

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.9130 Perinatal quality collaboratives.

Sec. 9130.

(1) The department shall maintain a perinatal quality collaborative to support and improve maternal and infant health outcomes in this state by doing all of the following:

- (a) Promoting quality improvement efforts.
- (b) Identifying processes and mobilizing resources.
- (c) Advancing equity.
- (d) Implementing and expanding care for families affected by perinatal substance use disorder.
- (e) Expanding and improving access to quality and respectful care and support throughout the pregnancy and postpartum period.

(2) The perinatal quality collaborative shall establish regional perinatal quality collaboratives for prosperity regions in this state. Each regional perinatal quality collaborative shall designate a lead agency within its region to invite qualified persons within the region to participate in the regional perinatal quality collaborative. Subject to appropriation, the department shall provide resources to each regional perinatal quality collaborative and require each regional perinatal quality collaborative to do all of the following:

- (a) Convene qualified persons and other interested persons within the region for regular meetings to review qualitative and quantitative data within the region on maternal and infant health outcomes.
- (b) Develop plans of action to improve birth outcomes for pregnant individuals, infants, and families using strategies proven to address the prosperity region's primary perinatal challenges.
- (c) Engage families and communities in developing the plans of action described in subdivision (b).

(3) As used in this section:

(a) "Prosperity region" means each of the 10 prosperity regions identified by the department on the effective date of the amendatory act that added this section.

(b) "Qualified person" means a person or governmental entity that provides services and supports to individuals during the perinatal period, including, but not limited to, health facilities or agencies, health professionals, local health departments, home visitation programs, insurers, families, community-based organizations, and federally recognized tribes.

History: Add. 2024, Act 243, Eff. Apr. 2, 2025

Popular Name: Act 368