

SENATE AMENDMENT NO. _____

Offered by _____ Of _____

Amend SS/SCS/HCS/House Bill No. 2372, Page 28, Section 192.021, Line 18,

2 by inserting after all of said line the following:

3 "192.990. 1. There is hereby established within the
4 department of health and senior services the "Pregnancy-
5 Associated Mortality Review Board" to improve data
6 collection and reporting with respect to maternal deaths.
7 The department may collaborate with localities and with
8 other states to meet the goals of the initiative.

9 2. For purposes of this section, the following terms
10 shall mean:

11 (1) "Department", the Missouri department of health
12 and senior services;

13 (2) "Maternal death", the death of a woman while
14 pregnant or during the one-year period following the date of
15 the end of pregnancy, regardless of the cause of death and
16 regardless of whether a delivery, miscarriage, or death
17 occurs inside or outside of a hospital;

18 (3) "Maternity care deserts", counties in which access
19 to maternity care services is limited or absent, either
20 through a lack of services or through barriers to a woman's
21 ability to access care within a county. A "maternity care
22 desert" shall include, but not be limited to, any county
23 without a hospital or birth center offering obstetric care
24 and without any obstetric clinicians.

25 3. The board shall be composed of no more than
26 ~~[eighteen]~~ twenty-two members, with a chair elected from
27 among its membership. The board shall meet at least twice
28 per year and shall approve the strategic priorities, funding
29 allocations, work processes, and products of the board.
30 Members of the board shall be appointed by the director of
31 the department. Members shall serve four-year terms, except
32 that the initial terms shall be staggered so that
33 approximately one-third serve three-, four-, and five-year
34 terms.

35 4. The board shall have a multidisciplinary and
36 diverse membership that represents a variety of medical and
37 nursing specialties, including, but not limited to,
38 obstetrics and maternal-fetal care, as well as state or
39 local public health officials, epidemiologists,
40 statisticians, community organizations, geographic regions,
41 and other individuals or organizations that are most
42 affected by maternal deaths and lack of access to maternal
43 health care services. At least one member from each
44 congressional district shall be selected to serve on the
45 board and membership shall be demographically diverse and
46 shall include representation from both rural and urban
47 populations.

48 5. The duties of the board shall include, but not be
49 limited to:

- 50 (1) Conducting ongoing comprehensive,
51 multidisciplinary reviews of all maternal deaths;
52 (2) Identifying factors associated with maternal
53 deaths;
54 (3) Identifying maternity care deserts throughout the
55 state;
56 (4) Reviewing medical records and other relevant data,
57 which shall include, to the extent available:

58 (a) A description of the maternal deaths determined by
59 matching each death record of a maternal death to a birth
60 certificate of an infant or fetal death record, as
61 applicable, and an indication of whether the delivery,
62 miscarriage, or death occurred inside or outside of a
63 hospital;

64 (b) Data collected from medical examiner and coroner
65 reports, as appropriate; [and]

66 (c) The level and timing of prenatal and postnatal
67 medical care; and

68 (d) Using other appropriate methods or information to
69 identify maternal deaths, including deaths from pregnancy
70 outcomes not identified under paragraph (a) of this
71 subdivision;

72 [(4)] (5) Consulting with relevant experts, as needed;

73 [(5)] (6) Analyzing cases to produce recommendations
74 for reducing maternal mortality;

75 [(6)] (7) Disseminating recommendations to policy
76 makers, health care providers and facilities, and the
77 general public;

78 [(7)] (8) Recommending and promoting preventative
79 strategies and making recommendations for systems changes;

80 [(8)] (9) Protecting the confidentiality of the
81 hospitals and individuals involved in any maternal deaths;

82 [(9)] (10) Examining racial and social disparities in
83 maternal deaths;

84 (11) Investigating and developing recommendations
85 regarding approaches taken in other states or other
86 organizations to reduce or eliminate racial inequities in
87 maternal deaths, including community-driven strategies,
88 health care accessibility, insurance availability, and other
89 barriers to access and delivery of prenatal and postpartum
90 care;

91 [(10)] (12) Subject to appropriation, providing for
92 voluntary and confidential case reporting of maternal deaths
93 to the appropriate state health agency by family members of
94 the deceased, and other appropriate individuals, for
95 purposes of review by the board;

96 [(11)] (13) Making publicly available the contact
97 information of the board for use in such reporting;

98 [(12)] (14) Conducting outreach to local professional
99 organizations, community organizations, and social services
100 agencies regarding the availability of the review board;

101 [and]

102 (15) Examining and developing recommendations on the
103 adequacy of data collected under this section and if
104 additional categories of data would be informative in the
105 study of maternal deaths in Missouri; and

106 [(13)] (16) Ensuring that data collected under this
107 section is made available, as appropriate and practicable,
108 for research purposes, in a manner that protects
109 individually identifiable or potentially identifiable
110 information and that is consistent with state and federal
111 privacy laws.

112 6. The board may contract with other entities
113 consistent with the duties of the board.

114 7. (1) Before June 30, 2020, and annually thereafter,
115 the board shall submit to the Director of the Centers for
116 Disease Control and Prevention, the director of the
117 department, the governor, and the general assembly a report
118 on maternal mortality in the state based on data collected
119 through ongoing comprehensive, multidisciplinary reviews of
120 all maternal deaths, and any other projects or efforts
121 funded by the board. The data shall be collected using best
122 practices to reliably determine and include all maternal
123 deaths, regardless of the outcome of the pregnancy and shall

124 include data, findings, and recommendations of the
125 committee, and, as applicable, information on the
126 implementation during such year of any recommendations
127 submitted by the board in a previous year. Data reported by
128 the board shall be disaggregated by race, ethnicity,
129 language, nationality, age, zip code, the presence or
130 absence of maternity care deserts, and level and timing of
131 prenatal and postnatal care in a manner that protects
132 individually identifiable or potentially identifiable
133 information and that is consistent with state and federal
134 privacy laws.

135 (2) The report shall be made available to the public
136 on the department's website and the director shall
137 disseminate the report to all health care providers and
138 facilities that provide women's health services in the state.

139 8. The director of the department, or his or her
140 designee, shall provide the board with the copy of the death
141 certificate and any linked birth or fetal death certificate
142 for any maternal death occurring within the state.

143 9. Upon request by the department, health care
144 providers, health care facilities, clinics, laboratories,
145 medical examiners, coroners, law enforcement agencies,
146 driver's license bureaus, other state agencies, and
147 facilities licensed by the department shall provide to the
148 department data related to maternal deaths from sources such
149 as medical records, autopsy reports, medical examiner's
150 reports, coroner's reports, law enforcement reports, motor
151 vehicle records, social services records, and other sources
152 as appropriate. Such data requests shall be limited to
153 maternal deaths which have occurred within the previous
154 twenty-four months. No entity shall be held liable for
155 civil damages or be subject to any criminal or disciplinary
156 action when complying in good faith with a request from the

157 department for information under the provisions of this
158 subsection.

159 10. (1) The board shall protect the privacy and
160 confidentiality of all patients, decedents, providers,
161 hospitals, or any other participants involved in any
162 maternal deaths. In no case shall any individually
163 identifiable health information be provided to the public or
164 submitted to an information clearinghouse.

165 (2) Nothing in this subsection shall prohibit the
166 board or department from publishing statistical compilations
167 and research reports that:

168 (a) Are based on confidential information relating to
169 mortality reviews under this section; and

170 (b) Do not contain identifying information or any
171 other information that could be used to ultimately identify
172 the individuals concerned.

173 (3) Information, records, reports, statements, notes,
174 memoranda, or other data collected under this section shall
175 not be admissible as evidence in any action of any kind in
176 any court or before any other tribunal, board, agency, or
177 person. Such information, records, reports, notes,
178 memoranda, data obtained by the department or any other
179 person, statements, notes, memoranda, or other data shall
180 not be exhibited nor their contents disclosed in any way, in
181 whole or in part, by any officer or representative of the
182 department or any other person. No person participating in
183 such review shall disclose, in any manner, the information
184 so obtained except in strict conformity with such review
185 project. Such information shall not be subject to
186 disclosure under chapter 610.

187 (4) All information, records of interviews, written
188 reports, statements, notes, memoranda, or other data
189 obtained by the department, the board, and other persons,

190 agencies, or organizations so authorized by the department
191 under this section shall be confidential.

192 (5) All proceedings and activities of the board,
193 opinions of members of such board formed as a result of such
194 proceedings and activities, and records obtained, created,
195 or maintained under this section, including records of
196 interviews, written reports, statements, notes, memoranda,
197 or other data obtained by the department or any other
198 person, agency, or organization acting jointly or under
199 contract with the department in connection with the
200 requirements of this section, shall be confidential and
201 shall not be subject to subpoena, discovery, or introduction
202 into evidence in any civil or criminal proceeding; provided,
203 however, that nothing in this section shall be construed to
204 limit or restrict the right to discover or use in any civil
205 or criminal proceeding anything that is available from
206 another source and entirely independent of the board's
207 proceedings.

208 (6) Members of the board shall not be questioned in
209 any civil or criminal proceeding regarding the information
210 presented in or opinions formed as a result of a meeting or
211 communication of the board; provided, however, that nothing
212 in this section shall be construed to prevent a member of
213 the board from testifying to information obtained
214 independently of the board or which is public information.

215 11. The department may use grant program funds to
216 support the efforts of the board and may apply for
217 additional federal government and private foundation grants
218 as needed. The department may also accept private,
219 foundation, city, county, or federal moneys to implement the
220 provisions of this section."; and

221 Further amend the title and enacting clause accordingly.