

Department of Legislative Services
Maryland General Assembly
2003 Session

FISCAL AND POLICY NOTE

House Bill 981 (Delegate Stern)

Health and Government Operations

Education, Health, and
Environmental Affairs

Maternal Mortality Review Program - Termination Provision - Repeal

This bill repeals the September 30, 2003 termination date for the Maternal Mortality Review Program within the Department of Health and Mental Hygiene (DHMH). The bill takes effect June 1, 2003.

Fiscal Summary

State Effect: Finances would continue for the program beyond the first quarter of FY 2004. The proposed FY 2004 State budget includes \$75,000 in federal fund expenditures for the program. Out-year expenditures are expected to remain constant. No effect on revenues.

Local Effect: None.

Small Business Effect: None.

Analysis

Current Law: Chapter 74 of 2000 established the Maternal Mortality Review Program to review maternal deaths and to develop strategies for the prevention of maternal deaths. The program terminates September 30, 2003.

In consultation with the maternal child health committee of the Medical and Chirurgical Faculty of the State of Maryland (MedChi), the Secretary of Health and Mental Hygiene was required to develop a system to: identify maternal death cases; review medical

records and other relevant data; contact family members and other affected or involved persons to collect additional relevant data; consult with relevant experts to evaluate the records and data collected; make determinations regarding the preventability of maternal deaths; develop recommendations for the prevention of maternal deaths; and disseminate findings and recommendations to policy makers, health care providers, health care facilities, and the general public.

Background: There were 247 deaths that occurred during pregnancy or within one year of delivery or pregnancy termination in Maryland from 1993 through 1998, according to a study published in the *Journal of the American Medical Association*. The study also revealed that a woman who is pregnant or recently gave birth is more likely to die as a result of a homicide than from any other cause. Cardiovascular disorders were the second leading cause of deaths.

DHMH is developing strategies to help prevent deaths among these women, including addressing maternal depression, which can lead to suicide.

State Fiscal Impact: The proposed fiscal 2004 budget includes \$75,000 in federal Maternal Child Health Services Block Grant expenditures for this program. Out-year expenditures are expected to remain constant. No effect on revenues.

Additional Information

Prior Introductions: None.

Cross File: SB 688 (Senator Hollinger) – Education, Health, and Environmental Affairs.

Information Source(s): Department of Health and Mental Hygiene; “Enhanced Surveillance for Pregnancy-Associated Mortality-Maryland, 1993-1998,” *Journal of the American Medical Association*, March 21, 2001; Department of Legislative Services

Fiscal Note History: First Reader - March 11, 2003
ncs/jr

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