

Amend SB 2150 (house committee report) by adding the following appropriately numbered SECTIONS to the bill and renumbering subsequent SECTIONS of the bill accordingly:

SECTION _____. Chapter 34, Health and Safety Code, is amended by adding Section 34.019 to read as follows:

Sec. 34.019. DEVELOPMENT OF WORK GROUP ON ESTABLISHMENT OF MATERNAL MORTALITY AND MORBIDITY DATA REPORTING REGISTRY. (a) In this section, "maternal mortality and morbidity data reporting registry" means an Internet website or database established to report and collect individualized patient data and aggregate statistical reports on the health status, health behaviors, and service delivery needs of maternal patients, including data on pregnancy-associated deaths.

(b) The department shall establish a work group to provide advice and consultation services to the department on the report and recommendations required by Subsection (e). The work group consists of the following members appointed by the commissioner unless otherwise provided:

(1) one member with appropriate expertise appointed by the governor;

(2) two members with appropriate expertise appointed by the lieutenant governor;

(3) two members with appropriate expertise appointed by the speaker of the house of representatives;

(4) the chair of the Texas Hospital Association or the chair's designee;

(5) the president of the Texas Medical Association or the president's designee;

(6) the president of the Texas Nurses Association or the president's designee;

(7) one member who is a physician specializing in obstetrics and gynecology;

(8) one member who is a physician specializing in maternal and fetal medicine;

(9) one member who is a registered nurse specializing in labor and delivery;

(10) one member who is a representative of a hospital

located in a rural area of this state;

(11) one member who is a representative of a hospital located in a county with a population of four million or more;

(12) one member who is a representative of a hospital located in an urban area of this state in a county with a population of less than four million;

(13) one member who is a representative of a public hospital;

(14) one member who is a representative of a private hospital;

(15) one member who is an epidemiologist;

(16) one member who is a statistician;

(17) one member who is a public health expert; and

(18) any other member with appropriate expertise as the commissioner determines necessary.

(c) The work group shall elect from among the membership a presiding officer.

(d) The work group shall meet periodically and at the call of the presiding officer.

(e) With the goals of improving data reporting on maternal mortality and morbidity and pregnancy-associated deaths and with the advice of the work group established under this section, the department shall assess and prepare a report and recommendations on the establishment of a secure data registry to record information reported by participating health care providers on the health status of maternal patients over varying periods, including the frequency and characteristics of maternal mortality and morbidity during pregnancy and the postpartum period.

(f) In developing the report and recommendations required by Subsection (e), the department shall:

(1) consider individual maternal patient information related to health status and health care received over varying periods that should be submitted to the registry;

(2) review existing and developing registries used in and outside this state that serve the same or a similar purpose as a maternal mortality and morbidity data registry;

(3) review ongoing health data reporting and

collection efforts and initiatives in this state to avoid duplication and ensure efficiency;

(4) review and consider existing laws that govern data submission and sharing, including laws governing the confidentiality and security of individually identifiable health information; and

(5) evaluate the clinical period during which known and available information should be submitted to a maternal mortality and morbidity data registry by a health care provider, including available information:

(A) from a maternal patient's first appointment with an obstetrician and each subsequent appointment until the date of delivery;

(B) for the 42 days following a patient's delivery; and

(C) until the 364th day following a patient's delivery.

(g) If the department recommends the establishment of a maternal mortality and morbidity data registry, the report under Subsection (e) must include specific recommendations on the relevant individual patient information and categories of information to be submitted to the registry, including recommendations on the intervals for submission of information. The department shall consider including the following categories of individual patient information in the report:

(1) notifiable maternal deaths, including individualized patient data on:

(A) patients who die during pregnancy; and

(B) patients who were pregnant at any point in the 12 months preceding their death;

(2) individualized patient information on each pregnancy and birth;

(3) individualized patient data on the most common high-risk conditions for maternal patients and severe cases of maternal morbidity;

(4) nonidentifying demographic data from the provider's patient admissions records, including age, race, and

patient health benefit coverage status; and

(5) a statistical summary based on an aggregate of individualized patient data that includes the following:

- (A) total live births;
- (B) maternal age distributions;
- (C) maternal race and ethnicity distributions;
- (D) health benefit plan issuer distributions;
- (E) incidence of diabetes, hypertension, and hemorrhage among patients;
- (F) gestational age distributions;
- (G) birth weight distributions;
- (H) total preterm birth rate;
- (I) rate of vaginal deliveries; and
- (J) rate of cesarean sections.

(h) If the department establishes a maternal mortality and morbidity data registry, a health care provider submitting information to the registry shall comply with all applicable federal and state laws relating to patient confidentiality and quality of health care information.

(i) The report and recommendations required under Subsection (e) must outline potential uses of a maternal mortality and morbidity data registry, including:

(1) periodic analysis by the department of information submitted to the registry; and

(2) the feasibility of preparing and issuing reports, using aggregated information, to each health care provider participating in the registry to improve the quality of maternal care.

(j) Not later than September 1, 2020, the department shall prepare and submit to the governor, lieutenant governor, speaker of the house of representatives, Legislative Budget Board, and each standing committee of the legislature having primary jurisdiction over the department and post on the department's Internet website the report and recommendations required under Subsection (e).

(k) This section expires September 1, 2021.

SECTION _____. The executive commissioner of the Health and Human Services Commission shall adopt rules as necessary to

implement Section 34.019, Health and Safety Code, as added by this Act, not later than December 1, 2019.