

HELPING EVERY LIFE AND PARENT TASK FORCE MEETING MINUTES

Oct. 11, 2022, 10 A.M.

OKLAHOMA STATE CAPITOL BUILDING SENATE CONFERENCE ROOM 4S.9 2300 N. LINCOLN BLVD., OKLAHOMA CITY, OK 73105

MEMBERS PRESENT: Juli Merciez, BSN, RN MPC, Co-Founder and President of

The Cottage is a pregnancy center and residential maternity home.

Chair; Governor J. Kevin Stitt appointment

Dr. Michelle Brunnabend, D.O., licensed OBGYN, owner, and physician at Aspen Women's Center. *Governor J. Kevin Stitt appointment* [Appeared Remotely]

Samantha Galloway, Interim Director. Secretary of Human Services Justin Brown designee

David Lewis, CEO of Go Life Mobile Medical Inc and Earthly Dwellings. *Governor J. Kevin Stitt appointment*

Dierdre McCool, Executive Vice-President at Butterfield Memorial Foundation. *Governor J. Kevin Stitt appointment*

Sandra Puebla, Deputy State Medicaid Director. Secretary of Health and Mental Health Kevin Corbett designee [Appeared Remotely]

Jackie Shawnee, Chief of Staff. Commissioner of Health Keith Reed designee

Gayla White, Director of Hope Pregnancy Ministries. *Governor J. Kevin Stitt appointment*

Rep. Danny Williams, designee of House Speaker Charles McCall

MEMBERS' ABSENT: Lori Carter, First Assistant Attorney General, designee for Attorney

General John O'Connor

Crystal Coon, designee for Senate Pro Tempore Greg Treat

GUESTS: Ellen Buettner, OHCA

Melissa Richey, OHCA Cody Smith, LegisOK Tim Tuck, OMES Legal David Crall, Senate Tommy Yap, Metriarch

Kamryn Yanchick, Metriarch

Gabrielle Jacobi, OK Policy Institute

Seth Ross, MMR

James Milner, MMR

Beverly Hicks, OMES Clerk

Audrey Weaver, OAG

Sister Brigid Mary Meeks, SFHS [Appeared Remotely]

David Donald, Pharmacist, SFHS [Appeared Remotely]



1. Welcome [Juli Merciez, Chair]:

Chairwoman Merciez welcomed everyone to the third meeting of the Task Force.

2. Determination of quorum and call to order [Chair]:

Chairwoman Juli Merciez called the meeting to order at 10 a.m. A roll call was taken, and a quorum was established.

3. Introductions [Chair]:

The members introduced themselves and shared their fields of expertise.

4. Approval of minutes from the Sept. 26, 2022, Task Force meeting [Chair]:

Dierdre McCool moved to approve the meeting minutes from September 26. Jackie Shawnee seconded the motion. The motion passed, and the following votes were recorded:

Ms. Merciez, aye; Dr. Brunnabend, aye; Ms. Galloway, aye; Mr. Lewis, aye, Ms. McCool, aye; Ms. Puebla, aye; Ms. Shawnee, aye; Ms. White, aye.

5. Old Business [Chair]:

A. Task Assignment Updates:

1. Abortion Pill Recovery. [OK Dept. of Health, David Donald-Pharmacist, Task Force Member]

Ms. Puebla reported on her research findings on coverage and the use of Progesterone. Her research found that the use of Progesterone as an antidote for the reversal of chemical pregnancies is not presently FDA-approved or is considered evidence-based by the Medicaid program's protocols. Progesterone and the Medicaid program do not have any prior authorizations attached to them or no type of review or peer review. The member would have to meet a medical necessity criteria for the medication to be prescribed, and then the claim would be submitted and paid. If a pharmacist receives a claim to fill for Progesterone, they are not provided with the clinical reasoning behind the prescription. The prescription would be filled, and the claim would be paid.

Ms. Puebla explained that the Oklahoma Health Care Authority (OHCA) relies on established medical guidelines and current recommendations by national organizations for the delivery of Medicaid services. The OHCA concluded that they could not provide support for the recommendations that Sister Meeks requested. However, they do not want to be an obstructionist to any type of state-level solution that the Task Force may come up with. Still, this Committee must ensure that the information they put forth must comply with federal requirements for us to continue to have the Medicaid program and not put that at risk.

Sister Meeks with Saint Francis Health System (SFHS) reported that a national organization brought their recommendation to the SFHS that chemical abortions are the leading percentage for abortions and will continue to increase with different state laws being passed in Oklahoma.



The national organization's concern to SFHS was about women who immediately regretted it after taking Mifepristone. They reached out to a national hotline for help because they were made to take the medication and wanted a way to reverse it. The hotline provides great resources for these women, but the difficulty arises in the health care system when it is off-hours, and most clinics are closed on weekends and, therefore, seek hospitals' assistance.

The SFHS sought the opinion of their Pharmacy if Mifepristone would be safe to administer to women and, in their professional opinion, concluded there would be no harm to the women asking for this assistance.

David Donald, SFHS Director of Pharmacy, reported on toxicology data from the Charlotte Lozier Institute findings about abortion pill reversal record of safety and efficacy and online sales of Mifeprex and Misoprostol for self-abortion. The members were provided with a copy of both reports.

Rep. Williams entered the meeting at 10:09 a.m.

No action was taken. Report only.

2. Adoption Opportunity. [Lori Carter, Dierdre McCool, Crystal Coon]

Ms. Weaver from the Oklahoma Attorney General's Office, filling in for Ms. Carter, reported on the proposed amendment regarding the adoption of birth mother expenses to the Oklahoma adoption code, raising pre-approved birth mother living expenses from \$1,000 to \$3,500 and is confident it would be a good recommendation from the Task Force. The members were provided with a copy of the report.

No action was taken. Report only.

3. Oklahoma Safe Haven Law. [Lori Carter, Task Force Members]

Ms. Weaver reported on two proposed amendments to the Oklahoma Safe Haven Law. One is to raise the number of days for relinquishment to 60 days since. This is consistent with other state laws and is a good recommendation from the Task Force.

The second is to expand the meaning of child rescuer, "e., a child-placing agency licensed by the Oklahoma Department of Human Services that agrees to act as a designated child rescuer under this chapter." This is consistent with other state laws and is a good expansion of the law and recommendation from the Task Force.

4. Community Education Opportunities [Task Force Members]

Chairwoman Merciez tabled this item of discussion under opportunity discussion under new business.

5. Support Pregnancy Centers in Oklahoma. [Jackie Shawnee]

Ms. Shawnee introduced Mendy Spohn, one of their deputy commissioners over the community health division, and the programs being spoken about today reside in her division.



Ms. Shawnee presented on some public health models that they have had success in over the years, coming alongside mothers and babies in Oklahoma and how they are relevant to this work and the impact that they are having.

Home Visiting Model: The Children First (C1) program aims to improve pregnancy outcomes, child health and development, and the family's economic self-sufficiency. These regular home visits are provided to their clients and conducted by a registered nurse who looks at family history, nutrition, education on parent skills, child development, and referrals based on family needs. The eligibility for a C1 program is a first-time mother, a monthly household income at or below 185% of the federal poverty level, and less than 29 weeks pregnant at enrollment. A registered nurse conducts these regular home-based services up to age two.

Community Health Worker (CHW) Model: They engage peers from the community to provide tailored social support, build trust and help clients navigate complex systems. The CHW role is to assist with insurance enrollment, housing, food, adoption, breastfeeding, healthcare, and mental health and connect residents to care and follow-up on the next steps.

Choosing Childbirth Program: This assists mothers in carrying their children to term and providing support to the mother and infant for an additional year following birth. This was brought forth through legislation in 2018 and is meant to reimburse nonprofit organizations to assist mothers in fulfilling this purpose. They have ten contracted providers who receive money through the Oklahoma Pregnancy Care Network (OPCN). This program has served about eleven hundred women in the state. The nonprofit organizations are reimbursed for four different program service areas: counseling, referrals, classes, and materials assistance.

Pregnancy Resource Navigator Program: The navigator's focus is to give new mothers the support they need before, during, and after pregnancy. The navigator aims to integrate the proven home visiting and community health worker models for prosperous babies, mothers, and families.

Ms. Shawnee wanted to bring this as a potential recommendation to the Task Force as an innovative program that merges successful and existing models in our state to touch more women in the State of Oklahoma and come alongside them as they navigate motherhood.

Representative Williams reported on the Missouri tax credit for pregnancy crisis centers tax credit system developed in the early 2000s. Anyone who pays taxes can apply for this tax credit each year with a cap of \$2.5 million.

The Missouri Department of Human Services approves those tax credits. They publish a list of qualified pregnancy resource centers that they advertise and promote. The first 170 dollars are eligible for the tax credit, and donors can claim up to 50 thousand dollars annually. He believes this is a good suggestion for the Task Force to recommend and



model something similar to what Missouri has done and follow their lead. He plans to bring some data on how effective those tax credits are at a future meeting.

Mr. Lewis shared that rebranding these shared services under one umbrella in Oklahoma would highlight these resources, such as OK4Life, with a 24-hour hotline, website, and QR code to be more user-friendly and less cumbersome. He would like to see nonprofits, churches, and anyone in advertising on the same page and speaking the same language.

No action was taken. Report only.

6. Educate Oklahomans on the Reality of Life. [Task Force Members]

Chairwoman Merciez would like this to be worked into the Community Education Opportunity.

No action was taken. Report only.

6. New Business [Chair]:

A. Opportunityity Discussion:

1. Narrow down formal recommendations.

Representative Williams reported on the Human Coalition a new law authored by Senator Bullard. SB 1167; Every Mother Matters Act. He would like to see the Task Force incorporates the recommendations in this bill.

Chairwoman Merciez discussed the recommendations made by the Task Force.

- Taking the Task Force into this session and becoming a legislative committee.
- Solidify the Safe Haven Law recommendation.
- New model with the State Department of Health; The Navigator.
- The tax credit.
- Abortion Pill Reversal; Statewide process for APR.
- Adoption; to be the most adoption-friendly state in the United States concerning legal and ethical adoption.
- Community Education Opportunity.
- Branding Opportunity.

No action was taken. Report only.

Discussion from the floor.

7. Adjournment:

There being no further business, the meeting adjourned at 12:44 p.m.