LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

May 22, 2019

TO: Honorable Dan Patrick, Lieutenant Governor, Senate

- **FROM:** John McGeady, Assistant Director Sarah Keyton, Assistant Director Legislative Budget Board
- **IN RE: SB2150** by Kolkhorst (Relating to the reporting of certain information on maternal mortality to the Department of State Health Services and the confidentiality of that information.), **As Passed 2nd House**

No significant fiscal implication to the State is anticipated.

The bill would amend the Health and Safety Code to require the Department of State Health Services (DSHS) to allow voluntary and confidential reporting of pregnancy-associated and pregnancy-related deaths by family members and other appropriate individuals associated with a deceased patient. The bill would require DSHS to post the contact information for who the reports are submitted to on the agency's website and conduct outreach to local health organizations on the availability of the Maternal Mortality and Morbidity Review Committee to review and analyze the deaths.

The bill would amend the Health and Safety Code to require DSHS to develop a work group with certain membership requirements to provide advice and consultation services on the establishment of a maternal mortality and morbidity data registry. The bill would require DSHS to prepare a submit a report with recommendations to the governor, lieutenant governor, speaker, Legislative Budget Board, and each standing committee of the legislature having primary jurisdiction over the department and post on DSHS' website before September 1, 2020.

The bill would allow DSHS to accept gifts and grants to fund the duties of the agency and the review committee. The bill would also require DSHS only to use gifts, grants, or federal funds to reimburse travel or related activities for the review committee.

This analysis assumes the provisions of the bill can be implemented using existing resources.

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 537 State Health Services, Department of **LBB Staff:** WP, AKi, EP, AMa