By: Thierry, Collier, Howard, et al.

H.B. No. 663

A BILL TO BE ENTITLED

- 1 AN ACT
- 2 relating to the confidentiality and reporting of certain maternal
- 3 mortality information to the Department of State Health Services
- 4 and to a work group establishing a maternal mortality and morbidity
- 5 data registry.
- 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
- 7 SECTION 1. Section 34.001, Health and Safety Code, is
- 8 amended by adding Subdivision (11-a) and amending Subdivision (12)
- 9 to read as follows:
- 10 (11-a) "Pregnancy-associated death" means the death
- 11 of a woman from any cause that occurs during or within one year of
- 12 <u>delivery or end of pregnancy, regardless of the outcome or location</u>
- 13 of the pregnancy.
- 14 (12) "Pregnancy-related death" means the death of a
- 15 woman while pregnant or within one year of delivery or end of
- 16 pregnancy, regardless of the outcome, duration, or location [and
- 17 site] of the pregnancy, from any cause related to or aggravated by
- 18 the pregnancy or its management, but not from accidental or
- 19 incidental causes.
- 20 SECTION 2. The heading to Section 34.002, Health and Safety
- 21 Code, is amended to read as follows:
- Sec. 34.002. TEXAS MATERNAL MORTALITY AND MORBIDITY REVIEW
- 23 COMMITTEE; REFERENCE IN LAW.
- SECTION 3. Section 34.002, Health and Safety Code, is

- 1 amended by adding Subsection (a-1) and amending Subsection (e) to
- 2 read as follows:
- 3 (a-1) Notwithstanding any other law, a reference in this
- 4 chapter or other law to the Maternal Mortality and Morbidity Task
- 5 Force means the Texas Maternal Mortality and Morbidity Review
- 6 Committee.
- 7 (e) A member of the review committee appointed under
- 8 Subsection (b)(1) is not entitled to compensation for service on
- 9 the review committee but, subject to Section 34.014(b), may be
- 10 <u>reimbursed</u> [or reimbursement] for travel or other expenses incurred
- 11 by the member while conducting the business of the review
- 12 committee.
- 13 SECTION 4. Section 34.008, Health and Safety Code, is
- 14 amended by adding Subsection (e) to read as follows:
- (e) For purposes of this chapter, a licensed health care
- 16 provider, including a nurse, who is involved in obtaining
- 17 information relevant to a case of pregnancy-associated death,
- 18 pregnancy-related death, or severe maternal morbidity under this
- 19 chapter and who is required under other law to report a violation
- 20 related to the provider's profession is exempt from that reporting
- 21 requirement for the information obtained under this chapter.
- SECTION 5. Section 34.009(a), Health and Safety Code, is
- 23 amended to read as follows:
- 24 (a) Any information pertaining to a <u>pregnancy-associated</u>
- 25 death, a pregnancy-related death, or severe maternal morbidity is
- 26 confidential for purposes of this chapter.
- 27 SECTION 6. Section 34.014, Health and Safety Code, is

- 1 amended to read as follows:
- 2 Sec. 34.014. FUNDING. (a) The department may accept gifts
- 3 and grants from any source to fund the duties of the department and
- 4 the review committee under this chapter.
- 5 (b) The department may use only gifts, grants, or federal
- 6 funds to reimburse travel or other expenses incurred by a member of
- 7 the review committee in accordance with Section 34.002(e).
- 8 SECTION 7. Section 34.017, Health and Safety Code, is
- 9 amended by adding Subsections (c), (d), and (e) to read as follows:
- 10 (c) The department may allow voluntary and confidential
- 11 reporting to the department of pregnancy-associated deaths and
- 12 pregnancy-related deaths by health care professionals, health care
- 13 facilities, and persons who complete the medical certification for
- 14 <u>a death certificate for deaths reviewed or analyzed by the review</u>
- 15 <u>committee.</u>
- 16 (d) The department shall allow voluntary and confidential
- 17 reporting to the department of pregnancy-associated deaths and
- 18 pregnancy-related deaths by family members of or other appropriate
- 19 individuals associated with a deceased patient. The department
- 20 shall:
- 21 (1) post on the department's Internet website the
- 22 contact information of the person to whom a report may be submitted
- 23 <u>under this subsection; and</u>
- 24 (2) conduct outreach to local health organizations on
- 25 the availability of the review committee to review and analyze the
- 26 deaths described by this subsection.
- (e) Information reported to the department under this

- 1 <u>section</u> is confidential in accordance with Section 34.009.
- 2 SECTION 8. Chapter 34, Health and Safety Code, is amended by
- 3 adding Section 34.022 to read as follows:
- 4 Sec. 34.022. DEVELOPMENT OF WORK GROUP ON ESTABLISHMENT OF
- 5 MATERNAL MORTALITY AND MORBIDITY DATA REGISTRY. (a) In this
- 6 section, "maternal mortality and morbidity data registry" means an
- 7 <u>Internet website or database established to collect individualized</u>
- 8 patient information and aggregate statistical reports on the health
- 9 status, health behaviors, and service delivery needs of maternal
- 10 patients.
- 11 (b) The department shall establish a work group to provide
- 12 advice and consultation services to the department on the report
- 13 and recommendations required by Subsection (e). The work group
- 14 consists of the following members appointed by the commissioner
- 15 unless otherwise provided:
- 16 (1) one member with appropriate expertise appointed by
- 17 the governor;
- 18 (2) two members with appropriate expertise appointed
- 19 by the lieutenant governor;
- 20 (3) two members with appropriate expertise appointed
- 21 by the speaker of the house of representatives;
- 22 (4) the chair of the Texas Hospital Association or the
- 23 <u>chair's designee;</u>
- 24 (5) the president of the Texas Medical Association or
- 25 the president's designee;
- 26 (6) the president of the Texas Nurses Association or
- 27 the president's designee;

1	(7) one member who is a physician specializing	in
2	obstetrics and gynecology;	
3	(8) one member who is a physician specializing	in
4	<pre>maternal and fetal medicine;</pre>	
5	(9) one member who is a registered nurse specializing	ng
6	in labor and delivery;	
7	(10) one member who is a representative of a hospita	al
8	located in a rural area of this state;	
9	(11) one member who is a representative of a hospita	al
10	located in a county with a population of four million or more;	
11	(12) one member who is a representative of a hospita	al
12	located in an urban area of this state in a county with a population	on
13	of less than four million;	
14	(13) one member who is a representative of a publi	ic
15	hospital;	
16	(14) one member who is a representative of a priva-	tе
17	hospital;	
18	(15) one member who is an epidemiologist;	
19	(16) one member who is a statistician;	
20	(17) one member who is a public health expert; and	
21	(18) any other member with appropriate expertise a	as
22	the commissioner determines necessary.	
23	(c) The work group shall elect from among the membership	а
24	presiding officer.	
25	(d) The work group shall meet periodically and at the ca	11
26	of the presiding officer.	

27

(e) With the goals of improving the quality of maternal care

- 1 and combating maternal mortality and morbidity and with the advice
- 2 of the work group established under this section, the department
- 3 shall assess and prepare a report and recommendations on the
- 4 establishment of a secure maternal mortality and morbidity data
- 5 registry to record information submitted by participating health
- 6 care providers on the health status of maternal patients over
- 7 varying periods, including the frequency and characteristics of
- 8 maternal mortality and morbidity during pregnancy and the
- 9 postpartum period.
- 10 <u>(f) In developing the report and recommendations required</u>
- 11 by Subsection (e), the department shall:
- 12 (1) consider individual maternal patient information
- 13 related to health status and health care received over varying
- 14 periods that should be submitted to the registry;
- 15 (2) review existing and developing registries used
- 16 within and outside this state that serve the same or a similar
- 17 purpose as a maternal mortality and morbidity data registry;
- 18 (3) review ongoing health data collection efforts and
- 19 initiatives in this state to avoid duplication and ensure
- 20 efficiency;
- 21 (4) review and consider existing laws that govern data
- 22 <u>submission</u> and <u>sharing</u>, <u>including</u> laws <u>governing</u> the
- 23 confidentiality and security of individually identifiable health
- 24 information; and
- 25 (5) evaluate the clinical period during which a health
- 26 care provider should submit to a maternal mortality and morbidity
- 27 data registry known and available information, including

1	<u>information:</u>
2	(A) from a maternal patient's first appointment
3	with an obstetrician and each subsequent appointment until the date
4	of delivery;
5	(B) for the 42 days following a patient's
6	delivery; and
7	(C) until the 364th day following a patient's
8	delivery.
9	(g) If the department recommends the establishment of a
10	maternal mortality and morbidity data registry, the report under
11	Subsection (e) must include specific recommendations on the
12	relevant individual patient information and categories of
13	information to be submitted to the registry, including
14	recommendations on the intervals for submission of information.
15	The categories must include:
16	(1) notifiable maternal deaths, including
17	individualized patient data on:
18	(A) patients who die during pregnancy; and
19	(B) patients who were pregnant at any point in
20	the 12 months preceding their death;
21	(2) individualized patient information on each
22	<pre>pregnancy and birth;</pre>
23	(3) individualized patient data on the most common
24	high-risk conditions for maternal patients and severe cases of
25	<pre>maternal morbidity;</pre>
26	(4) nonidentifying demographic data from the
27	provider's patient admissions records, including age, race, and

-	
1	patient health benefit coverage status; and
2	(5) a statistical summary based on an aggregate of
3	individualized patient data that includes the following:
4	(A) total live births;
5	(B) maternal age distributions;
6	(C) maternal race and ethnicity distributions;
7	(D) health benefit plan issuer distributions;
8	(E) incidence of diabetes, hypertension, and
9	hemorrhage among patients;
10	(F) gestational age distributions;
11	(G) birth weight distributions;
12	(H) total preterm birth rate;
13	(I) rate of vaginal deliveries; and
14	(J) rate of cesarean sections.
15	(h) If the department establishes a maternal mortality and
16	morbidity data registry, a health care provider submitting
17	information to the registry shall comply with all applicable
18	federal and state laws relating to patient confidentiality and
19	quality of health care information.
20	(i) The report and recommendations required under
21	Subsection (e) must outline potential uses of a maternal mortality
22	and morbidity data registry, including:
23	(1) periodic department analysis of information
24	submitted to the registry; and
25	(2) the feasibility of preparing and issuing reports,
26	using aggregated information, to each health care provider
27	narticipating in the registry to improve the quality of maternal

- 1 care.
- 2 (j) Not later than September 1, 2024, the department shall
- 3 prepare and submit to the governor, the lieutenant governor, the
- 4 speaker of the house of representatives, the Legislative Budget
- 5 Board, and each standing committee of the legislature having
- 6 primary jurisdiction over the department and post on the
- 7 department's Internet website the report and recommendations
- 8 required under Subsection (e).
- 9 (k) This section expires September 1, 2025.
- 10 SECTION 9. The executive commissioner of the Health and
- 11 Human Services Commission shall adopt rules as necessary to
- 12 implement Section 34.022, Health and Safety Code, as added by this
- 13 Act, not later than December 1, 2023.
- 14 SECTION 10. This Act takes effect September 1, 2023.