

BILL ANALYSIS

S.B. 495
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Public Health
Committee Report (Unamended)

BACKGROUND AND PURPOSE

Interested parties assert that maternal mortality is often used to measure health and well-being for women and that improved surveillance efforts can improve maternal mortality estimates and inform the development of strategies to address the needs of maternal and child health populations. S.B. 495 seeks to create the Maternal Mortality and Morbidity Task Force in the hopes of reducing preventable maternal deaths and complications by identifying trends and implementing changes in order to improve health outcomes.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 of this bill.

ANALYSIS

S.B. 495 amends the Health and Safety Code to create the Maternal Mortality and Morbidity Task Force as a multidisciplinary advisory committee within the Department of State Health Services (DSHS). The bill makes the task force subject to review under the Texas Sunset Act and, unless continued in existence as provided by that act, provides that the task force is abolished and provisions relating to the task force expire September 1, 2019. The bill sets out provisions relating to the composition, appointment, administration, and operation of the task force. The bill establishes that meetings of the task force are closed to the public and are not subject to open meeting laws.

S.B. 495 requires the task force to study and review cases of pregnancy-related deaths and trends in severe maternal morbidity, determine the feasibility of the task force studying cases of severe maternal morbidity, and make recommendations to help reduce the incidence of pregnancy-related deaths and severe maternal morbidity in Texas. The bill authorizes DSHS and the task force to consult with any relevant experts and stakeholders and, in gathering information, to consult with representatives of any relevant state professional associations and organizations. The bill prohibits a member of the task force or employee of DSHS from disclosing any identifying information of an applicable patient or a health care provider while consulting with such individuals or organizations. The bill authorizes DSHS, on behalf of the task force, to enter into agreements with institutions of higher education or with other organizations consistent with the duties of DSHS or the task force.

S.B. 495 requires DSHS to determine a statistically significant number of cases of pregnancy-related deaths for review and to randomly select cases for the task force to review to reflect a cross-section of pregnancy-related deaths in Texas. The bill requires DSHS to analyze aggregate data of severe maternal morbidity in Texas to identify any trends and authorizes DSHS, if feasible, to randomly select cases of severe maternal morbidity for the task force to review to reflect any such identified trends. The bill requires DSHS, on selecting a case of pregnancy-related death or severe maternal morbidity for review, to obtain information relevant to the case to enable the task force to review the case and to provide the information to the task force. The

bill prohibits such information provided to the task force from including identifying information of a patient or health care provider. The bill requires a hospital, birthing center, or other custodian of information requested by DSHS to provide the information to DSHS, on request of DSHS, without the authorization of the patient or, if the patient is deceased, without the authorization of the patient's family. The bill specifies that a person who provides such information to DSHS is not subject to an administrative, civil, or criminal action for damages or other relief for providing the information.

S.B. 495 sets out provisions relating to the confidentiality and disclosure of task force work products and information pertaining to a pregnancy-related death or severe maternal morbidity obtained for purposes of the task force. The bill authorizes the task force to publish statistical studies and research reports based on confidential information, provided that the information is published in the aggregate, does not identify or include information that could be used to identify a patient or the patient's family, and does not identify a health care provider. The bill sets out provisions relating to the privileged nature of task force work product and related confidential information for purposes of subpoena and discovery and to the liability of a task force member or a person employed by or acting in an advisory capacity to the task force.

S.B. 495 authorizes DSHS to establish and maintain an electronic database to track cases of pregnancy-related deaths and severe maternal morbidity to assist DSHS and the task force in performing functions under the bill's provisions. The bill prohibits the information in the database from including identifying information and specifies that the database may be accessed only by DSHS and the task force for purposes described in the bill's provisions. The bill exempts from its provisions the disclosure of records pertaining to voluntary or therapeutic termination of pregnancy and prohibits such records from being collected, maintained, or disclosed under its provisions.

S.B. 495 requires DSHS to apply for and use any available federal money to fund the duties of DSHS and the task force and authorizes DSHS to accept gifts and grants from any source to fund such duties. The bill requires the task force and DSHS, not later than September 1 of each even-numbered year, to submit a joint report on the findings of the task force to the governor, lieutenant governor, speaker of the house of representatives, and appropriate committees of the legislature. The bill requires the report to include the task force's recommendations to help reduce the incidence of pregnancy-related deaths and severe maternal morbidity in Texas. The bill requires DSHS to disseminate the report to specified state professional associations and organizations and to make the report publicly available in paper or electronic form. The bill specifies that DSHS and the task force are not required to submit the first report before September 1, 2016.

S.B. 495 authorizes the executive commissioner of the Health and Human Services Commission to adopt rules to implement the bill's provisions. The bill authorizes DSHS to have access to birth records, fetal death records, maternal death records, and hospital and birthing center discharge data that may include the identity of a patient to fulfill its duties and prohibits DSHS from disclosing such information to the task force or any other person.

S.B. 495 requires DSHS, not later than September 1, 2014, to submit a report to the governor, lieutenant governor, speaker of the house of representatives, and appropriate committees of the legislature outlining DSHS's progress in establishing the Maternal Mortality and Morbidity Task Force and any recommendations for legislation to assist DSHS in studying pregnancy-related deaths and severe maternal morbidity. The bill requires the commissioner of state health services to appoint the members of the task force not later than December 1, 2013, and provides for the staggered expiration of the members' initial terms.

EFFECTIVE DATE

September 1, 2013.