


MINUTES

 <p>Children's Services Council PALM BEACH COUNTY Healthy. Safe. Strong.</p>	Meeting Title:		2021 CSC Council Workshop <i>Birth Outcomes</i>		
	Date:	7/8/2021	Time:	3:36 p.m.	
	Location:		Zoom		
	Chair:	Thomas Bean	Scribe:	Elsa Sanchez-Vahamonde	
Participants:	Council Members: Thomas Bean, Elisa Cramer, Kathleen Kroll, Debra Robinson, M.D., Jose Luis Rodriguez, Vincent Goodman Virtual: Maria Sachs				
Excused: Donald Fennoy, II, Ed.D.; Tom Weber					
Facilitator: Dr. Daniella Jones					
<ul style="list-style-type: none"> • A copy of the recording of the workshop may be found following this link: https://cscpsc.box.com/s/zr2ld5g1jyh989d258fixy87sdxnmhp1 					
Action items:					
<ul style="list-style-type: none"> • Data points for follow-up: <ul style="list-style-type: none"> ○ Disaggregate birth outcome data presented by race/ethnicity by age groups (in speaking BRIEFLY with Dr. Robinson as she headed out... she was thinking we would look at age groups in 10-year bands: under 20; 20-29; 30-39; 40+ . she didn't indicate that she was open if there were better age breakdowns... and we can ask Jeff for her perspective- perhaps under 20; 20-35; 35+ (which is sometimes a cutoff for advanced maternal age for first-time moms) ○ Correlation between Prenatal Care and birth outcomes ○ Largest driver of black maternal mortality ○ Largest driver of black infant mortality (looking at PPOR) ○ Research on impact of stress on birth outcomes (stress- cortisol levels- weathering- allostatic load) ○ Understanding from Community Voice graduates what have been their experiences with interacting with the medical community- and what may be facilitators and what may be barriers • Area of interest for follow-up/presentation and/or partnerships to explore: <ul style="list-style-type: none"> ○ Plan of Safe Care presentation ○ CSC/Community Foundation... are there opportunities to leverage what each other is funding in the space of MCH (not entirely sure what CF is currently funding in that space) ○ Partnership with School District: <ul style="list-style-type: none"> ▪ 9-12: medical magnet program at Palm Beach Lakes... support of a "career pipeline" ▪ Working with students on understanding the importance of primary care & wellness... and can they be "community ambassadors" among their peers and within their families/neighborhoods • Policy: Education/Awareness: <ul style="list-style-type: none"> ○ Overall, supportive of the areas of education/awareness for policies around cliff effect; Child Care Tax Credit; family & parental leave act <ul style="list-style-type: none"> ▪ Should be done as part of a larger education/awareness effort through FCC, rather than as a standalone effort on our individual CSC ▪ Need to be strategic about what type of policy we would support around cliff effect (note: the Federal Reserve Article speaks to the points that Jose-Luis Rodriguez was advocating for); and the need for their to be a tax credit offset to make the family & parental leave act viable for small businesses (NOTE: The American Rescue Plan included paid leave tax credit for employers who voluntarily provide eligible employees paid sick or family leave, and it is an advanceable, refundable tax credit. – this will be for April 1- September 30, 2021. The next step is to make this part of the permanent tax code). ○ Medicaid: <ul style="list-style-type: none"> ▪ Complicated issue... - not only need to be mindful of increasing eligibility; but also the level of reimbursement which encourages/discourages providers from participating in the program; as well 					

as encourage Medicaid HMOs to open up their networks (this is more an issue for specialists than probably for primary care/ OB/GYN)

- NOTE: I did speak with Thomas Bean... providers cannot accept supplement funding (from their patients or other sources) if they have billed Medicaid for a specific service. There may be other ways to provide access to dollars for services that Medicaid's rate of reimbursement is so low, providers elect not to participate (e.g., may be financially feasible to provide prenatal care under the bundled reimbursement rate- but not the postpartum care. Instead of billing Medicaid for postpartum care, could the provider bill another revenue stream? Not sure of the implications for the HEDIS measures on quality/continuity of care... that's the need for exploration)

- Overall awareness:

- Community campaign/awareness on the value of doula care and how to access it

The meeting was adjourned at 5:38 p.m.

Thomas Bean, Chair

Lisa Williams-Taylor, Ph.D., Chief Executive Officer