

As Introduced

130th General Assembly
Regular Session
2013-2014

H. R. No. 535

Representatives Gonzales, Antonio

RESOLUTION

To declare Ohio's rate of infant mortality a public health crisis and urge comprehensive preterm birth risk screening for all pregnant women in Ohio.

BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE STATE OF OHIO:

WHEREAS, Ohio is ranked among the worst in the nation in infant mortality (47th), with the loss in 2012 alone of 1,047 Ohio babies before their first birthdays; and

WHEREAS, The leading cause of infant mortality is preterm birth. In Ohio, the preterm birth rate is 12.1% (16,732 Ohio babies born too soon in 2012) and about half of all pregnancy-related costs are driven by preterm births, largely because of expensive care of infants in neonatal intensive care units (NICUs). Among babies born before 32 weeks gestation, 89% are admitted to NICUs at an average cost of \$280,000; and

WHEREAS, Socioeconomics, education, geography, and other factors contribute to health access barriers for many Ohio women and a lack of prenatal care increases the risk of preterm birth and infant mortality; and

WHEREAS, Medicaid pays for 38% of Ohio's pregnancies (about 53,000 annually). In Ohio, NICU babies account for only 0.2% of the Medicaid population but consume 15% of total Medicaid

spending; and 21

WHEREAS, Cervical length is the best predictor of preterm 22
birth risk. Women with a prematurely short cervix mid-pregnancy 23
are at 10 times the risk of an early delivery, which can have 24
tragic consequences; and 25

WHEREAS, Two technologies that accurately measure the cervix 26
are available: transvaginal ultrasound and use of a cervicometer. 27
Using these technologies, cervical length screening could be 28
performed in any prenatal care setting for pregnant women in Ohio 29
and treatment provided to prevent preterm births and infant 30
deaths; and 31

WHEREAS, The Society for Maternal-Fetal Medicine and the 32
American College of Obstetricians and Gynecologists have published 33
clinical practice guidelines recommending vaginal progesterone 34
treatment to prevent preterm birth in women pregnant with one baby 35
and a mid-pregnancy short cervical length. In this high risk 36
population, treatment cuts the rates of preterm birth and infant 37
mortality nearly in half while reducing NICU admissions by 25%; 38
and 39

WHEREAS, Economic analyses of universal cervical length 40
screening and vaginal progesterone treatment prove that this 41
preterm birth prevention strategy is cost-saving. The drug used in 42
this treatment is available in generic form; a full course of 43
treatment costs less than \$400. Adoption of this strategy across 44
Ohio could result in savings over \$27 million annually, with over 45
\$10 million of that total in Medicaid savings; and 46

WHEREAS, The Ohio Collaborative to Prevent Infant Mortality 47
of the Ohio Department of Health, the Ohio Perinatal Quality 48
Collaborative, and many other state and local organizations have 49
been working diligently to raise awareness and promote the 50
adoption of best practices, including appropriate use of 51

progesterone to prevent preterm birth. Among the top priorities of 52
the Ohio Department of Medicaid is more timely identification of 53
high risk expectant mothers to provide enhanced services, such as 54
ensuring "progesterone without barriers" for Ohio pregnant women; 55
and 56

WHEREAS, The good health and well-being of Ohio's expectant 57
mothers and their babies will be enhanced by education on the 58
importance of cervical length measurement as an evidence-based, 59
cost-saving prenatal risk screening test. Beneficiaries of such 60
education should include health care professionals, women and 61
families, Medicaid and private health insurers, government 62
officials, elected officials, and all others who share the mission 63
of reducing preterm birth and infant mortality; now therefore be 64
it 65

RESOLVED, That we, the members of the 130th General Assembly 66
of the State of Ohio, support and encourage improved education and 67
outreach concerning prenatal care, cervical length measurement, 68
and progesterone treatment; and be it further 69

RESOLVED, That we declare Ohio's rate of infant mortality a 70
public health crisis that deserves significant and immediate 71
action by all stakeholders to ensure equitable access to 72
comprehensive preterm birth risk screening for all pregnant women, 73
including cervical length screening; and be it further 74

RESOLVED, That the Clerk of the House of Representatives 75
transmit duly authenticated copies of this resolution to the 76
Governor of Ohio and the news media of Ohio. 77