

E2SSB 6534 - H COMM AMD

By Committee on Health Care & Wellness

NOT CONSIDERED 03/03/2016

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** A new section is added to chapter 70.54
4 RCW to read as follows:

5 (1) For the purposes of this section, "maternal mortality" or
6 "maternal death" means a death of a woman while pregnant or within
7 one year of delivering or following the end of a pregnancy, whether
8 or not the woman's death is related to or aggravated by the
9 pregnancy.

10 (2) A maternal mortality review panel is established to conduct
11 comprehensive, multidisciplinary reviews of maternal deaths in
12 Washington to identify factors associated with the deaths and make
13 recommendations for system changes to improve health care services
14 for women in this state. The members of the panel must be appointed
15 by the secretary of the department of health, must serve without
16 compensation, and may include:

- 17 (a) An obstetrician;
18 (b) A physician specializing in maternal fetal medicine;
19 (c) A neonatologist;
20 (d) A midwife with licensure in the state of Washington;
21 (e) A representative from the department of health who works in
22 the field of maternal and child health;
23 (f) A department of health epidemiologist with experience
24 analyzing perinatal data;
25 (g) A pathologist; and
26 (h) A representative of the community mental health centers.

27 (3) The maternal mortality review panel must conduct
28 comprehensive, multidisciplinary reviews of maternal mortality in
29 Washington. The panel may not call witnesses or take testimony from
30 any individual involved in the investigation of a maternal death or

1 enforce any public health standard or criminal law or otherwise
2 participate in any legal proceeding relating to a maternal death.

3 (4)(a) Information, documents, proceedings, records, and opinions
4 created, collected, or maintained by the maternity mortality review
5 panel or the department of health in support of the maternal
6 mortality review panel are confidential and are not subject to public
7 inspection or copying under chapter 42.56 RCW and are not subject to
8 discovery or introduction into evidence in any civil or criminal
9 action.

10 (b) Any person who was in attendance at a meeting of the maternal
11 mortality review panel or who participated in the creation,
12 collection, or maintenance of the panel's information, documents,
13 proceedings, records, or opinions may not be permitted or required to
14 testify in any civil or criminal action as to the content of such
15 proceedings, or the panel's information, documents, records, or
16 opinions. This subsection does not prevent a member of the panel from
17 testifying in a civil or criminal action concerning facts which form
18 the basis for the panel's proceedings of which the panel member had
19 personal knowledge acquired independently of the panel or which is
20 public information.

21 (c) Any person who, in substantial good faith, participates as a
22 member of the maternal mortality review panel or provides information
23 to further the purposes of the maternal mortality review panel may
24 not be subject to an action for civil damages or other relief as a
25 result of the activity or its consequences.

26 (d) All meetings, proceedings, and deliberations of the maternal
27 mortality review panel may, at the discretion of the maternal
28 mortality review panel, be confidential and may be conducted in
29 executive session.

30 (e) The maternal mortality review panel and the secretary of the
31 department of health may retain identifiable information regarding
32 facilities where maternal deaths, or from which the patient was
33 transferred, occur and geographic information on each case solely for
34 the purposes of trending and analysis over time. All individually
35 identifiable information must be removed before any case review by
36 the panel.

37 (5) The department of health shall review department available
38 data to identify maternal deaths. To aid in determining whether a
39 maternal death was related to or aggravated by the pregnancy, and

1 whether it was preventable, the department of health has the
2 authority to:

3 (a) Request and receive data for specific maternal deaths
4 including, but not limited to, all medical records, autopsy reports,
5 medical examiner reports, coroner reports, and social service
6 records; and

7 (b) Request and receive data as described in (a) of this
8 subsection from health care providers, health care facilities,
9 clinics, laboratories, medical examiners, coroners, professions and
10 facilities licensed by the department of health, local health
11 jurisdictions, the health care authority and its licensees and
12 providers, and the department of social and health services and its
13 licensees and providers.

14 (6) Upon request by the department of health, health care
15 providers, health care facilities, clinics, laboratories, medical
16 examiners, coroners, professions and facilities licensed by the
17 department of health, local health jurisdictions, the health care
18 authority and its licensees and providers, and the department of
19 social and health services and its licensees and providers must
20 provide all medical records, autopsy reports, medical examiner
21 reports, coroner reports, social services records, information and
22 records related to sexually transmitted diseases, and other data
23 requested for specific maternal deaths as provided for in subsection
24 (5) of this section to the department.

25 (7) By July 1, 2017, and biennially thereafter, the maternal
26 mortality review panel must submit a report to the secretary of the
27 department of health and the health care committees of the senate and
28 house of representatives. The report must protect the confidentiality
29 of all decedents and other participants involved in any incident. The
30 report must be distributed to relevant stakeholder groups for
31 performance improvement. Interim results may be shared at the
32 Washington state hospital association coordinated quality improvement
33 program. The report must include the following:

34 (a) A description of the maternal deaths reviewed by the panel
35 during the preceding twenty-four months, including statistics and
36 causes of maternal deaths presented in the aggregate, but the report
37 must not disclose any identifying information of patients, decedents,
38 providers, and organizations involved; and

1 (b) Evidence-based system changes and possible legislation to
2 improve maternal outcomes and reduce preventable maternal deaths in
3 Washington.

4 **Sec. 2.** RCW 42.56.360 and 2014 c 223 s 17 are each amended to
5 read as follows:

6 (1) The following health care information is exempt from
7 disclosure under this chapter:

8 (a) Information obtained by the pharmacy quality assurance
9 commission as provided in RCW 69.45.090;

10 (b) Information obtained by the pharmacy quality assurance
11 commission or the department of health and its representatives as
12 provided in RCW 69.41.044, 69.41.280, and 18.64.420;

13 (c) Information and documents created specifically for, and
14 collected and maintained by a quality improvement committee under RCW
15 43.70.510, 70.230.080, or 70.41.200, or by a peer review committee
16 under RCW 4.24.250, or by a quality assurance committee pursuant to
17 RCW 74.42.640 or 18.20.390, or by a hospital, as defined in RCW
18 43.70.056, for reporting of health care-associated infections under
19 RCW 43.70.056, a notification of an incident under RCW 70.56.040(5),
20 and reports regarding adverse events under RCW 70.56.020(2)(b),
21 regardless of which agency is in possession of the information and
22 documents;

23 (d)(i) Proprietary financial and commercial information that the
24 submitting entity, with review by the department of health,
25 specifically identifies at the time it is submitted and that is
26 provided to or obtained by the department of health in connection
27 with an application for, or the supervision of, an antitrust
28 exemption sought by the submitting entity under RCW 43.72.310;

29 (ii) If a request for such information is received, the
30 submitting entity must be notified of the request. Within ten
31 business days of receipt of the notice, the submitting entity shall
32 provide a written statement of the continuing need for
33 confidentiality, which shall be provided to the requester. Upon
34 receipt of such notice, the department of health shall continue to
35 treat information designated under this subsection (1)(d) as exempt
36 from disclosure;

37 (iii) If the requester initiates an action to compel disclosure
38 under this chapter, the submitting entity must be joined as a party
39 to demonstrate the continuing need for confidentiality;

1 (e) Records of the entity obtained in an action under RCW
2 18.71.300 through 18.71.340;

3 (f) Complaints filed under chapter 18.130 RCW after July 27,
4 1997, to the extent provided in RCW 18.130.095(1);

5 (g) Information obtained by the department of health under
6 chapter 70.225 RCW;

7 (h) Information collected by the department of health under
8 chapter 70.245 RCW except as provided in RCW 70.245.150;

9 (i) Cardiac and stroke system performance data submitted to
10 national, state, or local data collection systems under RCW
11 70.168.150(2)(b);

12 (j) All documents, including completed forms, received pursuant
13 to a wellness program under RCW 41.04.362, but not statistical
14 reports that do not identify an individual; and

15 (k) Data and information exempt from disclosure under RCW
16 43.371.040.

17 (2) Chapter 70.02 RCW applies to public inspection and copying of
18 health care information of patients.

19 (3)(a) Documents related to infant mortality reviews conducted
20 pursuant to RCW 70.05.170 are exempt from disclosure as provided for
21 in RCW 70.05.170(3).

22 (b)(i) If an agency provides copies of public records to another
23 agency that are exempt from public disclosure under this subsection
24 (3), those records remain exempt to the same extent the records were
25 exempt in the possession of the originating entity.

26 (ii) For notice purposes only, agencies providing exempt records
27 under this subsection (3) to other agencies may mark any exempt
28 records as "exempt" so that the receiving agency is aware of the
29 exemption, however whether or not a record is marked exempt does not
30 affect whether the record is actually exempt from disclosure.

31 (4) Information and documents related to maternal mortality
32 reviews conducted pursuant to section 1 of this act are confidential
33 and exempt from public inspection and copying.

34 NEW SECTION. Sec. 3. This act expires June 30, 2020."

35 Correct the title.

opinions from discovery or as evidence in any criminal or civil action; (2) prohibiting persons attending review panel meetings or preparing materials for the review panel from testifying in any civil or criminal action as to the contents of the meeting or materials, unless the person has personal knowledge of the matter that is independent of the review panel; and (3) providing immunity from civil damages to review panel members. Exempts information and documents related to maternal mortality reviews from public inspection and copying and declares that they are confidential.

Eliminates the Department of Health's (Department) authority to obtain adverse event records related to maternal deaths.

Requires, upon request of the Department, identified health care providers, health care facilities, and government agencies and contractors to submit medical records, autopsy reports, medical examiner reports, coroner reports, social services records, information and records related to sexually transmitted diseases, and other requested data related to specific maternal deaths.

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