

By: Thierry, Oliverson, Harris of Williamson,  
Collier, Howard, et al.

H.B. No. 663

A BILL TO BE ENTITLED

1 AN ACT  
2 relating to the confidentiality and reporting of certain maternal  
3 mortality information to the Department of State Health Services  
4 and to a work group establishing a maternal mortality and morbidity  
5 data registry.

6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

7 SECTION 1. Section 34.001, Health and Safety Code, is  
8 amended by adding Subdivision (11-a) and amending Subdivision (12)  
9 to read as follows:

10 (11-a) "Pregnancy-associated death" means the death  
11 of a woman from any cause that occurs during or within one year of  
12 delivery or end of pregnancy, regardless of the outcome or location  
13 of the pregnancy.

14 (12) "Pregnancy-related death" means the death of a  
15 woman while pregnant or within one year of delivery or end of  
16 pregnancy, regardless of the outcome, duration, or location [~~and~~  
17 ~~site~~] of the pregnancy, from any cause related to or aggravated by  
18 the pregnancy or its management, but not from accidental or  
19 incidental causes.

20 SECTION 2. The heading to Section 34.002, Health and Safety  
21 Code, is amended to read as follows:

22 Sec. 34.002. TEXAS MATERNAL MORTALITY AND MORBIDITY REVIEW  
23 COMMITTEE; REFERENCE IN LAW.

24 SECTION 3. Section 34.002, Health and Safety Code, is

1 amended by adding Subsection (a-1) and amending Subsection (e) to  
2 read as follows:

3 (a-1) Notwithstanding any other law, a reference in this  
4 chapter or other law to the Maternal Mortality and Morbidity Task  
5 Force means the Texas Maternal Mortality and Morbidity Review  
6 Committee.

7 (e) A member of the review committee appointed under  
8 Subsection (b)(1) is not entitled to compensation for service on  
9 the review committee, but may receive ~~or~~ reimbursement from the  
10 department as provided by Section 2110.004, Government Code, for  
11 travel ~~or other~~ expenses incurred by the member while conducting  
12 the business of the review committee.

13 SECTION 4. Section 34.008, Health and Safety Code, is  
14 amended by adding Subsection (e) to read as follows:

15 (e) Notwithstanding any other law and for purposes of this  
16 chapter, a health care provider, including a nurse, who during the  
17 review of information relevant to a case of pregnancy-associated  
18 death, pregnancy-related death, or severe maternal morbidity  
19 obtained under this chapter learns of conduct related to the  
20 provider's profession that is subject to a reporting requirement is  
21 exempt from that reporting requirement for the reviewed  
22 information.

23 SECTION 5. Section 34.009(a), Health and Safety Code, is  
24 amended to read as follows:

25 (a) Any information pertaining to a pregnancy-associated  
26 death, a pregnancy-related death, or severe maternal morbidity is  
27 confidential for purposes of this chapter.

1 SECTION 6. Section 34.014, Health and Safety Code, is  
2 amended to read as follows:

3 Sec. 34.014. FUNDING. (a) The department may accept gifts  
4 and grants from any source to fund the duties of the department and  
5 the review committee under this chapter.

6 (b) The department may use only gifts, grants, or federal  
7 funds to reimburse travel or other expenses incurred by a member of  
8 the review committee in accordance with Section 34.002(e).

9 SECTION 7. Section 34.017, Health and Safety Code, is  
10 amended by adding Subsections (c), (d), and (e) to read as follows:

11 (c) The department may allow voluntary and confidential  
12 reporting to the department of pregnancy-associated deaths and  
13 pregnancy-related deaths by health care professionals, health care  
14 facilities, and persons who complete the medical certification for  
15 a death certificate for deaths reviewed or analyzed by the review  
16 committee.

17 (d) The department shall allow voluntary and confidential  
18 reporting to the department of pregnancy-associated deaths and  
19 pregnancy-related deaths by family members of or other appropriate  
20 individuals associated with a deceased patient. The department  
21 shall:

22 (1) post on the department's Internet website the  
23 contact information of the person to whom a report may be submitted  
24 under this subsection; and

25 (2) conduct outreach to local health organizations on  
26 the availability of the review committee to review and analyze the  
27 deaths described by this subsection.

1       (e) Information reported to the department under this  
2 section is confidential in accordance with Section 34.009.

3       SECTION 8. Chapter 34, Health and Safety Code, is amended by  
4 adding Section 34.022 to read as follows:

5       Sec. 34.022. DEVELOPMENT OF WORK GROUP ON ESTABLISHMENT OF  
6 MATERNAL MORTALITY AND MORBIDITY DATA REGISTRY. (a) In this  
7 section, "maternal mortality and morbidity data registry" means an  
8 Internet website or database established to collect individualized  
9 patient information and aggregate statistical reports on the health  
10 status, health behaviors, and service delivery needs of maternal  
11 patients.

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

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

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

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

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

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

27               (6) the president of the Texas Nurses Association or

1 the president's designee;

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

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

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

8 (10) one member who is a representative of a hospital  
9 located in a rural area of this state;

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

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

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

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

19 (15) one member who is an epidemiologist;

20 (16) one member who is a statistician;

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

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

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

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

1       (e) With the goals of improving the quality of maternal care  
2 and combating maternal mortality and morbidity and with the advice  
3 of the work group established under this section, the department  
4 shall assess and prepare a report and recommendations on the  
5 establishment of a secure maternal mortality and morbidity data  
6 registry to record information submitted by participating health  
7 care providers on the health status of maternal patients over  
8 varying periods, including the frequency and characteristics of  
9 maternal mortality and morbidity during pregnancy and the  
10 postpartum period.

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

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

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

19               (3) review ongoing health data collection efforts and  
20 initiatives in this state to avoid duplication and ensure  
21 efficiency;

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

26               (5) evaluate the clinical period during which a health  
27 care provider should submit to a maternal mortality and morbidity

1 data registry known and available information, including  
2 information:

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

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

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

10 (g) If the department recommends the establishment of a  
11 maternal mortality and morbidity data registry, the report under  
12 Subsection (e) must include specific recommendations on the  
13 relevant individual patient information and categories of  
14 information to be submitted to the registry, including  
15 recommendations on the intervals for submission of information.  
16 The categories must include:

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

19 (A) patients who die during pregnancy; and

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

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

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

27 (4) nonidentifying demographic data from the

1 provider's patient admissions records, including age, race, and  
2 patient health benefit coverage status; and

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

5 (A) total live births;

6 (B) maternal age distributions;

7 (C) maternal race and ethnicity distributions;

8 (D) health benefit plan issuer distributions;

9 (E) incidence of diabetes, hypertension, and  
10 hemorrhage among patients;

11 (F) gestational age distributions;

12 (G) birth weight distributions;

13 (H) total preterm birth rate;

14 (I) rate of vaginal deliveries; and

15 (J) rate of cesarean sections.

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

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

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

26 (2) the feasibility of preparing and issuing reports,  
27 using aggregated information, to each health care provider



1 participating in the registry to improve the quality of maternal  
2 care.

3 (j) Not later than September 1, 2024, the department shall  
4 prepare and submit to the governor, the lieutenant governor, the  
5 speaker of the house of representatives, the Legislative Budget  
6 Board, and each standing committee of the legislature having  
7 primary jurisdiction over the department and post on the  
8 department's Internet website the report and recommendations  
9 required under Subsection (e).

10 (k) This section expires September 1, 2025.

11 SECTION 9. The executive commissioner of the Health and  
12 Human Services Commission shall adopt rules as necessary to  
13 implement Section 34.022, Health and Safety Code, as added by this  
14 Act, not later than December 1, 2023.

15 SECTION 10. This Act takes effect September 1, 2023.