



**Governor Ned Lamont
State of Connecticut**



FACT SHEET
2023 Legislative Session

**SENATE BILL 986
AN ACT PROTECTING MATERNAL HEALTH**

The Problem

Connecticut's Office of Health Strategy is fielding several requests for labor and delivery facility closures around the state, risking the isolation of much of our population from safe birthing care. This is particularly dangerous during a time when our maternal and infant outcomes are worse than those in developing nations. Overall, pregnancy-associated deaths consistently increased from 2018 through 2020 among all races and age groups. The situation is even more dire among Black populations, who consistently see higher rates of maternal mortality at national and state levels. Between 2015 and 2017, persons of color made up 44.9% of those giving birth, but 63.6% of pregnancy-related deaths. This can be attributed to lack of equitable access to health care resources, including providers.

Governor Lamont's Solution

Governor Lamont proposes to license birth centers, allowing free-standing birth centers to open in Connecticut. This will give birthing people and families in Connecticut more choices on where to receive their birthing care and allow new businesses to open. Birth centers are a high-value alternative to traditional hospitals for low-risk pregnancies. On average, birth centers save \$2,010 per infant mother pair and decrease the number of cesarean births. Birth centers have also been shown to increase vaginal births after cesarean deliveries and reduce preterm births.

Additionally, the Governor proposes a certification pathway for doulas to make sure these professionals are welcome members of a birthing person's care team, and that they are compensated appropriately. Doulas provide emotional and physical support during pregnancy, childbirth and the postpartum period. Research shows that doula services contribute to better pain management during labor, fewer C-sections and shorter labor and delivery times. Currently, approximately 15 states certify doulas. The certification of these professionals will also help establish consistency and quality of care. The Governor also proposes a workgroup to recommend certification pathways for midwives and an Infant Mortality Review Program at the Department of Public Health to study infant deaths. Studying infant deaths will allow the department to provide recommendations to improve health disparities as they pertain to maternal care.

Contacts:

Governor's Office: Matthew Brokman, 860-951-9619 or matthew.brokman@ct.gov
Office of Policy and Management: Susan Sherman, 860-416-2008 or susan.b.sherman@ct.gov
State Capitol, Room 406

Finally, the bill directs state agencies to design a statewide program for Universal Home Visiting (UHV), building on a pilot program in the greater Bridgeport area. UHV provides a population-level solution to offer care and services early on in an infant's life. UHV has also been shown to reduce the stigma associated with accessing care and services by serving as an entry point to connect high-risk families more effectively to Connecticut's existing network of resources. Similar legislation has been enacted in Oregon in 2019 and in New Jersey in 2021.