

# MMNIBUS 2025

**Problem:** Oregon is in the midst of an ongoing maternal & infant health crisis. **72% of pregnancy-related deaths are preventable**, and Black, Indigenous, and rural communities continue to experience higher mortality and morbidity than the general population. Contributing factors include **substance use and behavioral health conditions, housing instability, lack of appropriate workforce, and childhood poverty.**

**Solution:** **Move Oregon's policies and investments upstream**, focusing support and resources on parents and babies in the **earliest months** to improve **lifelong outcomes** and reduce maternal mortality and morbidity. These policies will improve health for parents and babies, and create long-term costs savings for the state.

## Legislation:

### SB 690

- Leverage existing housing supports through multiple channels to create uninterrupted housing stability using Medicaid Health Related Social Needs (HRSN) benefits, support from ODHS, and local public housing authorities to sustain housing support long term.
- Prevent nonpayment evictions for those in the process of applying to receive HRSN housing benefit.
- Allocate specific resources within the OHCS Oregon Rehousing Initiative to target the perinatal population to get families housed.

### SB 691

- Stabilize and expand the Nurture Programs to provide perinatal physical health care and substance use disorder treatment for pregnant people and parents of babies.
- Allow hospital admission for stabilization during pregnancy at any gestational age and extended birth hospitalization for bonding, social support, and plan for safe discharge.
- Allow peer support specialists to practice in contexts outside dedicated behavioral health organizations.

### SB 692

- Add Postpartum Doulas to the doula definition in current statute as a provider type that can bill insurance independently.
- Require private insurers and CCOs to provide clients information on accessing birth and postpartum doulas and certified lactation counselors.
- Require Doula and Certified Lactation Counsellor (CLC) coverage by all health insurance plans.
- Increase the number of insurance covered doula hours in antenatal and postpartum period to be more flexible and responsive to family needs.
- Establish a Community-Based Perinatal Provider Access Fund at Oregon Health Authority.

### SB 693

- Establish a 15-member Governor appointed task force with diverse representation to make recommendations on bolstering and diversifying the perinatal workforce.

### SB 694

- Increase the phase-out to \$35k (full credit) - \$45k (phase-out ends)
- Increase the credit amount as much as funding allows (maybe close to \$1,200)

### SB 695

- Requires Oregon CCOs to develop and implement maternal health and child success models by 2036.
- Requires that CCOs provide information to members about applying for WIC, TANF, SNAP, child tax credit, doula support, housing support, and other benefits.
- Improve the integration of all services to specifically focus on early learning, maternal care, and the first 1,000 days of a child's life.
- Develop local success models and collaborate with Early Learning Hubs and FQHCs in the development of community improvement plans.
- Prioritize equity-focused measures related to pregnancy and early childhood in Health Plan Quality Metrics Committee

# THE FOUR SQUARES OF MOMNIBUS 2025

These policies represent the path to **improved maternal health** and **better outcomes for our babies and children.**

**Lisa Reynolds, MD**  
OREGON STATE SENATOR

## HOUSING

SB 690

Prioritize pregnant people and families with babies for **rental assistance, eviction protection, and emergency housing assistance**, and increase the supply of **family-sized affordable housing** units.

## ENDING CHILD POVERTY

SB 694

Expand the **Oregon tax credits for kids** to provide additional **direct assistance to families** with young families.

## BEHAVIORAL HEALTH SERVICES

SB 691

Expand availability of **integrated maternal substance use and mental health treatments** using evidence-based interventions including **Project Nurture/Nurture Oregon**.

## PERINATAL WORKFORCE

SB 692 & SB 693

Increase the numbers of **traditional health workers, including doulas, lactation counselors, and community health workers, as well as peer support specialists**, through trainings and financial incentives.

SB 695

Aligning Oregon's Coordinated Care Organizations with the upstream, preventative goals of Momnibus 2025.



The American College of Obstetricians and Gynecologists  
WOMEN'S HEALTH CARE PHYSICIANS

