1	State of Arkansas As Engrossed: H2/18/19 H2/20/19 92nd General Assembly A Bill
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3	Regular Session, 2019 HOUSE BILL 1440
4 5	By: Representatives D. Ferguson, Bentley, Barker, Brown, Burch, Capp, Cavenaugh, Clowney, Crawford,
6	Dalby, C. Fite, V. Flowers, D. Garner, Godfrey, M. Gray, Lundstrum, McCullough, Petty, Rushing, Scott,
7	Speaks, Vaught, Della Rosa, <i>Eaves</i>
, 8	By: Senators Irvin, Bledsoe, J. English, Elliott, L. Chesterfield
9	Dy Senarcio II (III, Dieusce, et Englich, Enrou, Et Chesterheite
10	For An Act To Be Entitled
11	AN ACT TO ESTABLISH THE MATERNAL MORTALITY REVIEW
12	COMMITTEE; AND FOR OTHER PURPOSES.
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15	Subtitle
16	TO ESTABLISH THE MATERNAL MORTALITY
17	REVIEW COMMITTEE.
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20	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
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22	SECTION 1. DO NOT CODIFY. Legislative findings and intent.
23	(a) The General Assembly finds that:
24	(1) Arkansas ranks forty-fourth in maternal mortality compared
25	with other states according to the 2018 United Health Foundation report on
26	the Health of Women and Children;
27	(2) Arkansas currently has thirty-five (35) maternal deaths per
28	one hundred thousand (100,000) live births, compared with the national
29	average of twenty (20) deaths per one hundred thousand (100,000) live births,
30	according to the Centers for Disease Control and Prevention;
31	(3) Thirty-five (35) states in the nation either conduct or are
32	preparing to conduct organized maternal mortality reviews that help prevent
33	maternal death through data collection, data analysis, and implementation of
34	recommendations; and
35	(4) With roughly half of pregnancy-related deaths being
36	preventable, state maternal mortality review committees are vital to



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1	understanding why women are dying during pregnancy, childbirth, and the year
2	postpartum, and to achieving goals of improving maternal health and
3	preventing future deaths.
4	(b) It is the intent of the General Assembly to establish a maternal
5	mortality review committee in the State of Arkansas and to decrease the
6	amount of maternal deaths in the state.
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8	SECTION 2. Arkansas Code Title 20, Chapter 15, is amended to add an
9	additional subchapter to read as follows:
10	<u>Subchapter 23 — Maternal Mortality Review Committee</u>
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12	20-15-2301. Maternal Mortality Review Committee.
13	(a)(1) The Department of Health shall establish the Maternal Mortality
14	Review Committee to review maternal deaths and to develop strategies for the
15	prevention of maternal deaths.
16	(2) The committee shall be multidisciplinary and composed of
17	members as deemed appropriate by the department.
18	(b) The department may contract with an external organization to
19	assist in collecting, analyzing, and disseminating maternal mortality
20	information, organizing and convening meetings of the committee, and other
21	tasks as may be incident to these activities, including providing the
22	necessary data, information, and resources to ensure successful completion of
23	the ongoing review required by this section.
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25	20-15-2302. Powers and duties.
26	The Maternal Mortality Review Committee shall:
27	(1) Review pregnancy-associated deaths or deaths of women with
28	indication of pregnancy up to three hundred sixty-five (365) days after the
29	end of pregnancy, regardless of cause, to identify the factors contributing
30	to these deaths;
31	(2) Identify maternal death cases;
32	(3) Review medical records and other relevant data;
33	(4) Contact family members and other affected or involved
34	persons to collect additional relevant data;
35	(5) Consult with relevant experts to evaluate the records and
36	<u>data;</u>

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1	(6) Make determinations regarding the preventability of maternal
2	deaths;
3	(7) Develop recommendations for the prevention of maternal
4	deaths, including public health and clinical interventions that may reduce
5	these deaths and improve systems of care; and
6	(8) Disseminate findings and recommendations to policy makers,
7	healthcare providers, healthcare facilities, and the general public.
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9	20-15-2303. Access to records.
10	(a) Healthcare providers, healthcare facilities, and pharmacies shall
11	provide reasonable access to the Maternal Mortality Review Committee to all
12	relevant medical records associated with a case under review by the
13	committee.
14	(b) A healthcare provider, healthcare facility, or pharmacy providing
15	access to medical records as described by subdivision (a) of this section is
16	not liable for civil damages or subject to any criminal or disciplinary
17	action for good faith efforts in providing such records.
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19	20-15-2304. Confidentiality.
20	(a)(1) Information, records, reports, statements, notes, memoranda, or
21	other data collected under this subchapter are not admissible as evidence in
22	any action of any kind in any court or before any other tribunal, board,
23	agency, or person.
24	(2) Information, records, reports, statements, notes, memoranda,
25	or other data collected under this subchapter shall not be exhibited or
26	disclosed in any way, in whole or in part, by any officer or representative
27	of the Department of Health or any other person, except as necessary for the
28	purpose of furthering the review of the Maternal Mortality Review Committee
29	of the case to which they relate.
30	(3) A person participating in a review shall not disclose, in
31	any manner, the information so obtained except in strict conformity with such
32	review project.
33	(b) All information, records of interviews, written reports,
34	statements, notes, memoranda, or other data obtained by the department, the
35	committee, and other persons, agencies, or organizations so authorized by the

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1	(c)(1) All proceedings and activities of the committee under this
2	subchapter, opinions of members of the committee formed as a result of such
3	proceedings and activities, and records obtained, created, or maintained
4	pursuant to this subchapter, including records of interviews, written
5	reports, and statements procured by the department or any other person,
6	agency, or organization acting jointly or under contract with the department
7	in connection with the requirements of this subchapter, are confidential and
8	are not subject to the Freedom of Information Act of 1967, §§ 25-19-101 et
9	seq., relating to open meetings, subject to subpoena, discovery, or
10	introduction into evidence in any civil or criminal proceeding.
11	(2) However, this subchapter does not limit or restrict the
12	right to discover or use in any civil or criminal proceeding anything that is
13	available from another source and entirely independent of the committee's
14	proceedings.
15	(d)(l) Members of the committee shall not be questioned in any civil
16	or criminal proceeding regarding the information presented in or opinions
17	formed as a result of a meeting or communication of the committee.
18	(2) This subchapter does not prevent a member of the committee
19	from testifying to information obtained independently of the committee or
20	which is public information.
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22	20-15-2305. Disclosure.
23	Disclosure of protected health information is allowed for public
24	health, safety, and law enforcement purposes, and providing case information
25	on maternal deaths for review by the Maternal Mortality Review Committee is
26	not a violation of the Health Insurance Portability and Accountability Act of
27	<u>1996.</u>
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29	20-15-2306. Immunity from liability.
30	State, local, or regional committee members are immune from civil and
31	criminal liability in connection with their good-faith participation in the
32	maternal death review and all activities related to a review with the
33	Maternal Mortality Review Committee.
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35	20-15-2307. Reporting.
36	(a) Beginning in 2020, the Maternal Mortality Review Committee shall

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1	file a written report on the number and causes of maternal deaths and its
2	recommendations on or before December 31 of each year to:
3	(1) The Senate Committee on Public Health, Welfare, and Labor;
4	(2) The House Committee on Public Health, Welfare, and Labor;
5	and
6	(3) The Legislative Council.
7	(b) The report shall include:
8	(1) The findings and recommendations of the committee; and
9	(2) An analysis of factual information obtained from the review
10	of the maternal death investigation reports and any local or regional review
11	panels that do not violate the confidentiality provisions under this
12	subchapter.
13	(c) The report shall include only aggregate data and shall not
14	<u>identify a particular facility or provider.</u>
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16	/s/D. Ferguson
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