## Stricken language would be deleted from and underlined language would be added to present law. Act 1032 of the Regular Session

1 2	State of Arkansas As Engrossed: $H2/18/19$ $H2/20/19$ $S4/4/19$ $92$ nd General Assembly $As$ Engrossed: $As$ Engrossed: $As$ $Bill$
3	Regular Session, 2019 HOUSE BILL 1441
4	
5	By: Representatives Bentley, D. Ferguson, 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, Eaves
8	By: Senators Irvin, Bledsoe, J. English, Elliott, L. Chesterfield
9	
10	For An Act To Be Entitled
11	AN ACT TO IMPROVE MATERNAL AND PERINATAL OUTCOMES BY
12	CREATING THE MATERNAL AND PERINATAL OUTCOMES QUALITY
13	REVIEW COMMITTEE; AND FOR OTHER PURPOSES.
14	
15	
16	Subtitle
17	TO IMPROVE MATERNAL AND PERINATAL
18	OUTCOMES BY CREATING THE MATERNAL AND
19	PERINATAL OUTCOMES QUALITY REVIEW
20	COMMITTEE.
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22	DE THE ENACHED BY MUE CENTRAL ACCENTALY OF MUE CHAME OF ADVANCAC
23	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
24 25	SECTION 1. DO NOT CODIFY. Legislative findings and intent.
26	(a) The General Assembly finds that:
27	(1) In 2018, Arkansas's infant mortality rate was seven and
28	eight-tenths (7.8) per one thousand (1,000) live births compared to five and
29	nine-tenths (5.9) per one thousand (1,000) live births nationally;
30	(2) Arkansas ranks forty-sixth in the nation for infant
31	mortality per America's Health Rankings;
32	(3)(A) In 2018, almost eleven percent (11%) of babies born in
33	Arkansas were preterm.
34	(B) Of those babies born preterm, eight and eight-tenths
35	percent (8.8%) had low birth weights; and
36	(4) The quality for maternal and perinatal outcomes could be

1	improved drastically in this state.
2	(b) It is the intent of the General Assembly to establish a maternal
3	and perinatal outcomes quality review committee in the State of Arkansas and
4	to improve the maternal and perinatal outcomes in the state.
5	
6	SECTION 2. Arkansas Code Title 20, Chapter 15, is amended to add an
7	additional subchapter to read as follows:
8	Subchapter 23 — Maternal and Perinatal Outcomes Quality Review Committee
9	
10	20-15-2301. Maternal and Perinatal Outcomes Quality Review Committee.
11	(a)(1) The Department of Health shall establish the Maternal and
12	Perinatal Outcomes Quality Review Committee to review data on births and to
13	develop strategies for improving birth outcomes.
14	(2) The committee shall be multidisciplinary and composed of
15	members as deemed appropriate by the department.
16	(b) The department may contract with an external organization to
17	assist in collecting, analyzing, and disseminating maternal mortality
18	information, organizing and convening meetings of the committee, and other
19	tasks as may be incident to these activities, including providing the
20	necessary data, information, and resources to ensure successful completion of
21	the ongoing review required by this section.
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23	20-15-2302. Powers and duties.
24	The Maternal and Perinatal Outcomes Quality Review Committee shall:
25	(1) Create a unified message and strategy that builds on best
26	<pre>practices;</pre>
27	(2) Develop clear measurements to evaluate targeted outreach,
28	progress, and return on investment;
29	(3) Develop recommendations for levels of care by establishing
30	systems designating where infants are born or transferred according to the
31	<u>level of care they need at birth;</u>
32	(4) Create a system of continuous quality improvement that will
33	include the ability of designated and nondesignated hospitals to compare
34	performance to peer facilities;
35	(5) Create a collaborative framework, in addition to quality
36	improvement for birthing hospitals that will allow for better outcomes,

1	better overall long-term care and decrease cost of care; and
2	(6) Disseminate findings and recommendations to policy makers,
3	healthcare providers, healthcare facilities, and the general public.
4	
5	20-15-2303. Access to records.
6	(a) Healthcare providers, healthcare facilities, and pharmacies shall
7	provide reasonable access to the Maternal and Perinatal Outcomes Quality
8	Review Committee to all relevant medical records associated with a case under
9	review by the committee.
10	(b) A healthcare provider, healthcare facility, or pharmacy providing
11	$\underline{\text{access}}$ to medical records as described by subdivision (a) of this section is
12	not liable for civil damages or subject to any criminal or disciplinary
13	action for good faith efforts in providing such records.
14	
15	20-15-2304. Confidentiality.
16	(a)(1) Information, records, reports, statements, notes, memoranda, or
17	$\underline{\text{other data collected under this subchapter are not admissible as evidence } \underline{\text{in}}$
18	any action of any kind in any court or before any other tribunal, board,
19	agency, or person.
20	(2) Information, records, reports, statements, notes, memoranda,
21	or other data collected under this subchapter shall not be exhibited or
22	disclosed in any way, in whole or in part, by any officer or representative
23	of the Department of Health or any other person, except as necessary for the
24	purpose of furthering the review of the Maternal and Perinatal Outcomes
25	Quality Review Committee of the case to which they relate.
26	(3) A person participating in a review shall not disclose, in
27	any manner, the information so obtained except in strict conformity with such
28	review project.
29	(b) All information, records of interviews, written reports,
30	statements, notes, memoranda, or other data obtained by the department, the
31	committee, and other persons, agencies, or organizations so authorized by the
32	department under this subchapter are confidential.
33	(c)(1) All proceedings and activities of the committee under this
34	subchapter, opinions of members of the committee formed as a result of such
35	proceedings and activities, and records obtained, created, or maintained
36	pursuant to this subchapter, including records of interviews, written

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

1	<u>and</u>
2	(3) The Legislative Council.
3	(b) The report shall include:
4	(1) The findings and recommendations of the committee; and
5	(2) An analysis of factual information obtained from the review
6	of the birth outcome data and local or regional review panels that do not
7	violate the confidentiality provisions under this subchapter.
8	(c) The report shall include only aggregate data and shall not
9	identify a particular facility or provider.
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11	/s/Bentley
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14	APPROVED: 4/16/19
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