1	State of Arkansas	A Bill	
2	93rd General Assembly	A DIII	110110F DW 1 1500
3	Regular Session, 2021		HOUSE BILL 1580
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5		ett, V. Flowers, M. Hodges, Murdock	
6 7	By: Senator Elliott		
8		For An Act To Be Entitled	
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10		MORTALITY; AND FOR OTHER PURPOSE	
11		THE TON STILL TONIOUS	10 •
12			
13		Subtitle	
14	TO CRI	EATE THE COMMISSION ON RACIAL	
15	INEQUI	ITIES IN MATERNAL MORTALITY.	
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18	BE IT ENACTED BY THE GE	NERAL ASSEMBLY OF THE STATE OF AF	RKANSAS:
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20	SECTION 1. TEMPO	PRARY LANGUAGE. DO NOT CODIFY. C	Commission on Racial
21	Inequalities in Materna	<u> 1 Mortality — Creation — Duties.</u>	
22	(a) As used in t	his section:	
23	<u>(1) "Mater</u>	rnal mortality" means the death of	f a woman during
24	pregnancy or within one	e (1) year of the end of the pregr	nancy; and
25	<u>(2) "Sever</u>	e maternal morbidity" means unexp	pected outcomes of
26	labor and delivery that	result in significant short-term	n or long-term
27	consequences to a woman	<u>'s health.</u>	
28	(b) There is cre	eated the Commission on Racial Inc	equalities in Maternal
29	Mortality.		
30	(c)(1) The Commi	ssion on Racial Inequalities in M	Maternal Mortality
31	shall consist of the fo	ollowing members:	
32	<u>(A)</u>	The Chair of the Arkansas Legisla	ative Black Caucus or
33	his or her designee fro	om the membership of the Arkansas	<u>Legislative Black</u>
34	Caucus;		
35	<u>(B)</u>	The Secretary of the Department of	of Health or his or
36	her designee;		

1	(C) One (1) representative of the Arkansas Minority Health
2	<pre>Commission;</pre>
3	(D) One (1) representative from the Maternal Mortality
4	Review Committee;
5	(E) One (1) representative from the Arkansas Medical,
6	Dental, and Pharmaceutical Association, Inc.;
7	(F) One (1) representative of the Arkansas Medical
8	Society, Inc., who shall specialize in childbirth or maternal health,
9	including without limitation obstetrician-gynecologists, maternal-fetal
10	medicine specialists, and family medicine physicians;
11	(G) One (1) representative of District VII of the American
12	College of Obstetricians and Gynecologists, who shall specialize in
13	childbirth or maternal health, including without limitation obstetrician-
14	gynecologists, maternal-fetal medicine specialists, and family medicine
15	physicians;
16	(H) One (1) representative of the Arkansas Affiliate of
17	American College of Nurse-Midwives;
18	(I)(i) Ten (10) members appointed by the Governor.
19	(ii) The members appointed by the Governor under
20	subdivision (c)(l)(I)(i) of this section shall satisfy the following
21	requirements:
22	(a) One (1) member shall be a public health
23	professional who specializes in racial inequities in maternal health;
24	(b) One (1) member shall be a medical
25	professional who practices in a birthing center;
26	(c) One (1) member shall be a doula;
27	(d) Two (2) individuals shall be
28	representatives of different Black-led or Brown-led community-based
29	organizations that provide services to or advocate on behalf of Black and
30	Brown women; and
31	(e) One (1) member shall be a member of an
32	organization specializing in mental and maternal health in Black and Brown
33	<pre>communities;</pre>
34	(J) One (1) member appointed by the Speaker of the House
35	of Representatives from the membership of the House of Representatives;
36	(K) One (1) member appointed by the President Pro Tempore

Ţ	of the Senate from the membership of the Senate; and
2	(L) Up to three (3) additional members appointed by the
3	cochairs to ensure representation of communities of color and other
4	marginalized groups to fulfill the purpose of the Commission on Racial
5	Inequalities in Maternal Mortality.
6	(2) Each member of the Commission on Racial Inequalities in
7	<pre>Maternal Mortality shall:</pre>
8	(A) Have evidence-based knowledge or lay knowledge,
9	expertise, or experience related to maternal mortality and severe maternal
10	morbidity;
11	(B) Reflect the broad racial and geographic diversity in
12	the state with the majority of the members being from Black and Brown
13	communities and representing the communities that are most impacted by
14	inequities in maternal health outcomes in the state; and
15	(C) Be appointed within thirty (30) days after the
16	effective date of this act.
17	(3)(A) If a vacancy occurs on the Commission on Racial
18	Inequalities in Maternal Mortality, the vacancy shall be filled by the same
19	process as the original appointment.
20	(B) If a vacancy has not been filled by the original
21	appointing authority within two (2) weeks of the date the vacancy occurs, the
22	cochairs of the Commission on Racial Inequities in Maternal Mortality may
23	fill the vacancy.
24	(d)(1) The lead sponsors of this act shall:
25	(A) Call the first meeting of the Commission on Racial
26	Inequalities in Maternal Mortality within sixty (60) days of the effective
27	date of this act; and
28	(B) At the first meeting of the Commission on Racial
29	<u>Inequalities in Maternal Mortality</u> , act as cochairs of the Commission on
30	Racial Inequalities in Maternal Mortality until cochairs of the Commission on
31	Racial Inequalities in Maternal Mortality are elected under subdivision
32	(d)(2) of this section.
33	(2) At the first meeting of the Commission on Racial
34	Inequalities in Maternal Mortality, the members of the Commission on Racial
35	<u>Inequalities in Maternal Mortality shall elect two (2) cochairs from its</u>
36	legislative members.

1	(3) The Commission on Racial Inequalities in Maternal Mortality
2	shall meet at least four (4) times in locations across the state in
3	communities experiencing high or disparate rates of maternal mortality or
4	severe maternal morbidity.
5	(4)(A) The legislative members of the Commission on Racial
6	Inequalities in Maternal Mortality shall be paid per diem and mileage as
7	authorized by law for attendance at meetings of interim committees of the
8	General Assembly.
9	(B) The nonlegislative members of the Commission on Racial
10	Inequalities in Maternal Mortality shall not be compensated but may be
11	reimbursed under § 25-16-901 et seq. for expenses actually incurred in the
12	performance of their duties.
13	(5) The Commission on Racial Inequalities in Maternal Mortality
14	shall establish rules and procedures for conducting its business.
15	(6)(A) A majority of the members of the Commission on Racial
16	Inequalities in Maternal Mortality shall constitute a quorum for transacting
17	business of the Commission on Racial Inequalities in Maternal Mortality.
18	(B) An affirmative vote of a majority of a quorum present
19	shall be required for the passage of a motion or other action of the
20	Commission on Racial Inequalities in Maternal Mortality.
21	(7) The Bureau of Legislative Research shall provide staff for
22	the Commission on Racial Inequalities in Maternal Mortality.
23	(e)(1) The purpose of the Commission on Racial Inequalities in
24	Maternal Mortality is to examine and make recommendations to reduce or
25	eliminate racial inequities in maternal mortality and severe maternal
26	morbidity in the state.
27	(2) To achieve the purpose stated in subdivision (e)(1) of this
28	section, the Commission on Racial Inequalities in Maternal Mortality shall:
29	(A) Investigate and report on:
30	(i) Evidence-based, best, or promising practices,
31	including without limitation approaches taken by other state or grassroots
32	organizations to reduce or eliminate racial inequities in maternal mortality
33	or severe maternal morbidity, including without limitation community-driven
34	strategies, approaches, and policies, including without limitation access to
35	racially and ethnically diverse, culturally competent, and affordable doula
36	services, the accessibility and affordability of birthing centers and

1	maternal medical homes, and the diversity and cultural competency of maternal
2	healthcare providers;
3	(ii) Barriers to accessing prenatal and postpartum
4	care, how the prenatal and postpartum care is delivered, and the quality of
5	the prenatal and postpartum care;
6	(iii) How historical and current structural,
7	institutional, and individual forms of racism, including without limitation
8	implicit bias or discrimination, affect the incidence and prevalence of
9	maternal mortality and severe maternal morbidity in communities of color and
10	potential community-level and state-level solutions, which may include
11	without limitation information related to mandatory, evidence-based implicit
12	bias training for hospital facilities and birthing centers in the state;
13	(iv) The availability of data collected by the
14	state, including without limitation outpatient data, and what additional data
15	is needed, including without limitation data related to family interviews,
16	resources, and staffing;
17	(v) The definition of and associated limitations in
18	defining severe maternal morbidity, including without limitation:
19	(a) What conditions or outcomes constitute
20	severe maternal morbidity;
21	(b) Extending the timeframe within which
22	severe maternal morbidity should be measured to one (1) year; and
23	(c) Data and screening criteria necessary to
24	track and measure severe maternal morbidity;
25	(vi) The availability, affordability, and adequacy
26	of insurance coverage, public or private, relative to prenatal and postpartum
27	care, including without limitation insurance coverage for doula services;
28	(vii) Any relevant findings of the Arkansas Minority
29	Health Commission and the Maternal Mortality Review Committee; and
30	(viii) Any other factors that the Commission on
31	Racial Inequalities in Maternal Mortality considers relevant to reducing and
32	eliminating racial inequities in maternal mortality and severe maternal
33	morbidity in the state; and
34	(B) Recommend specific solutions and legislation necessary
35	to address the issues studied by the Commission on Racial Inequalities in
36	Maternal Mortality under this section.

1	(f)(1) Within one (1) year of the effective date of this act, the
2	Commission on Racial Inequalities in Maternal Mortality shall file with the
3	President Pro Tempore of the Senate; the Speaker of the House of
4	Representatives; the Secretary of the Department of Health; the Joint Budget
5	Committee; the House Committee on Public Health, Welfare, and Labor; and the
6	Senate Committee on Public Health, Welfare, and Labor a final written report
7	of its activities, findings, and recommendations, including drafts of
8	proposed legislation.
9	(2) At each meeting of the Commission on Racial Inequalities in
10	Maternal Mortality, the cochairs shall provide an update on the status of the
11	report required under this subsection.
12	(g) The Commission on Racial Inequalities in Maternal Mortality
13	expires on December 31, 2022.
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