

# **SENATE APPROPRIATIONS COMMITTEE FISCAL NOTE**

**BILL NO.** House Bill 1869

**PRINTER NO.** 2592

**AMOUNT**

No Fiscal Impact

**FUND**

General Fund

**DATE INTRODUCED**

October 17, 2017

**PRIME SPONSOR**

Representative Mackenzie

**DESCRIPTION AND PURPOSE OF BILL**

House Bill 1869 establishes the Maternal Mortality Review Act (the "Act") which creates a formal process to review maternal deaths in the Commonwealth.

The bill defines the following relevant terms:

- "Pregnancy-associated death" is the death of a woman while pregnant or within one year of delivery or the end of pregnancy, from any cause unrelated to the pregnancy.
- "Pregnancy-related death" is the death of a woman while pregnant or within one year of delivery or the end of pregnancy, from any cause related to or aggravated by the pregnancy.

The bill establishes a Maternal Mortality Review Committee ("committee") within the Department of Health ("department"), which consists of the following members:

- The Secretary of the department or a designee;
- An obstetrician;
- A maternal fetal medicine specialist;
- A certified nurse-midwife;
- A registered nurse representing maternal health care;
- A psychiatrist;
- An addiction medicine specialist;
- A social worker;
- A medical examiner or coroner;
- An emergency medical services provider;

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- A health statistician;
- A representative of the department's bureau of family health programs.
- Three individuals specializing in emergency medicine, family medicine, pathology, anesthesiology, cardiology, critical care, or other relevant medical specialty; and
- Additional personnel at the discretion of the Secretary.

The bill authorizes the committee to consult with any relevant experts or stakeholders who may or may not represent an area of specialty listed above. The bill prohibits a member of the committee or an employee of the department from disclosing identifying information of a patient or health care provider.

The bill requires the Secretary of the department to appoint both the members of the committee and the committee's chairperson within 60 days of the effective date of the act. In appointing members to the committee, the Secretary shall include the following:

- Members from various geographic regions, including rural and urban areas, and from both academic and community-based hospitals and health networks of varying size;
- Members who are working in and representing areas that are most affected by maternal deaths; and
- Members who represent several academic disciplines and specializations essential to reviewing cases of maternal deaths.

The bill requires the committee to meet when necessary but no less than annually. The initial meeting shall be held within 90 days of the effective date of the act. Members shall serve without compensation and must sign confidentiality agreements. Any person appearing before the committee must also sign a confidentiality agreement. Administrative support for the committee is to be provided by the department.

The committee shall review maternal death cases from the following sources:

- Pregnancy check boxes on a decedent's death certificate;
- Vital statistics linkage of birth, fetal death and induced termination of pregnancy with death records;
- Direct referrals from health care facilities and providers; and
- Medical examiners and coroners.

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The Committee may also review:

- Medical examiner and coroner's reports;
- Death and birth certificates;
- Law enforcement records;
- Medical records;
- Information made available by firefighters and emergency services personnel;
- Court records and reports;
- Animal control reports;
- Emergency medical services records;
- Traffic fatality reports;
- Department of Human Services records; and
- Other records necessary to conduct the review.

The bill stipulates that there is a presumption that data requested by the committee is relevant and shall not be withheld from the committee absent a showing of good cause.

The bill requires the committee to summarize causes of death and findings and report recommendations regarding the prevention of maternal deaths, which shall be disseminated every three years to the Secretary of the department, the Chairs of the Senate Health and Human Services Committee and the House Health Committee, health care providers and facilities, and the general public.

The bill authorizes medical records of the deceased, notwithstanding any other provision of law and consistent with the Health Insurance Portability and Accountability Act of 1996, to be provided to the committee without the authorization of a person in interest. Health care providers, facilities and pharmacies shall be required to provide reasonable access to the committee to review medical records associated with maternal death cases.

Each member of the committee and any person appearing before the committee shall sign a confidentiality agreement, and the committee shall maintain the confidentiality of any identifying information obtained relating to a maternal death. An individual that in good faith provides information or records shall not be subject to civil or criminal liability. The records of the committee are privileged and shall not be subject to discovery, subpoena or introduction into evidence.

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A person that violates the provisions of the confidentiality provisions of the act is guilty of a misdemeanor of the third degree.

Meetings of the committee at which a specific maternal death is discussed are not subject to the Open Meetings Law, and information collected under the act is exempt from the Right-to-Know Law.

This act shall take effect in 90 days.

## **FISCAL IMPACT:**

House Bill 1869 will have no fiscal impact to the Commonwealth. The bill requires the Department of Health to provide administrative support for the Maternal Mortality Review Committee, which can be accomplished within existing staffing levels and funding provided to the department. In addition, the legislation provides that committee members shall serve without compensation.