HB 4133-3 (LC 76) 2/12/18 (JAS/ps)

Requested by Representative KENY-GUYER

## PROPOSED AMENDMENTS TO HOUSE BILL 4133

1 On <u>page 1</u> of the printed bill, line 2, after "Committee;" delete the rest 2 of the line and insert "and declaring an emergency.".

3 Delete lines 4 through 27 and delete pages 2 through 4 and insert:

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

"(a) 'Maternal mortality' means the pregnancy-related death of a
person within 365 days after the end of the pregnancy.

"(b) 'Severe maternal morbidity' includes pregnancy-related outcomes that result in significant short-term or long-term consequences
to a person's health.

10 "(2) The Maternal Mortality and Morbidity Review Committee is 11 established in the Oregon Health Authority to conduct studies and 12 reviews of the incidence of maternal mortality and severe maternal 13 morbidity and to make policy and budget recommendations to reduce 14 the incidence of maternal mortality and severe maternal morbidity in 15 this state.

"(3) The committee shall consist of at least 11 but not more than
 15 members appointed by the Governor. The Governor shall consider
 for membership the following individuals:

"(a) A physician licensed under ORS chapter 677 who specializes in
 family medicine and whose practice includes maternity care and de livery;

"(b) A physician licensed under ORS chapter 677 who specializes in
 obstetrics and gynecology;

"(c) A physician licensed under ORS chapter 677 who specializes in
maternal fetal medicine;

5 "(d) A licensed registered nurse who specializes in labor and deliv6 ery;

"(e) A licensed registered nurse who is certified by the Oregon State
Board of Nursing as a nurse midwife nurse practitioner;

9 "(f) A direct entry midwife licensed under ORS 687.405 to 687.495;

"(g) An individual who meets criteria for a doula adopted by the
 authority in accordance with ORS 414.665;

12 "(h) A traditional health worker;

"(i) An individual who represents a community-based organization
 that represents communities of color and focuses on reducing racial
 and ethnic health disparities;

"(j) An individual who represents a community-based organization
 that focuses on treatment of mental health;

"(k) An individual who represents the authority with an expertise
in the field of maternal and child health;

"(L) An individual who is an expert in the field of public health; and
"(m) A medical examiner.

"(4) In appointing members under subsection (3) of this section, the Governor shall consider whether the composition of the committee is reasonably representative of this state's geographic, ethnic and economic diversity.

"(5) Members of the committee shall serve for terms of four years each. The Governor shall fill a vacancy on the committee by making an appointment to become immediately effective for the unexpired term. The Governor shall assign the initial terms of office to members so that the terms expire at staggered intervals. "(6) The committee shall elect one of its members to serve as
chairperson. A majority of the members of the committee constitutes
a quorum.

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

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

8 "(9) A member of the committee is not entitled to compensation, 9 but in the discretion of the authority may be reimbursed from funds 10 available to the authority for actual and necessary travel and other 11 expenses incurred by the member in the performance of the member's 12 official duties in the manner and amount provided in ORS 292.495.

"(10) The authority may adopt rules necessary for the operation of
 the committee.

15 **"(11) The committee shall:** 

"(a) Study and review information relating to the incidence of ma ternal mortality and severe maternal morbidity in this state.

"(b) Examine whether social determinants of health are contribut ing factors to the incidence of maternal mortality and severe maternal
 morbidity including, but not limited to:

- 21 "(A) Race and ethnicity;
- 22 "(B) Socioeconomic status;

23 "(C) Domestic abuse or violence;

24 "(D) Access to affordable housing;

"(E) Access to primary and preventive health care services, oral
 health care services and behavioral health services for a person who
 is of reproductive age; and

"(F) Gaps in insurance coverage postpartum or following preg nancy.

30 "(12)(a) Upon request by the division of the authority that is

- 1 charged with public health functions, the following shall make avail-
- 2 able to the committee information relating to the incidence of mater-
- 3 nal mortality and severe maternal morbidity in this state:
- 4 "(A) Health care providers;
- 5 "(B) Providers of social services;
- 6 "(C) Health care facilities;
- 7 **"(D) The authority;**
- 8 "(E) The Department of Human Services;
- 9 "(F) Law enforcement agencies;
- 10 "(G) Medical examiners; and
- "(H) Any other state and local agency deemed relevant by the
   committee.
- "(b) Information made available to the committee may include, but
   need not be limited to, the following:
- 15 **"(A) Medical records;**
- 16 **"(B) Autopsy reports;**
- 17 "(C) Birth records;
- 18 **"(D) Death records;**
- 19 "(E) Social services files;
- 20 "(F) Information obtained during any family interviews; and
- "(G) Any other data or information the committee may deem rele vant in connection with maternal mortality and severe maternal
   morbidity.
- "(c) A person may not charge or collect a fee for providing infor mation to the committee pursuant to this subsection.
- "(13) Notwithstanding any other law relating to sharing confidential
  information, all agencies of state government, as defined in ORS
  174.111, are directed to assist the committee in the performance of
  duties of the committee and shall furnish information and advice as
  deemed necessary by the members of the committee.

1 "(14)(a) This subsection does not limit the discoverability or 2 admissibility of any information that is available from a source other 3 than the committee in a judicial, administrative, arbitration or medi-4 ation proceeding.

5 "(b) All meetings and activities of the committee are exempt from
6 the requirements of ORS 192.610 to 192.690.

7 "(c) All information obtained, created or maintained by the com8 mittee is:

9 "(A) Confidential and exempt from disclosure under ORS 192.311 to
10 192.478; and

"(B) Not admissible in evidence in a judicial, administrative, arbi tration or mediation proceeding.

13 "(d) Committee members may not be:

"(A) Examined as to any communications to or from the committee
 or as to any information obtained or maintained by the committee;
 or

"(B) Subject to an action for civil damages for affirmative actions
 or statements made in good faith.

"(15) A person who acts in good faith in making information avail able to the committee under subsection (12) or (13) of this section:

21 "(a) Has immunity:

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

"(B) From disciplinary action taken by the person's employer with
 respect to releasing the information; and

26 "(C) With respect to participating in any judicial proceeding re-27 sulting from or involving the release of information; and

"(b) May not be examined as to any communications to or from the
committee or as to any information obtained, created or maintained
by the committee.

HB 4133-3 2/12/18 Proposed Amendments to HB 4133 "(16) Nothing in subsection (14) or (15) of this section may be construed to limit or restrict the discoverability or admissibility of any
information that is available from a source other than the committee
in a civil or criminal proceeding.

5 "(17)(a) The committee shall submit a biennial report in the manner 6 provided in ORS 192.245, and may include recommendations for legis-7 lation, to the interim committees of the Legislative Assembly related 8 to health care. The report submitted under this subsection must in-9 clude, but is not limited to, the following:

"(A) A summary of the committee's conclusions and findings re lating to maternal mortality;

"(B) Aggregated data related to the cases of maternal mortality in
 this state that is not individually identifiable;

"(C) A description of actions that are necessary to implement any
 recommendations of the committee to prevent occurrences of mater nal mortality in this state; and

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

"(b) A biennial report submitted after January 2, 2021, in addition
 to providing the information described in paragraph (a) of this sub section, must describe how the information relates to severe maternal
 morbidity.

"(18) The committee shall provide the report required under subsection (17) of this section to health care providers and facilities, relevant state agencies and any others as the committee deems necessary to reduce the incidence of maternal mortality and severe maternal morbidity.

"<u>SECTION 2.</u> (1) The Maternal Mortality and Morbidity Review
 Committee shall perform studies and reviews of the incidence of ma ternal mortality, as defined in section 1 of this 2018 Act, as soon as

practicable after the effective date of this 2018 Act but not later than
 July 1, 2019.

"(2) The committee shall perform studies and reviews of the incidence of severe maternal morbidity, as defined in section 1 of this 2018
Act, as soon as practicable after the effective date of this 2018 Act but
not later than July 1, 2021.

"<u>SECTION 3.</u> (1) The Maternal Mortality and Morbidity Review
Committee shall, in the manner provided in ORS 192.245, submit a
progress report concerning the committee's membership and rules to
the interim committees of the Legislative Assembly related to health
care no later than January 1, 2019.

"(2) The committee shall submit the first biennial report required
 under section 1 (17)(a) of this 2018 Act no later than January 1, 2021.

"<u>SECTION 4.</u> This 2018 Act being necessary for the immediate
 preservation of the public peace, health and safety, an emergency is
 declared to exist, and this 2018 Act takes effect on its passage.".

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