

BILL ANALYSIS

C.S.H.B. 2703
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Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

It has been suggested that the state does not have accurate information on the number of mothers who are dying after childbirth and that a lack of comprehensive, reliable patient data may contribute to an underestimation of the number of maternal deaths in Texas. C.S.H.B. 2703 seeks to address this issue by requiring the Department of State Health Services to establish a work group on the establishment of a maternal mortality and morbidity data registry and to submit a report and recommendations regarding such a registry.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

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 2 of this bill.

ANALYSIS

C.S.H.B. 2703 amends the Health and Safety Code to require the Department of State Health Services (DSHS), with the advice of the work group established under the bill's provisions, to assess and prepare a report and recommendations on the establishment of a secure maternal mortality and morbidity data registry to record information submitted 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, with a goal of improving the quality of maternal care and combating maternal mortality and morbidity. The bill sets out requirements for DSHS in developing the report and recommendations. If DSHS recommends the establishment of a registry, the report 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 bill provides for the categories of individual patient data and requires a health care provider submitting information to the registry, if it is established, to comply with all applicable federal and state laws relating to patient confidentiality and quality of health care information.

C.S.H.B. 2703 requires the report and recommendations to outline potential uses of the registry, including periodic analysis by DSHS of information submitted to the registry and 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. The bill requires DSHS, not later than September 1, 2020, to 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 DSHS and post on the DSHS website the report and recommendations.

C.S.H.B. 2703 requires DSHS to establish a work group to provide advice and consultation services to DSHS on the report and recommendations. The bill sets out the composition of the work group and the manner of member appointments and provides for a presiding officer and periodic meetings.

C.S.H.B. 2703 requires the executive commissioner of the Health and Human Services Commission, not later than December 1, 2019, to adopt rules as necessary to implement the bill's provisions. The bill's provisions expires September 1, 2021.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 2703 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute does not include provisions requiring the Maternal Mortality and Morbidity Task Force to establish a data registry on the task force's website that contains data of participating health care providers on the frequency and characteristics of maternal mortality and morbidity during and following delivery, to ensure applicable registry updates, to annually analyze applicable date, or to fund the registry.

The substitute includes provisions requiring DSHS to assess and prepare a report and recommendations on the establishment of a secure maternal mortality and morbidity data registry, including provisions:

- requiring DSHS to establish a work group to provide advice and consultation services on the report and recommendations;
- setting out related report and recommendation requirements, including certain requirements for the registry if DSHS recommends its establishment;
- providing a deadline for the report; and
- providing for the expiration of the bill's provisions.