn also stated that the letter can state the Board opposes the legislation and supports the statements of the other organizations.

DR. BRILL ENTERTAINED A MOTION FOR THE BOARD TO OPPOSE AB 6, AS THE MCHAB SUPPORTS THE RECOMMENDATIONS OF OPPOSITION PRESENTED IN THE LETTER OF OPPOSITION ON BEHALF OF THE NEVADA HOSPITAL ASSOCIATION AND THE JOINT LETTER FROM THE NEVADA

ASSOCIATION OF HEALTH PLANS, THE NEVADA HOSPITAL ASSOCIATION, AND THE NEVADA STATE MEDICAL ASSOCIATION. DR. MARSHA MATSUNAGA-KIRGAN SECONDED THE MOTION WHICH PASSED, WITH FATIMA TAYLOR ABSTAINING.

Chair Gabor asked for additional bills the Board would like to present for discussion.

Ms. Taylor stated that the Aging and Disability Services Division is following AB 116 and is hoping to collaborate with MCAH on the resources and materials for the bill.

Chair Gabor asked if Ms. Taylor would like the Board to review the text of the bill and see if there are recommendations from the Board.

Ms. Taylor said that would be fine.

Ms. Hackler asked if AB 116 is just for Down Syndrome or if there could be language included for any other aneuploidy? Ms. Hackler asked if there could be clarification for language on prenatal tests that it is a diagnostic or screening test?

Chair Gabor stated the Board could draft support that ensures differentiation in understanding screening versus definitive test results.

Ms. Hackler stated support to have included in the information given.

DR. BRILL ENTERTAINED A MOTION FOR THE BOARD TO SUPPORT AB 116 AND INCLUDE A COMMENT THAT THE BOARD WOULD LIKE TO SEE INFORMATION PROVIDED REGARDING SCREENING AND DIAGNOSTIC TESTS FOR DOWN SYNDROME. FATIMA TAYLOR SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

Chair Gabor asked for public comment.

Kelly Verling asked if the Board voted on AB 168.

Chair Gabor stated the Board is moving forward with a recommendation to support the bill.

Ms. Verling stated that while she agrees with a statewide initiative for a FIMR, she knows the current program took a long time to develop and there are many dedicated members within Washoe County for the Washoe County FIMR. Ms. Verling stated that there are many different communities with many different issues, so having individual boards at a local level with a higher state review board would be more appropriate.

Chair Gabor stated that now the State will take the information discussed under this agenda item and put together a letter with the information and reasons why the Board is supporting or opposing bills discussed.

Dr. Brill stated that since Legislative Session is almost over, the letter will need to be done quickly.

Ms. Griffin stated it is her top priority and will have them completed after the meeting and will pass them through DPBH leadership.

Dr. Brill stated for the Board's awareness AB 404 is being heard next week in the Assembly Judiciary Committee. Dr. Brill explained that AB 404 is trying to change the "Keep our Doctors in Nevada" tort reform that was voted on by Nevada citizens in 2004. Dr. Brill explained this will affect women's health providers.

Ms. Hoskins stated she supports Dr. Brill in the concerns around AB 404.

Dr. Matsunaga-Kirgan asked if the Board should make an official comment on the bill.

Dr. Brill stated the Board could, though he is unsure if will influence anything, as the Assembly Committee is looking for a compromise, which is not the Board's place to do. Dr. Brill stated that the Board could make a comment in opposition to AB 404 as currently written. Dr. Brill stated AB 404 is very anti-medical care in realistic terms as health care has costs and if malpractice rates are forced to come up it will mean less providers in Nevada and more providers retiring early.

Dr. Matsunaga-Kirgan stated it is important to not change reforms that were done 20 years ago because for Nevada the conditions existing then had every insurance company leaving the state, and providers leaving in droves. It would be a mistake to go back to those conditions.

Dr. Brill stated his agreement and explained that he serves on the board of an entity called "Your Nevada Doctors" which is a coalition of doctors, healthcare providers, payers, and hospitals that is doing the coordinated opposition to this bill.

DR. BRILL ENTERTAINED A MOTION FOR THE BOARD TO OPPOSE AB 404 BECAUSE IT WOULD GO AGAINST THE WILL OF THE PEOPLE OF NEVADA THAT WAS VOTED INTO LAW. DR. MATSUNAGA-KIRGAN SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

No additional public comment

7. INFORMATIONAL: Presentation on Childhood Vaccine Coverage Data – Rachel Warner, School and Childcare Coordinator, Nevada State Immunization Program, DPBH

Ms. Griffin introduced Rachel Warner as filling in for the original presenter from the agenda, Kristy Zigenis.

Ms. Warner presented on Nevada school entry requirements, kindergarten, 7th grade, and 12th grade vaccination rates, 7-series vaccine data, and data on infants that are not up to date with vaccinations.

Chair Gabor thanked Ms. Warner for the presentation.

No Public Comment

8. INFORMATIONAL: Presentation on Perinatal Mood and Anxiety Disorders—Tawanda Evans-McIntosh, M.A.Ed., Community Educator, Dignity Health, St. Rose Dominican

Tawanda Evans-McIntosh presented on the Perinatal Mood and Anxiety Disorders (PMAD) Program in Nevada, established in 2017 under the Nevada Statewide Maternal and Child Health Coalition. Ms. Evans-McIntosh stated that the PMAD Program has trained 600 individuals including UNLV Pediatric residents, doula groups, nurses, and other medical professionals.

Katie Hackler stated she put together a maternal mental health resource guide to give out to pregnant moms and had found online classes that could be taken for free. Ms. Hackler stated that one class has ended, and the other is an online one from California and asked if Ms. Evans-McIntosh knew of any resources that could be included.

Ms. Evans-McIntosh stated she teaches a baby basics class and in the first hour of that class PMADs are covered, and that Postpartum Support International would be great for online support groups. Ms. Evans-McIntosh stated she has an EventBrite that is over Zoom once a month that provides in-depth information on PMADs and how to stay connected in the community for support and healing.

Dr. Matsunaga-Kirgan thanked Ms. Evans-McIntosh for her hard work in an extremely important area.

No Public Comment

9. INFORMATIONAL: Presentation on Midwifery in Nevada—Dr. Jennifer Vanderlaan, UNLV School of Nursing, April Clyde, CNM, Serenity Birth Center, and Cheryl Rude, Serenity Birth Center

Dr. Vanderlaan presented on midwifery in Nevada and explained UNLV School of Nursing is beginning a nurse midwifery education program this fall, the first in Nevada. Dr. Vanderlaan stated currently Nevada only licenses nurse midwives to be midwives in Nevada and that is regulated under the Board of Nursing with other types of advanced practice registered nurses. Dr. Vanderlaan shared basic information on nurse midwifery in Nevada, including findings from her work on the American College of Nurse Midwives Midwifery workforce study. Dr. Vanderlaan stated the most recent certification data shows there are 65 certified nurse-midwives in Nevada, but that this overcounts working midwives in the State, and that the National Provider Identifier Database shows 51 nurse-midwives reporting a place of work in Nevada. However, the Nevada Board of Nursing Annual Report showed in 2021 there were only ten licensed nurse-midwives. Dr. Vanderlaan explained this overcounting occurs in every state, but that Nevada has only 1.4 midwives per 1,000 births, compared to the national average of 3.6, and Nevada ranks 44th in the nation for midwife density. Nevada has the lowest density of midwives of any state that has

independent midwifery practice. Dr. Vanderlaan presented on Medicaid reimbursement and access to midwifery services in Nevada based on ability to self-pay for services.

April Clyde and Cheryl Rude presented on their experience running a midwifery practice in Nevada at Serenity Birth Center. Ms. Clyde explained that Serenity Birth Center opened in 2020 and that disparity for reimbursement is significant, as well as noted the difficulty attracting midwives for community birth because it reimburses at 20-40% less than the same codes in a hospital setting.

Ms. Rude explained that midwives are not paid in parity by Medicaid or other private insurers for other women's health services, such as preconception services, sexually transmitted infection screenings, well-women exams, intrauterine device placements, and small lesion removals. Ms. Rude explained these lower reimbursements make it difficult to meet budgets and provide services, as well as attracting certified nurse midwives. Ms. Rude explained that the birth center has come up with a cost-rate per person of \$2,200, which when compared to current reimbursement of \$1,693 puts them in the negative. Ms. Rude stated the practice right now is almost 70% Medicaid and that it is difficult to know if that is sustainable without going nonprofit.

No Public Comment

10. FOR POSSIBLE ACTION: Updates and possible recommendations to the Division of Public and Behavioral Health regarding the Alliance for Innovation on Maternal Health (AIM) and the Maternal Mortality Review Committee (MMRC) – Tami Conn, MPH, MCAH Section Manager, DPBH

Ms. Conn presented updates on the MMRC and stated that Nevada MMRC support staff were able to attend the federal CDC meeting on the data system used for MMRC reporting. Ms. Conn explained that Nevada is one of the first states conducting informant interviews, and that a panel occurred at this meeting that Nevada's two social worker interviewers got to sit on the panel at the conference to present on Nevada's successes and challenges.

Ms. Conn stated that AIM has 10 out of 18 birthing facilities participating and working on the hypertension bundle. Ms. Conn stated that AIM will implement the hemorrhage bundle January 1st, 2024, while continuing to collect hemorrhage bundle data.

No Public Comment

11. INFORMATIONAL: Presentation on MCH Reports and MCH Updates – Kagan Griffin, MPH, RD, Title V MCH Program Manager, MCAH, DPBH

Ms. Griffin presented Title V MCH Program updates including the Title V team's attendance at the Association of Maternal and Child Health Programs Conference in New Orleans from May 6th to May 10th and the beginning of a new Title V partnership with Yoga Haven in Las Vegas.

No Public Comment

12. FOR POSSIBLE ACTION: Make recommendations for future agenda items – Linda Gabor, MSN, RN, Chair

Dr. Brill stated that it would be helpful if the next meeting included updates on the status of Board supported legislation.

Chair Gabor thanked everyone for the opportunity to serve as Chair of MCHAB, and that it has been wonderful. Chair Gabor stated the Board will continue to do a great job moving forward to improve the health of Nevada's moms, children, and adolescents.

13. Public Comment

No Public Comment

Meeting adjourned at 11:52 A.M.