

BILL ANALYSIS

Senate Research Center

S.B. 17
By: Kolkhorst et al.
Health & Human Services
8/18/2017
Enrolled

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

The Maternal Mortality and Morbidity Task Force (task force) established by S.B. 495, 83rd Legislature, is a multidisciplinary group tasked to study maternal mortality and morbidity in Texas. The task force has produced two reports since its inception, providing critical information on maternal mortality trends and demographics in Texas. Considering the findings of the task force, much work still needs to be done to more directly address the causes of pregnancy-related deaths in Texas and severe maternal morbidity.

S.B. 17 as proposed extends the expiration date of the task force from September 1, 2019, to September 1, 2023. S.B. 17 also directs the Health and Human Services Commission (HHSC) to evaluate options to address the most prevalent causes of maternal death as identified by the task force, including options for treating postpartum depression in low-income women.

S.B. 17 also directs the Department of State Health Services to implement a maternal health and safety initiative with healthcare providers to lower incidences of maternal mortality and morbidity. The bill also requires HHSC to determine the feasibility of adding maternal health and safety protocols and best practices as a measure of quality outcomes and for quality payment purposes in the Medicaid program. (Original Author's / Sponsor's Statement of Intent)

S.B. 17 amends current law relating to maternal health and safety, pregnancy-related deaths, and maternal morbidity, including postpartum depression.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 34.002(b), Health and Safety Code, as follows:

(b) Provides that the Maternal Mortality and Morbidity Task Force (task force) is a multidisciplinary advisory committee within the Department of State Health Services (DSHS) and is composed of 17 members, rather than 15 members. Sets forth the composition of the task force.

SECTION 2. Amends Section 34.004, Health and Safety Code, by amending Subsection (b) and adding Subsection (c), as follows:

(b) Provides that meetings of the task force are subject to Chapter 551 (Open Meetings), Government Code, rather than are closed to the public and not subject to Chapter 551, Government Code, except that the task is required to conduct a closed meeting to review cases under Section 34.007 (Selection and Review of Cases).

(c) Requires the task force to allow for public comment during at least one public meeting each year, present in open session recommendations made under Section 34.005 to help reduce the incidence of pregnancy-related deaths and severe maternal morbidity

in this state, and post public notice for meetings conducted for the sole purpose of reviewing cases for selection under Section 34.007.

SECTION 3. Amends Section 34.005, Health and Safety Code, as follows:

Sec. 34.005. DUTIES OF TASK FORCE. Requires the task force to:

(1) study and review:

(A) makes a nonsubstantive change;

(B) trends, rates, or disparities in pregnancy-related deaths and severe maternal morbidity, rather than trends in severe maternal morbidity;

(C) health conditions and factors that disproportionately affect the most at-risk population as determined in the joint biennial report required under Section 34.015 (Reports); and

(D) best practices and programs operating in other states that have reduced rates of pregnancy-related deaths;

(2) compare rates of pregnancy-related deaths based on the socioeconomic status of the mother;

(3) redesignates existing Subdivision (2) as Subdivision (3) and makes no further changes to this subdivision; and

(4) in consultation with the Perinatal Advisory Council, make certain recommendations. Redesignates existing Subdivision (3) as Subdivision (4).

SECTION 4. Amends Chapter 34, Health and Safety Code, by adding Section 34.0055, as follows:

Sec. 34.0055. SCREENING AND EDUCATIONAL MATERIALS FOR SUBSTANCE USE AND DOMESTIC VIOLENCE. (a) Requires the Health and Human Services Commission (HHSC), in consultation with the task force, using existing resources, to make available to physicians and other persons licensed or certified to conduct a substance use screening and domestic violence screening of pregnant women certain information and review and promote the use of educational materials on the consequences of opioid drug use and on domestic violence prevention and intervention during pregnancy.

(b) Requires HHSC to make the information and educational materials described by Subsection (a) available on HHSC's Internet website.

SECTION 5. Amends Sections 34.007(a) and (b), Health and Safety Code, as follows:

(a) Requires DSHS to either randomly select cases or select all cases for the task force to review under this subsection (relating to requiring DSHS to determine a statistically significant number of cases of pregnancy-related deaths for review) to reflect a cross-section of pregnancy-related deaths in this state.

(b) Requires DSHS to statistically analyze aggregate data of pregnancy-related deaths and severe maternal morbidity in this state to identify any trends, rates, or disparities.

SECTION 6. Amends Section 34.009(d), Health and Safety Code, as follows:

(d) Provides that information is not confidential under this section if the information is general information that cannot be connected with any specific individual, case, or health care provider, such as:

(1) through (3) makes no changes to these subdivisions;

(4) makes a nonsubstantive change;

(5) information, including the source, value, and purpose, related to gifts, grants, or donations to or for use by the task force; and

(6) creates this subdivision from existing text.

SECTION 7. Amends Section 34.015(b), Health and Safety Code, to require that the report include the task force's recommendations under Section 34.005(4), rather than Section 34.005(3).

SECTION 8. Amends Chapter 34, Health and Safety Code, by adding Sections 34.0155, 34.0156, and 34.0157, as follows:

Sec. 34.0155. REPORT ON PREGNANCY-RELATED DEATHS, SEVERE MATERNAL MORBIDITY, AND POSTPARTUM DEPRESSION. Requires HHSC to:

(1) evaluate options for reducing pregnancy-related deaths, focusing on the most prevalent causes of pregnancy-related deaths as identified in the joint biennial report required under Section 34.015, and for treating postpartum depression in economically disadvantaged women;

(2) in coordination with DSHS and the task force, identify strategies to lower costs of providing medical assistance under Chapter 32 (Medical Assistance Program), Human Resources Code, related to severe maternal morbidity and chronic illness and improve quality outcomes related to the underlying causes of severe maternal morbidity and chronic illness; and

(3) not later than December 1 of each even-numbered year, submit to the governor, the lieutenant governor, the speaker of the house of representatives, the Legislative Budget Board, and the appropriate standing committees of the legislature a written report that includes certain information.

Sec. 34.0156. MATERNAL HEALTH AND SAFETY INITIATIVE. (a) Requires DSHS, in collaboration with the task force, to promote and facilitate, using existing resources, the use among health care providers in this state of maternal health and safety informational materials, including tools and procedures related to best practices in maternal health and safety.

(b) Requires DSHS, not later than December 1 of each even-numbered year, to submit a report to the executive commissioner of HHSC that includes certain information.

Sec. 34.0157. FEASIBILITY STUDY RELATED TO MATERNAL HEALTH AND SAFETY INITIATIVE. (a) Requires HHSC, using existing resources and not later than December 1, 2018, to study and determine the feasibility of adding a provider's use of procedures included in the maternal health and safety initiative described by Section 34.0156 as an indicator of quality for HHSC data and medical assistance quality-based payment purposes.

(b) Requires DSHS to collaborate with HHSC in compiling available data and information needed to complete the feasibility study.

(c) Requires HHSC to include HHSC's determination from the feasibility study in the report required by Section 34.0155.

(d) Provides that this section expires May 1, 2019.

SECTION 9. Amends Section 34.018, Health and Safety Code, to provide that, unless continued in existence as provided by Chapter 325 (Sunset Law), Government Code (Texas Sunset Act), the task force is abolished and this chapter (Maternal Mortality and Morbidity Task Force) expires September 1, 2023, rather than September 1, 2019.

SECTION 10. Amends Subchapter D, Chapter 1001, Health and Safety Code, by adding Section 1001.0712, as follows:

Sec. 1001.0712. CAUSE OF DEATH DATA IMPROVEMENT. (a) Requires DSHS, not later than December 1 of each even-numbered year, to submit to the governor, lieutenant governor, speaker of the house of representatives, and appropriate standing committees of the legislature a report on the processes and procedures for collecting cause of death information, including any challenges to collecting accurate information relating to maternal mortality.

(b) Authorizes DSHS, in preparing the report, to examine issues relating to the quality of the death information being collected, including the accuracy and completeness of the information, the role of medical certifiers in death information collection, the perceptions of the individuals collecting the death information regarding the information's integrity, the training required for the individuals collecting death information, and the structural, procedural, and technological issues of collecting the information.

(c) Requires DSHS, in consultation with the task force, to examine national standards regarding the collection of death information and authorizes DSHS to convene a panel of experts to advise DSHS and the task force in developing recommendations for improving the collection of accurate information related to cause of death.

(d) Authorizes the report to be included as part of another report DSHS is required to submit to the legislature.

(e) Provides that this section expires September 1, 2021.

SECTION 11. Requires HHSC, not later than June 1, 2018, to make available the information and educational materials described by Section 34.0055, Health and Safety Code, as added by this Act.

SECTION 12. Requires a state agency, if necessary for implementation of a provision of this Act, to request a waiver or authorization from a federal agency, and authorizes delay of implementation until such a waiver or authorization is granted.

SECTION 13. Effective date: upon passage or on the 91st day after the last day of the legislative session.