

# House Bill 4133

Sponsored by Representative KENY-GUYER, Senator STEINER HAYWARD, Representative BYNUM, Senator FREDERICK; Representatives HERNANDEZ, MARSH, NOBLE, POWER, SALINAS, SANCHEZ, SMITH DB, Senators DEMBROW, MONNES ANDERSON, ROBLAN (Pre-session filed.)

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Establishes Maternal Mortality and Morbidity Review Committee to conduct studies and reviews of incidence of maternal mortality and severe maternal morbidity.

Requires committee to submit report to interim committees related to health care no later than January 1, 2019.

Requires committee to commence studies and reviews of incidence of severe maternal morbidity no later than July 1, 2021. Requires committee to submit second report to interim committees related to health care no later than January 1, 2022.

Takes effect on 91st day following adjournment sine die.

## A BILL FOR AN ACT

1  
2 Relating to Maternal Mortality and Morbidity Review Committee; and prescribing an effective date.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1. (1) As used in this section:**

5 (a) **“Maternal mortality” means the death of a person during pregnancy, or within 365**  
6 **days after pregnancy, when the cause is directly or indirectly related to pregnancy.**

7 (b) **“Severe maternal morbidity” includes pregnancy-related outcomes that result in sig-**  
8 **nificant short-term or long-term consequences to a person’s health.**

9 (2) **The Maternal Mortality and Morbidity Review Committee is established in the Oregon**  
10 **Health Authority to conduct studies and reviews of the incidence of maternal mortality and**  
11 **severe maternal morbidity and make recommendations to reduce the incidence of mortality**  
12 **and severe morbidity in this state.**

13 (3) **The committee shall consist of at least 10 but not more than 15 of the following**  
14 **members appointed by the Governor:**

15 (a) **A physician licensed under ORS chapter 677 who specializes in family medicine and**  
16 **whose practice includes maternity care;**

17 (b) **A physician licensed under ORS chapter 677 who specializes in obstetrics and gynec-**  
18 **ology;**

19 (c) **A physician licensed under ORS chapter 677 who specializes in the medical care of**  
20 **infants and whose practice includes hospital-based procedures;**

21 (d) **A licensed registered nurse who is certified by the Oregon State Board of Nursing as**  
22 **a nurse midwife nurse practitioner;**

23 (e) **A direct entry midwife licensed under ORS 687.405 to 687.495;**

24 (f) **An individual who represents the Oregon Health Authority with an expertise in the**  
25 **field of maternal and child health;**

26 (g) **An individual who represents a community-based organization that is culturally**  
27 **competent with respect to the community being served and that focuses on reducing racial**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 and ethnic disparities;

2 (h) An individual who represents a community-based organization that focuses on treat-  
3 ment of mental health;

4 (i) An individual who meets criteria for a doula adopted by the Oregon Health Authority  
5 in accordance with ORS 414.665; and

6 (j) An individual who is an expert in the field of public health.

7 (4) In appointing members under subsection (3) of this section, the Governor shall con-  
8 sider whether the composition of the committee is reasonably representative of this state's  
9 geographic, ethnic and economic diversity.

10 (5) Members of the committee shall be appointed to serve for terms of four years each.  
11 A vacancy on the committee shall be filled by appointment by the Governor for the unexpired  
12 term.

13 (6) The committee shall elect one of its members to serve as chairperson. A majority of  
14 the members of the committee constitutes a quorum.

15 (7) The committee shall meet at times and places specified by the call of the chairperson  
16 or of a majority of the members of the committee.

17 (8) The committee shall convene in closed, nonpublic meetings.

18 (9) A member of the committee is not entitled to compensation, but in the discretion of  
19 the Oregon Health Authority may be reimbursed from funds available to the authority for  
20 actual and necessary travel and other expenses incurred by the member in the performance  
21 of the member's official duties in the manner and amount provided in ORS 292.495.

22 (10) The Oregon Health Authority may adopt rules necessary for the operation of the  
23 committee.

24 (11) The committee shall:

25 (a) Study and review information relating to the incidence of maternal mortality and se-  
26 vere maternal morbidity in this state.

27 (b) Examine whether social determinants of health are contributing factors to the inci-  
28 dence of maternal mortality and severe maternal morbidity including, but not limited to:

29 (A) Race and ethnicity;

30 (B) Socio-economic status;

31 (C) Access to primary and preventative health care services for a person who is of  
32 reproductive-age; and

33 (D) Gaps in insurance coverage following pregnancy or postpartum.

34 (12)(a) Upon request by the division of the Oregon Health Authority that is charged with  
35 public health functions, the following shall make available to the committee information re-  
36 lating to the incidence of maternal mortality and severe maternal morbidity in this state:

37 (A) Health care providers;

38 (B) Providers of social services;

39 (C) Health care facilities;

40 (D) The Oregon Health Authority;

41 (E) The Oregon Medical Board;

42 (F) The Department of Human Services;

43 (G) Law enforcement agencies;

44 (H) Medical examiners; and

45 (I) Any other state and local agency deemed relevant by the committee.

1 (b) Information made available to the committee may include, but need not be limited to  
2 the following:

3 (A) Medical records;

4 (B) Autopsy reports;

5 (C) Birth certificates;

6 (D) Death certificates;

7 (E) Social services files; and

8 (F) Any other data or information the committee may deem relevant in connection with  
9 maternal mortality and severe maternal morbidity.

10 (c) A person may not charge or collect a fee for providing information to the committee  
11 pursuant to this subsection.

12 (13) All agencies of state government, as defined in ORS 174.111, are directed to assist  
13 the committee in the performance of duties of the committee and, to the extent permitted  
14 by laws relating to confidentiality, to furnish information and advice as deemed necessary  
15 by the members of the committee.

16 (14) All information used in connection with a study or review conducted by the com-  
17 mittee:

18 (a) Is confidential and for the exclusive use of accomplishing the duties of the committee  
19 under subsection (11) of this section;

20 (b) May not be used in any court action or in any proceeding pending in a court unless  
21 a member of the committee is a party to the action or proceeding; and

22 (c) Is exempt from disclosure under ORS 192.311 to 192.478.

23 (15) A person who acts in good faith in making information available to the committee  
24 under subsection (12) of this section shall have immunity:

25 (a) From any civil or criminal liability that might otherwise be incurred or imposed with  
26 respect to releasing the information;

27 (b) From disciplinary action taken by the person's employer with respect to releasing the  
28 information; and

29 (c) With respect to participating in any judicial proceeding resulting from or involving  
30 the release of information.

31 (16)(a) The committee shall perform studies and reviews of the incidence of maternal  
32 mortality as soon as practicable after the effective date of this 2018 Act but not later than  
33 July 1, 2018.

34 (b) The committee shall perform studies and reviews of the incidence of severe maternal  
35 morbidity as soon as practicable after the effective date of this 2018 Act but not later than  
36 July 1, 2021.

37 (17)(a) The committee shall submit a report in the manner provided in ORS 192.245, and  
38 may include recommendations for legislation, to the interim committees of the Legislative  
39 Assembly related to health care no later than January 1, 2019. At a minimum, the report  
40 must include:

41 (A) A summary of the Maternal Mortality and Morbidity Review Committee's conclusions  
42 and findings relating to maternal mortality;

43 (B) Aggregated non-individually identifying data related to the cases of maternal mor-  
44 tality in this state;

45 (C) A description of actions that are necessary to implement any recommendations of the

1 committee to prevent occurrences of maternal mortality in this state; and

2 (D) Recommendations for allocating state resources to decrease the rate of maternal  
3 mortality in this state.

4 (b) The committee shall submit a second report to the interim committees of the Legis-  
5 lative Assembly related to health care no later than January 1, 2022. At a minimum, the  
6 second report must describe how the information in paragraph (a) of this subsection relates  
7 to severe maternal morbidity.

8 (c) Notwithstanding subsection (14) of this section, the committee may include references  
9 to otherwise confidential information for the sole purpose of making the reports required  
10 under this subsection. Any disclosure must be otherwise protected from further disclosure  
11 for any purpose not related to the making of the report.

12 **SECTION 2.** (1) Notwithstanding the terms of office specified by section 1 of this 2018  
13 Act, of the members first appointed to the Maternal Mortality and Morbidity Review Com-  
14 mittee:

15 (a) Two shall serve for terms ending December 31, 2019.

16 (b) Two shall serve for terms ending December 31, 2020.

17 (c) Three shall serve for terms ending December 31, 2021.

18 (d) Members who are physicians shall serve for terms ending December 31, 2022.

19 (2) The Governor shall determine with specificity which appointed members will serve  
20 which terms under subsection (1)(a), (b) and (c) of this section.

21 **SECTION 3.** This 2018 Act takes effect on the 91st day after the date on which the 2018  
22 regular session of the Seventy-ninth Legislative Assembly adjourns sine die.

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