

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: SB-304

AN ACT ESTABLISHING A MATERNITY MORTALITY REVIEW COMMITTEE

Title: WITHIN THE DEPARTMENT OF PUBLIC HEALTH.

Vote Date: 03/19/2018

Vote Action: Joint Favorable

PH Date: 3/5/2018

File No.:

***Disclaimer:** The following Joint Favorable Report is prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose.*

SPONSORS OF BILL:

Public Health Committee

REASONS FOR BILL:

The bill establishes an 11 –member Maternity Mortality Review Panel (MMRP) within the DPH charged with collecting data related to maternal deaths in our state. Once associated factors are identified, the panel would make recommendations to improve the delivery of health care services to this group. Licensed health care providers, health care facilities and pharmacies must provide the panel access to all relevant medical records associated with maternal deaths. Such information is confidential, not subject to public disclosure, and cannot be subpoenaed in a judicial proceeding. Additionally, health care providers, facilities and pharmacies are immune from civil liability or disciplinary action for efforts to comply with the bill.

RESPONSE FROM ADMINISTRATION/AGENCY:

Raul Pino, Commissioner of the Connecticut Department of Public Health: This legislation would require DPH to conduct a comprehensive review of maternal deaths in the state to identify factors associated with such events and to propose recommendations to improve health care services to this population. Currently, the DPH participates in a statewide Maternal Mortality Review Committee (MMRC). This is an interdisciplinary committee which is responsible for reviewing maternal mortality. As such, the Department has concerns regarding the legislation as it is currently written. The Department would welcome working with the Committee to develop language that would support the review of maternal mortality and be acceptable to all parties.

Senator Art Linares, Connecticut General Assembly S-33: In his testimony, Sen. Linares points out that the United States has the highest maternal mortality rate of all industrialized countries. Clearly, we need to address this situation. One way to begin to reduce this finding is to have better record keeping. This will allow us to identify and better understand the reasons for these deaths. The data can then be used to help prevent future deaths. This legislation would create such a committee that would be tasked with collecting this data.

Subria Gordon, Executive Director of the CGA's Commission on Equity and Opportunity (CEO): In her testimony, Ms. Gordon highlighted that while the maternal mortality rate in the U.S overall is rising, the rate for black women is significantly higher than the rates for white women. The creation of the Maternity Mortality Review Panel established in this bill would collect relevant and valuable information to be reported annually to the DPH. The panel's findings would include recommendations for improving health care services for all groups of women.

NATURE AND SOURCES OF SUPPORT:

Tekisha Dwan Everette, Ex. Director of Health Equity Solutions: Ms. Everette pointed out in her testimony that there are considerable racial disparities in deaths related to a pregnancy. Health Equity Solutions is an organization that strives to ensure optimal health for people regardless of race, ethnicity or socio-economic status. Establishing a maternal mortality review board as outlined in SB 304 would provide vital information in helping to achieve this goal. Ms. Everette mentioned that the data presented in her testimony is five years old and does not provide information on specific subgroups. To address health disparities, such as maternal mortality rates, the collection of health data on racial subgroup populations, must be reported and acted upon in a timely standardized way. A proposal on race, ethnic and primary language data has been submitted to the committee. Home Equity Solutions looks forward to discussing this with committee.

Amanda Kallen, American College of Obstetricians and Gynecologists: Based upon current information from the Centers for Disease Control and Prevention, maternal deaths are on the rise in the U.S. At least half of these deaths are preventable. The standardized and uniform collection of data pertaining to maternal deaths, and the timely reporting of such information, is critical to finding ways to address and reduce maternal mortality rates on U.S.

NATURE AND SOURCES OF OPPOSITION:

The Connecticut Hospital Association: The CHA opposes SB 304 as written. The legislation defines maternal death as the death of a woman while pregnant or not later than one year after the pregnancy. CHA has 2 main concerns regarding the legislation. The language in SB 304 does not address situations that may have occurred within the year following the end of a pregnancy which resulted in death, but were not related to the pregnancy. i.e., a car accident. Also, as currently written in section 2, providers, healthcare facilities and pharmacies would have access to the medical records of a case under review regardless of their involvement or relationship to the case. CHA urges the Committee to consider specifically whether these sections require modification.

Reported by: Kathleen A. Panazza

Date: 3/22/2018