

1 H.44

2 Introduced by Representative Till of Jericho

3 Referred to Committee on

4 Date:

5 Subject: Health; maternal health; mortality review

6 Statement of purpose: This bill proposes to establish a maternal mortality
7 review panel to review maternal deaths in Vermont and make
8 recommendations for system changes to improve health care services for
9 women in this state.

10 An act relating to establishing a maternal mortality review panel

11 It is hereby enacted by the General Assembly of the State of Vermont:

12 Sec. 1. 18 V.S.A. chapter 30 is added to read:

13 CHAPTER 30. MATERNAL MORTALITY REVIEW PANEL

14 § 1551. DEFINITIONS

15 As used in this chapter:

16 (1) “Maternal mortality” or “maternal death” means:

17 (A) pregnancy-associated death;

18 (B) pregnancy-related death; or

19 (C) pregnancy-associated but not pregnancy-related death.

1 (2) “Pregnancy-associated death” means the death of a woman while
2 pregnant or within one year following the end of pregnancy, irrespective of
3 cause.

4 (3) “Pregnancy-associated, but not pregnancy-related death” means the
5 death of a woman while pregnant or within one year following the end of
6 pregnancy due to a cause unrelated to pregnancy.

7 (4) “Pregnancy-related death” means the death of a woman while
8 pregnant or within one year following the end of pregnancy, irrespective of the
9 duration and site of the pregnancy, from any cause related to or aggravated by
10 her pregnancy or its management, but not from accidental or incidental causes.

11 § 1552. MATERNAL MORTALITY REVIEW PANEL ESTABLISHED

12 (a) There is established a maternal mortality review panel to conduct
13 comprehensive, multidisciplinary reviews of maternal deaths in Vermont for
14 the purposes of identifying factors associated with the deaths and making
15 recommendations for system changes to improve health care services for
16 women in this state. The members of the panel shall be appointed by the
17 commissioner of health as follows:

18 (1) Two members from the Vermont section of the American College of
19 Obstetricians and Gynecologists, one of whom shall be a generalist obstetrician
20 and one of whom shall be a maternal fetal medicine specialist.

1 (2) One member from the Vermont chapter of the American Academy
2 of Pediatrics, specializing in neonatology.

3 (3) One member from the Vermont chapter of the American College of
4 Nurse-Midwives.

5 (4) One member from the Vermont section of the Association of
6 Women's Health, Obstetric and Neonatal Nurses.

7 (5) The director of the division of maternal and child health in the
8 Vermont department of health, or designee.

9 (6) An epidemiologist from the department of health with experience
10 analyzing perinatal data, or designee.

11 (7) The chief medical examiner, or designee.

12 (8) A representative of the community mental health centers.

13 (9) A member of the public.

14 (b) The term of each member shall be three years and the terms shall be
15 staggered. The commissioner shall appoint the initial chair of the panel, who
16 shall call the first meeting of the panel and serve as chair for six months, after
17 which time the panel shall elect its chair. Members of the panel shall receive
18 no compensation.

19 (c) The commissioner may delegate to the Northern New England Perinatal
20 Quality Improvement Network (NNEPQIN) the functions of collecting,
21 analyzing, and disseminating maternal mortality information; organizing and

1 convening meetings of the panel; and such other substantive and administrative
2 tasks as may be incident to these activities. The activities of the NNEPQIN
3 and its employees or agents shall be subject to the same confidentiality
4 provisions as apply to members of the panel.

5 § 1553. DUTIES

6 (a) The panel, in collaboration with the commissioner of health or
7 designee, shall conduct comprehensive, multidisciplinary reviews of maternal
8 mortality in Vermont.

9 (b) Each member of the panel shall be responsible for disseminating panel
10 recommendations to his or her respective institution and professional
11 organization, as applicable. All such information shall be disseminated
12 through the institution's or organization's quality assurance program in order
13 to protect the confidentiality of all participants and patients involved in
14 any incident.

15 (c) On or before January 15 of each year, the commissioner of health shall
16 submit a report to the house committees on health care and on human services
17 and the senate committee on health and welfare containing at least the
18 following information:

19 (1) a description of the adverse events reviewed by the panel during the
20 preceding 12 months, including statistics and causes;

1 (2) corrective action plans to address, in the aggregate, such adverse
2 events; and

3 (3) recommendations for system changes and legislation relating to the
4 delivery of health care in Vermont.

5 (d) The panel shall not:

6 (1) Call witnesses or take testimony from any individual involved in the
7 investigation of a maternal death.

8 (2) Enforce any public health standard or criminal law or otherwise
9 participate in any legal proceeding, except to the extent that a member of the
10 panel is involved in the investigation of a maternal death or resulting
11 prosecution and must participate in a legal proceeding in the course of
12 performing his or her duties outside the panel.

13 § 1554. CONFIDENTIALITY

14 (a) The panel's proceedings, records, and opinions shall be confidential and
15 shall not be subject to inspection or review under subchapter 3 of chapter 5 of
16 Title 1 or to discovery, subpoena, or introduction into evidence in any civil or
17 criminal proceeding; provided, however, that nothing in this subsection shall
18 be construed to limit or restrict the right to discover or use in any civil or
19 criminal proceeding anything that is available from another source and entirely
20 independent of the panel's proceedings.

1 (b) Members of the panel shall not be questioned in any civil or criminal
2 proceeding regarding the information presented in or opinions formed as a
3 result of a meeting of the panel; provided, however, that nothing in this
4 subsection shall be construed to prevent a member of the panel from testifying
5 to information obtained independently of the panel or which is
6 public information.

7 § 1555. INFORMATION RELATED TO MATERNAL MORTALITY

8 (a)(1) Health care providers; health care facilities; clinics; laboratories;
9 medical records departments; and state offices, agencies, and departments shall
10 report all maternal mortality deaths to the chair of the maternal mortality
11 review panel and to the commissioner of health or designee.

12 (2) The commissioner and the chair may acquire the information
13 described in subdivision (1) of this subsection from health care facilities,
14 maternal mortality review programs, and other sources in other states to ensure
15 that the panel's records of Vermont maternal mortality cases are accurate
16 and complete.

17 (b)(1) The commissioner shall have access to individually identifiable
18 information relating to the occurrence of maternal deaths only on a
19 case-by-case basis where public health is at risk. As used in this section,
20 "individually identifiable information" includes vital records; hospital
21 discharge data; prenatal, fetal, pediatric, or infant medical records; hospital or

1 clinic records; laboratory reports; records of fetal deaths or induced
2 terminations of pregnancies; and autopsy reports.

3 (2) The commissioner or designee may retain identifiable information
4 regarding facilities where maternal deaths occur and geographic information
5 on each case solely for the purposes of trending and analysis over time. In
6 accordance with the rules adopted pursuant to subdivision 1556(4) of this title,
7 all individually identifiable information on individuals and identifiable
8 information on facilities shall be removed prior to any case review by
9 the panel.

10 (2) The chair shall not acquire or retain any individually
11 identifiable information.

12 (c) If a root cause analysis of a maternal mortality event has been
13 completed, the findings of such analysis shall be included in the records
14 supplied to the review panel.

15 § 1556. RULEMAKING

16 The commissioner of health, with the advice and recommendation of a
17 majority of the members of the panel, shall adopt rules pursuant to chapter 25
18 of Title 3 related to the following:

19 (1) The system for identifying and reporting maternal deaths to the
20 commissioner or designee.

1 (2) The form and manner through which the panel may acquire
2 information under section 1555 of this title.

3 (3) The protocol to be used in carefully and sensitively contacting a
4 family member of the deceased woman for a discussion of the events
5 surrounding the death, including allowing grieving family members to delay or
6 refuse such an interview.

7 (4) Ensuring de-identification of all individuals and facilities involved in
8 the panel's review of cases.