HB 3298 STAFF MEASURE SUMMARY

House Committee On Behavioral Health and Health Care

Action Date: 04/03/23

Action: Do pass and be referred to Ways and Means by prior reference

Vote: 10-0-1-0

Yeas: 10 - Bowman, Conrad, Dexter, Diehl, Goodwin, Javadi, Morgan, Nelson, Nosse, Pham H

Exc: 1 - Tran

Fiscal: Fiscal impact issued **Revenue:** No revenue impact

Prepared By: Brian Nieubuurt, LPRO Analyst

Meeting Dates: 3/27, 4/3

WHAT THE MEASURE DOES:

Directs Oregon Health Authority (OHA) to disburse funds to Oregon Health and Science University (OHSU) to support entity established within OHSU that advocates for improved maternal and neonatal outcomes. Appropriates \$1,000,000 General Fund to OHA. Takes effect on 91st day following adjournment sine die.

ISSUES DISCUSSED:

- Oregon Perinatal Collaborative history and funding
- Evolution of perinatal best practices
- Healthy Babies Are Worth the Wait initiative
- Oregon Maternal Data Center and collaboration with states of California and Washington

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

According to the Centers for Disease Control and Prevention (CDC), in 2021, 1,205 women died of maternal causes in the United States for a maternal mortality rate of 32.9 deaths per 100,000 live births. This was a marked increase over previous years - in 2020, there were 861 deaths (rate of 23.8); in 2019, there were 754 deaths (rate of 20.1). The Government Accountability Office (GAO) found that the COVID-19 pandemic played a role in this increase, with data showing that it was a contributing factor in one quarter of all maternal deaths in 2020 and 2021 combined. The maternal mortality rate for Black or African-American women is significantly higher than in White women and the GAO found that this disparity persisted during the COVID-19 pandemic.

According to Oregon's Maternal Mortality and Morbidity Review Committee, established by House Bill 4133 (2018), Oregon's maternal mortality rate is typically at or below that of the United State overall, ranging from a rate of four to 12 over the past ten years. The Review Committee notes, however, that the current method of maternal mortality case finding may undercount actual deaths by as much as one-third. Additionally, for every women who dies, there are approximately 50 who suffer maternal morbidity (severe complications that bring the woman close to death).

House Bill 3298 appropriates \$1,000,000 to the Oregon Health Authority for disbursement to Oregon Health and Science University to support an entity that advocates for improved maternal and neonatal outcomes.