



Develop a unified, comprehensive and cohesive plan for Wisconsin that combines, maximizes and leverages our resources, invests in evidence-based interventions, measures results, *and* saves babies!

Recommendations to the Special Committee on Infant Mortality

1. Establish an advisory committee to provide oversight and implement a statewide plan to reduce infant mortality. The committee should include representation/leadership from an organization whose mission is to prevent infant mortality.
2. Encourage all birthing hospitals in Wisconsin to implement a quality improvement initiative to eliminate elective deliveries before 39 weeks using the Toolkit through possible incentives for hospitals and physicians and standardized tracking of this performance measure across the state.
3. Expand CenteringPregnancy to at least 5 additional approved sites in areas of Wisconsin with highest disparities and/or highest preterm birth rates by 2013, including through Medicaid or other public subsidies.
4. Funding to educate health professionals about the 5As method of smoking cessation counseling for pregnant women, document practice change and quit rates.
5. Renew or amend the Medicaid Family Planning Waiver and/or amend state Medicaid plan to fund pre/interconception care for low-income women.
6. Explore federal funding opportunities to states for MCH home visiting programs.
7. Upon FDA approval of Gestiva, ensure appropriate Medicaid coverage for this treatment.
8. Pass legislation, such as AB 185, from the 2007 legislative session, to make improvements to Wisconsin's Birth Defects Prevention and Surveillance System.