(8lr3349)

#### **ENROLLED BILL**

- Health and Government Operations/Finance -

Introduced by **Delegates Wilkins, Angel, Barron, Hayes, Kelly, <del>and Morales</del> <u>Morales, Pendergrass, Cullison, Hill, Kipke, Krebs, Metzgar, Miele, Morgan,</u> <u>Pena-Melnyk, Platt, Rosenberg, Saab, Sample-Hughes, Szeliga, West, and</u> <u>K. Young</u>** 

Read and Examined by Proofreaders:

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this

\_\_\_\_\_ day of \_\_\_\_\_\_ at \_\_\_\_\_\_ o'clock, \_\_\_\_M.

Speaker.

CHAPTER \_\_\_\_\_

### 1 AN ACT concerning

# Public Health – Maternal Mortality Review Committee Program – Report and Stakeholder Meetings

4 FOR the purpose of requiring the Maternal Mortality Review Committee to appoint a  $\mathbf{5}$ certain number of additional members to its membership in existence as of a certain 6 date; requiring the members added to the Committee to include certain individuals 7 and, to the extent practicable, reflect a certain diversity; requiring the Committee to establish a certain Action Task Force subcommittee; requiring the Action Task Force 8 subcommittee to have a certain membership; requiring the Action Task Force 9 subcommittee to analyze certain factors, examine the impact of certain factors on 10 maternal deaths, review and make certain recommendations, and play a certain role 11 in coordinating with the Committee when making certain recommendations; 12

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber/conference committee amendments.



J1

1	authorizing the Committee to interview certain individuals in carrying out certain			
2	duties; requiring the Committee to prepare a certain report for a certain year with			
3	certain recommendations; defining a certain term Secretary of Health to include a			
4	certain summary of certain meetings in a certain report; requiring the Secretary to			
<b>5</b>	convene certain meetings of certain stakeholders at least a certain number of times			
6	each year; requiring certain meetings to be held within certain time periods and for			
<b>7</b>	certain purposes; and generally relating to the Maternal Mortality Review			
8	Committee Program.			
9	BY repealing and reenacting, with amendments,			
10	Article – Health – General			
11	Section <u>13–1201</u> <u>13–1207</u>			
12	Annotated Code of Maryland			
13	(2015 Replacement Volume and 2017 Supplement)			
14	BY adding to			
14 $15$	Article – Health – General			
16				
17	Annotated Code of Maryland			
18	(2015 Replacement Volume and 2017 Supplement)			
10	(2015 Replacement Volume and 2017 Supplement)			
19	Preamble			
20	WHEREAS Maternal deaths are a key indicator of the health of residents of the			
$\frac{20}{21}$	WHEREAS, Maternal deaths are a key indicator of the health of residents of the State, as well as the status of social and economic development in the State; and			
41	State, as wen as the status of social and economic development in the State, and			
22	WHEREAS, The United States ranks 60th in the world for maternal mortality,			
23	behind all other developed nations; and			
-				
24	WHEREAS, Maryland ranks 38th in the nation for maternal mortality; and			

WHEREAS, Maryland established a Maternal Mortality Review Committee in 2000
to identify maternal death cases, review medical records, determine the preventability of
maternal deaths, and make recommendations for the prevention of maternal deaths; and

- WHEREAS, The State's maternal mortality rate has increased 51% when comparing the review period of 2010 to 2014 with the review period of 2005 to 2009; and
- 30 WHEREAS, The Maternal Mortality Review Committee has found that most of the 31 maternal deaths that have occurred have been preventable; and

32 WHEREAS, The State, with the leadership of the Maternal Mortality Review 33 Committee and support of the Action Task Force Program, needs to identify ways to prevent 34 maternal deaths; and

WHEREAS, The time has come for Maryland to act to save the lives of mothers; now,
therefore,

$\frac{1}{2}$	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:		
3	Article – Health – General		
4	$\frac{13-1201}{12}$		
5	(a) In this subtitle the following words have the meanings indicated.		
6	(b) "Faculty" means the Medical and Chirurgical Faculty in the State.		
7 8 9	(c) <u>"Maternal child health committee" means the maternal child health</u> committee of the Faculty that is a medical review committee, as defined under § 1–401 of the Health Occupations Article.		
10 11	(d) <u>"Maternal death" means the death of a woman during pregnancy or within 1</u> <del>year after the woman ceases to be pregnant.</del>		
$12 \\ 13 \\ 14 \\ 15$	(E) "MATERNAL MORTALITY REVIEW COMMITTEE" MEANS THE COMMITTEE HOSTED BY THE MATERNAL CHILD HEALTH COMMITTEE THAT ASSISTS THE DEPARTMENT BY REVIEWING MATERNAL DEATHS AND DEVELOPING RECOMMENDATIONS FOR THE PREVENTION OF MATERNAL DEATHS.		
16	<del>13-1206.1.</del>		
17 18 19	(A) (1) THE MATERNAL MORTALITY REVIEW COMMITTEE SHALL APPOINT AT LEAST SIX ADDITIONAL MEMBERS TO ITS MEMBERSHIP IN EXISTENCE AS OF JULY 1, 2018.		
$\begin{array}{c} 20\\ 21 \end{array}$	(2) The members added to the Maternal Mortality Review Committee under paragraph (1) of this subsection shall include:		
$22 \\ 23 \\ 24$	(1) Individuals who are immediate family members of victims of maternal death, including mothers of victims of maternal death;		
$25 \\ 26 \\ 27$	(II) REPRESENTATIVES OF COMMUNITY ORGANIZATIONS THAT WORK WITH IMMEDIATE FAMILY MEMBERS OF VICTIMS OF MATERNAL DEATH, INCLUDING MOTHERS OF VICTIMS OF MATERNAL DEATH;		
28 29	(III) REPRESENTATIVES OF WOMEN'S HEALTH AND ADVOCACY ORGANIZATIONS;		
30	(IV) A REPRESENTATIVE OF A HEALTHY START PROGRAM; AND		

(V) A REPRESENTATIVE OF THE MARYLAND PATIENT SAFETY 1 2 CENTER. (3) TO THE EXTENT PRACTICABLE, THE MEMBERS ADDED TO THE 3 4 MATERNAL MORTALITY REVIEW COMMITTEE UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL REFLECT THE RACIAL, ETHNIC, CULTURAL, AND GEOGRAPHIC 5 6 DIVERSITY OF THE STATE.  $\overline{7}$ (B) (1) THE MATERNAL MORTALITY REVIEW COMMITTEE SHALL ESTABLISH AN ACTION TASK FORCE SUBCOMMITTEE. 8 <del>(2)</del> THE ACTION TASK FORCE SUBCOMMITTEE SHALL HAVE A 9 10 **MEMBERSHIP THAT CONSISTS IN EQUAL PARTS OF:** ALL OF THE MEMBERS OF THE MATERNAL MORTALITY 11 <del>(1)</del> **REVIEW COMMITTEE ADDED UNDER SUBSECTION (A) OF THIS SECTION: AND** 12 13 (II) EXISTING MEMBERS OF THE MATERNAL MORTALITY 14 **REVIEW COMMITTEE AS OF JULY 1. 2018.** (C) (1) THE ACTION TASK FORCE SHALL: 1516 <del>(1)</del> ANALYZE THE FACTORS CAUSING A DISPROPORTIONATE MATERNAL DEATH RATE AMONG AFRICAN AMERICAN WOMEN AND OTHER WOMEN 17 18 OF COLOR; 19 (III) EXAMINE THE IMPACT ON MATERNAL DEATHS OF: 20 1 BEHAVIORAL AND SOMATIC HEALTH FACTORS: AND 212 **HEALTH EQUITY AND THE SOCIAL DETERMINANTS OF** 22HEALTH: AND 23(III) REVIEW RECOMMENDATIONS OF AND MAKE 24RECOMMENDATIONS TO THE COMMITTEE TO PREVENT MATERNAL DEATHS. 25**INCLUDING RECOMMENDATIONS RELATING TO:** 261 HEALTH CARE ACCESS BEFORE, DURING, AND AFTER 27 **PREGNANCY**; 282 THE ASSESSMENT AND MANAGEMENT OF RISK 29 FACTORS ASSOCIATED WITH MATERNAL DEATH;

HOUSE BILL 1518

4

1	3. <b>Documentation and management of chronic</b>
2	AND CONCURRENT MEDICAL CONDITIONS; AND
3	4. THE CULTURAL COMPETENCY OF HEALTH CARE
4	PROVIDERS.
5	(2) THE ACTION TASK FORCE SUBCOMMITTEE SHALL PLAY A
6	LEADING ROLE IN COORDINATING WITH THE MATERNAL MORTALITY REVIEW
7	COMMITTEE WHEN MAKING RECOMMENDATIONS IN THE ANNUAL REPORT OF THE
8	MATERNAL MORTALITY REVIEW COMMITTEE.
0	
9	(D) IN CARRYING OUT THE DUTIES OF THE MATERNAL MORTALITY REVIEW
10	COMMITTEE, THE MATERNAL MORTALITY REVIEW COMMITTEE MAY INTERVIEW
11	FAMILY MEMBERS OF VICTIMS OF MATERNAL DEATH.
12	(E) THE MATERNAL MORTALITY REVIEW COMMITTEE SHALL PREPARE AN
13	ANNUAL REPORT FOR 2018 WITH RECOMMENDATIONS TO PREVENT MATERNAL
14	DEATHS, INCLUDING RECOMMENDATIONS MADE BY THE ACTION TASK FORCE
15	SUBCOMMITTEE FOR IMMEDIATE ACTIONS THAT SHOULD BE TAKEN BY THE
16	<b>GENERAL ASSEMBLY AND HEALTH CARE PROVIDERS IN THE STATE TO PREVENT</b>
17	MATERNAL DEATHS.
18	<u>13–1207.</u>
19	(A) On or before December 1 of each year, the Secretary shall submit a report on
20	findings, recommendations, and Program actions to the Governor and, subject to § 2–1246
21	<u>of the State Government Article, to the General Assembly.</u>
22	(B) THE SECRETARY SHALL INCLUDE IN THE REPORT REQUIRED UNDER
$\frac{22}{23}$	SUBSECTION (A) OF THIS SECTION A SUMMARY OF ANY STAKEHOLDER MEETINGS
$\frac{23}{24}$	HELD UNDER § 13–1208 OF THIS SUBTITLE DURING THE IMMEDIATELY PRECEDING
$\frac{24}{25}$	12–MONTH PERIOD THAT INCLUDES:
20	12 MONTH TEMOD THAT INCLUDES.
26	(1) STAKEHOLDER RESPONSES TO EXISTING RECOMMENDATIONS;
$\frac{1}{27}$	AND
28	(2) <b>Recommendations from stakeholders that address</b>
29	FACTORS CONTRIBUTING TO MATERNAL MORTALITY.
30	<u>13–1208.</u>
31	(A) AT LEAST TWICE A YEAR, THE SECRETARY SHALL CONVENE A MEETING
32	OF STAKEHOLDERS, INCLUDING REPRESENTATIVES OF:

	6	HOUSE BILL 1518
$\frac{1}{2}$	(1) Disparities;	THE MARYLAND OFFICE OF MINORITY HEALTH AND HEALTH
3	<u>(2)</u>	THE MARYLAND PATIENT SAFETY CENTER;
4	<u>(3)</u>	THE MARYLAND HEAD HEALTHY START PROGRAM;
5	<u>(4)</u>	WOMEN'S HEALTH ADVOCACY ORGANIZATIONS;
6 7	(5) AND FAMILY SU	<u>Community organizations engaged in maternal health</u> <u>upport issues;</u>
8	<u>(6)</u>	FAMILIES THAT HAVE EXPERIENCED A MATERNAL DEATH;
9	<u>(7)</u>	LOCAL HEALTH DEPARTMENTS; AND
$\begin{array}{c} 10\\11 \end{array}$	(8) <u>SERVICES.</u>	HEALTH CARE PROVIDERS THAT PROVIDE MATERNAL HEALTH
$\begin{array}{c} 12 \\ 13 \end{array}$	(B) OF SECTION:	THE TWO MEETINGS REQUIRED UNDER SUBSECTION (A) OF THIS
$\begin{array}{c} 14 \\ 15 \end{array}$	(1) SUBMISSION OF	ONE MEETING SHALL BE HELD WITHIN 90 DAYS AFTER F THE REPORT REQUIRED UNDER § 13–1207 OF THIS SUBTITLE TO:
$\frac{16}{17}$	<u>REPORT;</u>	(I) <u>REVIEW THE FINDINGS AND RECOMMENDATIONS IN THE</u>
18 19	DEATHS;	(II) EXAMINE ISSUES RESULTING IN DISPARITIES IN MATERNAL
20 21	<u>RECOMMENDA'</u>	(III) <u>Review the status of implementation of previous</u> <u>FIONS; AND</u>
$\frac{22}{23}$	INITIATIVES TO	(IV) IDENTIFY NEW RECOMMENDATIONS WITH A FOCUS ON ADDRESS ISSUES RESULTING IN DISPARITIES IN MATERNAL DEATHS;
<b>2</b> 4	AND	
25 26 27 28	IMPLEMENTAT	ONE MEETING SHALL BE HELD WITHIN 6 MONTHS AFTER THE O UNDER ITEM (1) OF THIS SUBSECTION TO REVIEW THE STATUS OF ION OF PREVIOUS RECOMMENDATIONS AND CONSIDER ANY NEW THAT MAY BE RELEVANT FOR THE IDENTIFICATION OF ADDITIONAL
29	<u>RECOMMENDA'</u>	<u>FIONS.</u>

1 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 2 1, 2018.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.