
Health Care & Wellness Committee

E2SSB 6534

Brief Description: Establishing a maternal mortality review panel.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators O'Ban and Becker).

Brief Summary of Engrossed Second Substitute Bill

- Establishes a maternal mortality review panel to conduct reviews of maternal deaths in Washington and make recommendations for evidence-based system changes and possible legislation to improve maternal outcomes and reduce preventable deaths.

Hearing Date: 2/24/16

Staff: Chris Blake (786-7392).

Background:

The federal Centers for Disease Control and Prevention (CDC) collects data related to pregnancy-related deaths. The data is collected by the CDC through the submission by each state of death certificates for all women who die during pregnancy or within one year of pregnancy. In addition, states submit corresponding birth certificates or fetal death certificates when making such a match is possible.

About 600 women in the United States die each year due to pregnancy or delivery-related complications. Since the CDC began collecting data in 1986, the trend in pregnancy-related mortality has increased from 7.2 pregnancy-related deaths per 100,000 live births in 1987 to 15.9 in 2012.

Summary of Bill:

A maternal mortality review panel (panel) is established to conduct comprehensive, multidisciplinary reviews of maternal deaths in Washington, identify factors associated with

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deaths and make recommendations for system changes. The terms "maternal mortality" and "maternal death" mean the death of a woman while pregnant or within one year following delivery or the end of a pregnancy, whether or not death is related to or aggravated by the pregnancy.

The panel is appointed by the Secretary of Health (Secretary) and may include an obstetrician, a physician specializing in maternal fetal medicine, a neonatologist, a licensed midwife, a Department of Health (Department) representative who works in the field of maternal and child health, a Department epidemiologist with experience analyzing prenatal data, a pathologist, and a representative of community mental health centers.

The Department must review its available data to identify maternal deaths. The Department may access additional data to assist it in determining whether a maternal death was related to or aggravated by the pregnancy and whether the maternal death was preventable. The additional data include adverse health event data; data related to specific maternal deaths such as medical records, root cause analyses, autopsy reports, medical examiner reports, coroner reports, and social services records; and information from health care providers, health care facilities, clinics, laboratories, and medical examiners, coroners, health professions and facilities, local health jurisdictions, the Health Care Authority and its licensees and providers, and the Department of Social and Health Services and its licensees and providers.

The panel must submit biennial reports to the Secretary and legislative health care committees beginning July 1, 2017. The report must include a description of the maternal deaths reviewed by the panel in the prior two years, including aggregated statistics and causes, and evidence-based system changes and possible legislation to improve maternal outcomes and reduce preventable deaths in Washington. The report must be distributed to relevant stakeholder groups for performance improvement.

The panel's proceedings, records, and opinions are confidential and not subject to Public Records Act requirements. Members of the panel may not be questioned in any civil or criminal proceeding related to information or opinions associated with meetings of the panel. The panel and the Secretary may only retain information identifying facilities related to occurrences of maternal deaths for the purpose of analysis over time.

The act expires June 30, 2020.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.