

(I) ~~ASSURING~~ ASSURE THAT QUALITY PRENATAL AND INFANT HEALTH CARE ARE AVAILABLE TO TEENAGE MOTHERS, UNMARRIED MOTHERS, LOW INCOME MOTHERS AND OTHER MARYLAND CITIZENS WHO OTHERWISE WOULD BE UNABLE TO OBTAIN PRENATAL CARE;

(II) ~~ESTABLISHING~~ ESTABLISH A STATEWIDE MULTIMEDIA CAMPAIGN TO ALERT COMMUNITIES, CIVIC GROUPS, CHURCHES, AND INDIVIDUALS ABOUT THE PROBLEM OF LOW BIRTHWEIGHT, THE IMPORTANCE OF EARLY PRENATAL CARE, AND WHAT THEY CAN DO TO IMPACT ON MARYLAND'S INFANT MORTALITY RATE;

(III) ~~DEVELOPING~~ DEVELOP A HEALTH EDUCATION STRATEGY, IN CONJUNCTION WITH THE EFFORTS OF THE GOVERNOR'S COUNCIL ON ADOLESCENT PREGNANCY, TO BE USED IN MARYLAND SCHOOLS TO EDUCATE OUR YOUNG PEOPLE ABOUT THE IMPORTANCE OF EARLY PRENATAL CARE; AND

(IV) ~~DEVELOPING~~ DEVELOP MODEL HEALTH PROFESSIONAL DEMONSTRATION TRAINING PROGRAMS WITH INCENTIVES FOR PROVIDERS TO LOCATE IN RURAL AREAS AND LOW INCOME COMMUNITIES AND TO WORK FOR LOCAL HEALTH DEPARTMENTS AND COMMUNITY HEALTH CENTERS; ~~AND~~

(5) IN ACCORDANCE WITH THE INFANT MORTALITY PREVENTION STRATEGIC PLAN, RECOMMEND TO THE GOVERNOR DISTRIBUTION OF COMMUNITY INCENTIVE GRANTS CONCERNING INFANT MORTALITY PREVENTION FROM FUNDS PROVIDED IN THE STATE BUDGET FOR THIS PURPOSE, GIVING PRIORITY TO INNOVATIVE PROJECTS THAT:

(I) PROMOTE THE ESTABLISHMENT OF A REGIONALIZED PERINATAL MATERNAL AND INFANT HEALTH SYSTEM; AND

(II) DEMONSTRATE A HIGH LEVEL OF COMMITMENT TO THE MATERNAL AND INFANT HEALTH BY MAKING AVAILABLE NONSTATE FUNDS, PERSONNEL, AND FACILITIES; AND

(6) REPORT ANNUALLY TO THE GOVERNOR AND THE GENERAL ASSEMBLY ON THE STATUS OF INFANT MORTALITY IN MARYLAND, HOW MARYLAND COMPARES TO OTHER STATES AND OTHER NATIONS, AND MARYLAND'S PROGRESS IN MEETING THE HEALTH OBJECTIVES OF THE NATION ESTABLISHED BY NATIONAL CONSENSUS THROUGH THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE.