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| BILL ANALYSIS |

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| C.S.H.B. 852 |
| By: Thierry |
| Public Health |
| Committee Report (Substituted) |

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| **BACKGROUND AND PURPOSE**  The Texas Maternal Mortality and Morbidity Review Committee studies and reviews cases of pregnancy-related deaths and severe maternal morbidity to identify trends, rates, and disparities. The committee then develops recommendations to reduce maternal morbidity in Texas. In September of 2022, the committee and the Department of State Health Services (DSHS) delayed its report for further analysis until December 2022. In the recommendations from the committee and the DSHS Joint Biennial Report from 2022, the committee specifically highlighted a need for new expertise on the committee that is not currently represented in support of data analysis and review. Specifically, the committee recommended the addition of new expertise such as an emergency medicine provider, cardiologist, and oncologist. C.S.H.B. 852 seeks to address the recommendations set forth in 2022 by the committee by expanding the membership of the committee to include an additional community advocate, a managed care organization representative, and physicians specializing in emergency care, cardiology, anesthesiology, and oncology. |
| **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 this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution. |
| **ANALYSIS**  C.S.H.B. 852 amends the Health and Safety Code to increase the membership of the Texas Maternal Mortality and Morbidity Review Committee from 17 to 23 members. The commissioner of state health services appoints the six additional members as follows:   * one physician specializing in emergency care; * one physician specializing in cardiology; * one physician specializing in anesthesiology; * one physician specializing in oncology; * one representative of a managed care organization (MCO); and * one additional community advocate in a relevant field.   The bill revises the provision establishing staggered six-year terms for the committee's commissioner-appointed members to provide that one-third or as near as possible to one-third of the members' terms expire February 1 of each odd-numbered year. |
| **EFFECTIVE DATE**  September 1, 2023. |
| **COMPARISON OF INTRODUCED AND SUBSTITUTE**  While C.S.H.B. 852 may differ from the introduced in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.  Whereas both the introduced and the substitute increase the committee's membership with the addition of the four physicians, the substitute increases the membership by an additional two members, one representative of an MCO and an additional community advocate. |
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