

1 WHEREAS, contributing factors to preventable maternal deaths include delayed or
2 absent prenatal care, poor chronic disease management, inadequate postpartum follow-up,
3 behavioral health challenges, substance use disorders, transportation barriers, financial
4 instability, housing insecurity, limited provider availability, and lack of awareness of
5 available treatment and support services; and

6 WHEREAS, Louisiana continues to experience significant disparities in maternal
7 health outcomes based on race, ethnicity, geography, educational attainment, and insurance
8 status, including among Medicaid beneficiaries; and

9 WHEREAS, Black women accounted for approximately thirty-seven percent of
10 births in Louisiana in 2020, yet represented approximately sixty-two percent of
11 pregnancy-related deaths, demonstrating persistent inequities in maternal health outcomes;
12 and

13 WHEREAS, women residing in rural and medically underserved communities face
14 increased barriers to maternal healthcare access, including limited access to birthing
15 hospitals, obstetric providers, and emergency maternal care services; and

16 WHEREAS, updated analyses of the Louisiana Department of Health hospital and
17 provider data indicate that several parishes have no active birthing hospital, limited or no
18 obstetric provider supply, and excessive travel times to the nearest labor and delivery
19 facility, thereby increasing risks of maternal morbidity, stillbirth, and adverse infant
20 outcomes; and

21 WHEREAS, nearly one-half of Louisiana's parishes fall into maternity care
22 desert-tier classifications, reflecting significant geographic disparities in maternal healthcare
23 access; and

24 WHEREAS, maternal mortality is not solely a clinical issue but also a public health,
25 health equity, workforce, infrastructure, and economic challenge requiring sustained policy
26 attention and coordinated implementation across agencies and healthcare systems; and

27 WHEREAS, the loss of a mother has profound and lasting impacts on children,
28 families, and communities, contributing to adverse childhood experiences, educational
29 disruption, workforce instability, emotional trauma, and increased reliance on publicly
30 funded social services; and

1 WHEREAS, preventable maternal complications and deaths impose substantial
2 economic costs on the state through emergency obstetric interventions, intensive care
3 admissions, chronic disease management, reduced workforce participation, and increased
4 Medicaid expenditures; and

5 WHEREAS, evidence demonstrates that timely prenatal care, postpartum follow-up,
6 coordinated chronic disease management, telehealth access, behavioral health services, and
7 community-based support systems significantly improve maternal health outcomes and
8 reduce preventable deaths; and

9 WHEREAS, Louisiana has established maternal health initiatives and quality
10 improvement systems, including the Pregnancy-Associated Mortality Review process, the
11 Louisiana Perinatal Quality Collaborative, Medicaid maternal health quality initiatives, and
12 the Office of Women’s Health and Community Health; and

13 WHEREAS, recent audits and evaluations have identified gaps in implementation
14 oversight, fiscal accountability, provider network adequacy, data-sharing infrastructure,
15 performance monitoring, and coordination among maternal health programs and funding
16 streams; and

17 WHEREAS, the Louisiana Center for Health Equity, through its LA40by2030
18 initiative and in alignment with Healthy People 2030 objectives and the Louisiana State
19 Health Improvement Plan, seeks to improve Louisiana’s maternal health ranking to fortieth
20 nationally by the year 2030; and

21 WHEREAS, the Centers for Disease Control and Prevention has reported that more
22 than eighty percent of pregnancy-related deaths nationwide are preventable; and

23 WHEREAS, strengthening maternal health surveillance, accountability, workforce
24 capacity, telehealth integration, community-clinical partnerships, and access to
25 evidence-based care is essential to improving maternal health outcomes in Louisiana.

26 THEREFORE, BE IT RESOLVED that the Legislature of Louisiana does hereby
27 declare maternal mortality a public health emergency.

28 BE IT FURTHER RESOLVED that the Legislature of Louisiana does hereby urge
29 and request the Louisiana Department of Health, in consultation with the Louisiana Center
30 for Health Equity, healthcare providers, managed care organizations, hospitals, federally

1 qualified health centers, academic institutions, community-based organizations, and maternal
2 health advocates, to develop a comprehensive plan for the purpose of reducing maternal
3 mortality and pregnancy-associated mortality in Louisiana.

4 BE IT FURTHER RESOLVED that the review shall evaluate:

5 (1) The underlying clinical, behavioral, social, geographic, and systemic factors
6 contributing to maternal mortality and pregnancy-associated mortality in Louisiana.

7 (2) Disparities in maternal health outcomes based on race, ethnicity, geography,
8 insurance status, and socioeconomic conditions.

9 (3) Access to prenatal, delivery, postpartum, behavioral health, and emergency
10 maternal healthcare services, particularly in rural and medically underserved communities.

11 (4) The availability and geographic distribution of obstetric providers, certified nurse
12 midwives, advanced practice registered nurses, and birthing facilities.

13 (5) The effectiveness of existing maternal health initiatives, including PAMR,
14 Medicaid quality initiatives, telehealth services, and the Louisiana Perinatal Quality
15 Collaborative.

16 (6) Opportunities to strengthen maternal health surveillance systems, improve
17 data-sharing infrastructure, enhance fiscal accountability, and increase coordination among
18 state agencies, healthcare systems, and community-based organizations.

19 (7) Strategies to improve postpartum follow-up care, chronic disease management,
20 substance use disorder treatment access, and maternal behavioral health services.

21 (8) The role of telehealth, community health workers, doulas, federally qualified
22 health centers, and community-clinical partnerships in improving maternal health outcomes.

23 (9) Policy options to address maternal healthcare workforce shortages and barriers
24 to maternal care access in maternity care deserts and health professional shortage areas.

25 (10) Recommendations for improving implementation oversight, accountability
26 measures, and long-term monitoring of maternal health outcomes statewide.

27 BE IT FURTHER RESOLVED that the Louisiana Department of Health shall submit
28 a written report of its findings and recommendations to the House Committee on Health and
29 Welfare and the Senate Committee on Health and Welfare not later than February 1, 2027.

1 BE IT FURTHER RESOLVED that the report shall include recommendations
2 regarding:

3 (1) Maternal health surveillance and public reporting improvements.

4 (2) Workforce development and provider recruitment strategies.

5 (3) Expansion of telehealth and postpartum care services.

6 (4) Community-based maternal health partnerships and patient navigation services.

7 (5) Fiscal accountability standards for maternal health funding initiatives.

8 (6) Policy strategies to reduce preventable maternal deaths and improve maternal
9 health equity across all parishes of the state.

10 BE IT FURTHER RESOLVED that a copy of this Resolution be transmitted to the
11 secretary of the Louisiana Department of Health and the executive director of the Louisiana
12 Center for Health Equity

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

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Marcelle

Requests that the Louisiana Department of Health review and report on the Louisiana Health Equity organization's findings about the maternal mortality rates in the state, the factors that affect maternal mortality rates, and declare maternal mortality a public health emergency.