

EXHIBIT H-18

INTERIM STUDY PROPOSAL 2017-081

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2
3 REQUESTING THAT THE ARKANSAS LEGISLATIVE COUNCIL REFER TO THE
4 HOUSE COMMITTEE ON PUBLIC HEALTH, WELFARE, AND LABOR A STUDY ON
5 MATERNAL MORTALITY IN THE STATE OF ARKANSAS WHICH SHALL INCLUDE
6 POSSIBLE SOLUTIONS TO LOWER MATERNAL MORTALITY IN THE STATE OF
7 ARKANSAS SUCH AS A STATEWIDE MATERNAL MORTALITY REVIEW COMMITTEE
8 OR A QUALITY CARE COLLABORATIVE.
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10 WHEREAS, the United States has the highest maternal mortality rate in
11 the developed world; and
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13 WHEREAS, while maternal deaths fell globally by more than one-third
14 (1/3) from 2000 to 2015, the maternal mortality rate in the United States has
15 increased over the same period; and
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17 WHEREAS, each year within the United States, as many as nine hundred
18 (900) women die from pregnancy or childbirth-related causes while another
19 sixty-five thousand (65,000) women nearly die from pregnancy or childbirth-
20 related causes; and
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22 WHEREAS, the Centers for Disease Control and Prevention estimates that
23 sixty percent (60%) of these maternal deaths are preventable; and
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25 WHEREAS, while maternal mortality rates are significantly higher among
26 African-American women, women with low incomes, and women living in rural
27 areas, complications from pregnancy and childbirth kill women of every race
28 and ethnicity at every education and income level; and
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30 WHEREAS, thirty-three (33) states, including the six (6) states,
31 Missouri, Tennessee, Mississippi, Louisiana, Texas, and Oklahoma, that
32 surround Arkansas, have established a Maternal Mortality Review Committee or
33 a quality care collaborative, or both; and
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35 WHEREAS, a Maternal Mortality Review Committee can collect and examine
36 the medical records and other records for all pregnancy-associated deaths to

1 determine the proportion of women whose deaths were caused by pregnancy or
2 childbirth-related issues, which can generate an accurate estimate of the
3 true maternal mortality ratio; and
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5 WHEREAS, a Maternal Mortality Review Committee can identify
6 opportunities and assist in implementing solutions in healthcare facilities
7 and communities throughout the state; and
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9 WHEREAS, a quality care collaborative can work with healthcare
10 facilities and communities throughout the state to implement solutions
11 identified by a Maternal Mortality Review Committee; and
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13 WHEREAS, the United Health Foundation reports thirty-five and four-
14 tenths (35.4) maternal deaths per one hundred thousand (100,000) births in
15 Arkansas, which is a rate that is lower than only two (2) states, New Jersey
16 with a rate of thirty-seven and three-tenths (37.3) and Georgia with a rate
17 of thirty-nine and three-tenths (39.3); and
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19 WHEREAS, the three (3) states with the lowest maternal mortality rates,
20 Massachusetts with rate of five and eight-tenths (5.8), California with a
21 rate of five and nine-tenths (5.9), and Nevada with a rate of six and eight-
22 tenths (6.8), demonstrate that a rate of thirty-five and four-tenths (35.4)
23 maternal deaths per one hundred thousand (100,000) births is neither
24 excusable nor inevitable,
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26 NOW THEREFORE,

27 BE IT PROPOSED BY THE ARKANSAS LEGISLATIVE COUNCIL OF THE NINETY-FIRST
28 GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

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30 THAT the Arkansas Legislative Council refer to the House Committee on
31 Public Health, Welfare, and Labor a study on maternal mortality in the State
32 of Arkansas, including without limitation:

33 (1) Possible solutions to meaningfully lower the maternal
34 mortality rate in Arkansas which is the third-highest rate within the United
35 States; and

1 (2) Establishment of a Maternal Mortality Review Committee or a
2 quality care collaborative, or both, to generate an accurate estimate of the
3 true maternal mortality ratio in the State of Arkansas and implement
4 solutions throughout the state.

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6 Respectfully submitted,

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10 Representative Greg Leding
11 District 86

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14 By: JMB/JMB
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