



## 104TH GENERAL ASSEMBLY

### State of Illinois

2025 and 2026

HB4606

Introduced 2/3/2026, by Rep. Laura Faver Dias - Lilian Jiménez

#### SYNOPSIS AS INTRODUCED:

20 ILCS 1305/10-85 new

Amends the Department of Human Services Act. Requires the Department of Human Services to design, implement, and maintain a statewide program to provide voluntary short-term universal newborn home visiting services to all Illinois families with newborn infants for the purpose of promoting the physical, mental, and social well-being of newborn infants and their parents or caregivers. Requires the Department to: (i) consider recommendations from the Early Childhood Comprehensive Systems grant report when adopting rules to implement the universal newborn home visiting program; and (ii) consult, coordinate, and collaborate with specified stakeholders when designing the universal newborn home visiting program. Contains provisions concerning grant awards for the establishment or expansion of local universal newborn home visiting programs; criteria for the selection of eligible service models; program requirements; program data collection and reporting; and other matters. Effective July 1, 2027.

LRB104 17639 KTG 31070 b

1 AN ACT concerning State government.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Department of Human Services Act is amended  
5 by adding Section 10-85 as follows:

6 (20 ILCS 1305/10-85 new)

7 Sec. 10-85. Short-term Universal Newborn Home Visiting  
8 Services.

9 (a) The General Assembly finds all of the following:

10 (1) The weeks following birth are a critical period  
11 for the person who has given birth, the newborn infant,  
12 and the entire family, setting the stage for long-term  
13 health and well-being.

14 (2) Families may struggle to navigate and access early  
15 childhood, health and mental health, and other support  
16 service networks in the early postpartum period, and  
17 targeted services and supports may fail to identify  
18 families who do not present with risk factors.

19 (3) Research also indicates that postpartum education  
20 and care leads to lower rates of morbidity and mortality  
21 in persons who have given birth, as many of the risk  
22 factors for post-delivery complications, such as  
23 hemorrhaging or a pulmonary embolism, may not be

1 identifiable before a person who has given birth is  
2 discharged following the birth. Research also indicates  
3 that parenting education on health risks for newborns,  
4 including substance use, lactation, safe sleep, and other  
5 topics, lead to lower infant mortality and morbidity.

6 (4) Illinois communities have invested in and are  
7 already implementing short-term universal newborn home  
8 visiting services, including Stephenson, Peoria,  
9 Winnebago, and Macon counties, and the city of Chicago,  
10 and have demonstrated positive outcomes for the physical,  
11 mental, and social well-being of newborns and the parents  
12 or caregivers of newborns.

13 (5) The 2018 Illinois Maternal Morbidity and Mortality  
14 Report from the Department of Public Health recommended  
15 that the State expand efforts to provide short-term  
16 universal home visiting to all mothers within 3 weeks of  
17 giving birth.

18 (6) In October 2021, the Department of Human Services  
19 received an Early Childhood Comprehensive Services grant  
20 from the federal Health Resources and Services  
21 Administration to investigate ways to enhance the  
22 prenatal-to-age 3 statewide maternal and early childhood  
23 system of care by establishing a Universal Newborn Support  
24 System that better connects families to programs and  
25 services.

26 (7) Short-term universal newborn home visiting

1 services are a covered Medicaid benefit under the approved  
2 State Plan Amendment.

3 (b) The purpose of this Section is to establish within the  
4 Department of Human Services a program to provide short-term  
5 universal newborn home visiting services to all families with  
6 newborn infants residing in this State.

7 (c) The Department shall design, implement, and maintain a  
8 statewide program to provide voluntary short-term universal  
9 newborn home visiting services to all families with newborn  
10 infants residing in this State for the purpose of promoting  
11 the physical, mental, and social well-being of newborn infants  
12 and their parents or caregivers. The Department shall consider  
13 recommendations from the Early Childhood Comprehensive Systems  
14 grant report when adopting rules to implement the statewide  
15 universal newborn home visiting program.

16 (d) Once established, the Department shall administer and  
17 manage the statewide universal newborn home visiting program,  
18 which shall include managing infrastructure for a coordinated  
19 statewide system, including data collection, evaluation,  
20 continuous quality improvement, communications, clinical  
21 supervision, and other infrastructure functions.

22 (e) Subject to appropriation, the Department shall award  
23 grants to support the establishment or expansion of local  
24 universal newborn home visiting programs in accordance with  
25 this Section and any other rules that may be adopted by the  
26 Department. Successful grantees shall comply with policies and

1 procedures on program, data, and expense reporting as  
2 developed by the Department.

3 (f) In designing the universal newborn home visiting  
4 services, the Department shall consult, coordinate, and  
5 collaborate, as necessary, with relevant stakeholders  
6 including early childhood home visiting programs,  
7 community-based organizations and social service providers,  
8 maternal and child health advisories and stakeholders,  
9 hospitals, birth centers, local public health authorities,  
10 insurance carriers, and other State agencies.

11 (g) Funds received under this Section shall supplement,  
12 not supplant, other existing or new federal, State, or local  
13 sources of funding for these services. Any new federal funding  
14 received shall supplement and not supplant funding for the  
15 statewide universal newborn home visiting program.

16 (h) The Department shall establish criteria for the  
17 selection of service models eligible under the universal  
18 newborn home visiting program. The universal newborn home  
19 visiting services must:

20 (1) Be delivered in accordance with a program model  
21 that has been validated by evidence and found to be  
22 effective in promoting the physical, mental, and social  
23 well-being of newborn infants and the parents or  
24 caregivers of newborn infants, and approved by the  
25 Department. The program model must have been found to be  
26 effective in at least one well-designed randomized,

1 controlled trial, or in at least 2 well-designed  
2 quasi-experimental (matched comparison group) studies, or  
3 have been designated as an "evidence-based" home visiting  
4 program by the U.S. Department of Health and Human  
5 Services.

6 (2) Include an evidence-based assessment of the  
7 physical, social, and emotional factors affecting the  
8 family and newborn infant, including, but not limited to,  
9 a health and wellness check of the newborn infant and an  
10 assessment of the physical and mental health of a person  
11 who has given birth, lactation support as needed, and  
12 screening for social determinants or drivers of health  
13 through query and validated screeners with clinical  
14 relevance in diagnosing for perinatal mood and anxiety  
15 disorders.

16 (3) Provide information and facilitate referrals to  
17 address the specific needs of newborn infants and the  
18 families of newborn infants, including linking a person  
19 who has given birth and the person's infant to community  
20 resources, early childhood services, family support  
21 services, community-based organizations, or social service  
22 agency programs available to persons who have given birth  
23 and their newborn infants, and medically necessary  
24 follow-up health care.

25 (4) Include at least one visit within the first 3  
26 weeks after discharge of the newborn infant from the birth

1 hospital with up to 2 follow-up visits as determined by  
2 clinical judgment.

3 (5) Be offered to each family with a newborn infant  
4 that resides in the community where the program is  
5 implemented. For purposes of this Section, the family of a  
6 newborn infant includes biological parents, foster and  
7 adoptive parents, kinship caregivers, and parents who have  
8 recently experienced a stillbirth.

9 (6) Be offered at no cost to a family and carry no  
10 negative consequences for a family that declines to  
11 receive services or participate in the program.

12 (i) Beginning no later than January 1, 2028, the  
13 Department shall collect and analyze data generated by the  
14 universal newborn home visiting program to assess its  
15 effectiveness in meeting the aims described in subsection (c).  
16 The Department shall also work with other State agencies to  
17 develop protocols for sharing data, including the timely  
18 sharing of data with the primary care providers of families  
19 with newborns who are receiving universal newborn home  
20 visiting services.

21 (j) Beginning no later than October 1, 2029, and annually  
22 thereafter, the Department shall report to the General  
23 Assembly on the status of the provision of universal newborn  
24 home visiting services in the State.

25 (k) The Department may adopt any rules necessary to  
26 implement this Section.

1           Section 99. Effective date. This Act takes effect July 1,  
2           2027.