

1 State of Arkansas  
2 92nd General Assembly  
3 Regular Session, 2019

# A Bill

HOUSE BILL 1440

4  
5 By: Representatives D. Ferguson, Bentley, Barker, Brown, Burch, Capp, Cavanaugh, Clowney, Crawford,  
6 Dalby, C. Fite, V. Flowers, D. Garner, Godfrey, M. Gray, Lundstrum, McCullough, Petty, Rushing, Scott,  
7 Speaks, Vaught  
8 By: Senators Irvin, Bledsoe, J. English

## For An Act To Be Entitled

9  
10 AN ACT TO ESTABLISH THE MATERNAL MORTALITY REVIEW  
11 COMMITTEE; AND FOR OTHER PURPOSES.  
12

### Subtitle

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14 TO ESTABLISH THE MATERNAL MORTALITY  
15 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



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 Subchapter 23 – Maternal Mortality Review Committee

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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 diagnosis of pregnancy, regardless of cause, to identify the factors  
 30 contributing 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 data;

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  
36 department under this subchapter are confidential.

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)(1) 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 1996.

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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

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.

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