

A BILL

22-524

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

~~To establish a Maternal Mortality Review Committee within the Office of the Chief Medical Examiner to determine the causes associated with maternal mortalities or severe maternal morbidities of District residents and those that occur in the District, to describe and record any trends, data, or patterns that are observed surrounding maternal mortalities and severe maternal morbidities, to create a strategic framework for improving maternal health outcomes for racial and ethnic minorities in the District, to recommend training to improve the identification, investigation, and prevention of maternal mortalities and severe maternal morbidities, and make publically available an annual report of its findings, recommendations, and steps taken to evaluate implementation of past recommendations.~~

To establish a Maternal Mortality Review Committee within the Office of the Chief Medical Examiner to determine the causes associated with maternal mortalities of District residents and those that occur in the District, to describe and record any trends, data, or patterns that are observed surrounding maternal mortalities, to create a strategic framework for improving maternal health outcomes for racial and ethnic minorities in the District, to recommend training to improve the identification, investigation, and prevention of maternal mortalities, and make publicly available an annual report of its findings, recommendations, and steps taken to evaluate implementation of past recommendations.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the "Maternal Mortality Review Committee Establishment Act of 2018".

Sec. 2. Definitions.

For the purposes of this act, the term:

(1) "Committee" means the Maternal Mortality Review Committee established in

section 3.

36 (2) "Maternal mortality" means any pregnancy-related death or pregnancy-
37 associated death.

38 (3) "Personally identifiable information" means information that identifies any
39 person or could be used to identify any person, including:

40 (A) Prenatal, fetal, pediatric, and infant medical records;

41 (B) Hospital discharge records;

42 (C) Hospital or clinic records and laboratory reports;

43 (D) Health insurance claim information;

44 (E) Records of fetal deaths or induced termination of pregnancies; and

45 (F) Records of public benefits, child abuse and neglect records, school
46 records, mental health records, police reports and autopsy reports.

47 (4) "Pregnancy-associated death" means the death of a woman while the woman is
48 pregnant or within one year after the end of the pregnancy, irrespective of the cause, other than a
49 pregnancy-related death.

50 (5) "Pregnancy-related death" means the death of a woman while the woman is
51 pregnant or within one year after the end of the pregnancy, from any cause related to the pregnancy
52 or its management, but not from accidental or incidental causes.

53 ~~(6) "Severe maternal morbidity" means when a woman, while the woman is~~
54 ~~pregnant or within one year after the end of the pregnancy, receives 4 or more units of blood~~
55 ~~products or is admitted to an intensive care unit.~~

56

57 Sec. 3. Establishment and purpose.

58 (a) There is established a Maternal Mortality Review Committee within the Office of the
59 Chief Medical Examiner (“OCME”). The OCME shall provide facilities, staffing, and other
60 administrative support for the Committee.

61 (b) The Committee shall evaluate maternal mortalities, ~~severe maternal morbidities~~, and
62 associated factors:

63 (A) That occur in the District; and

64 (B) Are of District residents, regardless of the place of death.

65 (c) The Committee’s duties shall include:

66 (1) Identifying and characterizing the scope and nature of maternal mortalities ~~and~~
67 ~~severe maternal morbidities~~ in the District and of District residents;

68 (2) Describing and recording any data or patterns that are observed surrounding
69 maternal mortalities ~~and severe maternal morbidities~~;

70 ~~(3) Examining past events and circumstances surrounding maternal mortalities and~~
71 ~~severe maternal morbidities by reviewing records and other pertinent documents of public agencies~~
72 ~~and private entities responsible for investigating maternal mortality and severe maternal morbidity,~~
73 ~~or treating pregnant women;~~

74 (3) Examining past events and circumstances surrounding maternal mortalities by
75 reviewing records and other pertinent documents of public agencies and private entities responsible
76 for investigating maternal mortality or treating pregnant women;

77 (4) Developing and revising, as necessary, operating rules and procedures for the
78 review of maternal mortalities ~~and severe maternal morbidities~~, including identification of cases
79 to be reviewed, coordination among the agencies and professionals involved, and improvement of
80 the identification, data collection, and record keeping of the causes of maternal mortalities ~~and~~
81 ~~severe maternal morbidities~~;

82 (5) Recommending systemic improvements to promote improved and integrated
83 public and private systems serving pregnant women in the District;

84 (6) Recommending components for prevention and education programs;

85 (7) Creating a strategic framework for improving maternal health outcomes for
86 racial and ethnic minorities in the District, including reducing disparities in maternal mortality ~~and~~
87 ~~severe maternal morbidity~~ rates for racial and ethnic minorities; and

88 (8) Recommending training for maternal health providers to improve the
89 identification, investigation, and prevention of maternal mortalities ~~and severe maternal~~
90 ~~morbidities~~.

91 (d)(1) By July 1st of each year, the Committee shall make publically-available and submit
92 to the Council and Mayor an annual report of its findings, recommendations, and steps taken to
93 evaluate the implementation of past recommendations, which includes the following information:

94 (A) A description of the causes of and contributing factors to maternal
95 mortalities ~~and severe maternal morbidities~~ the Committee reviewed during the preceding calendar
96 year;

97 (B) A description of the state of maternal health in the District, including
98 statistics and causes of maternal mortalities ~~and severe maternal morbidities~~; and

99 (C) Recommendations for systemic changes and legislation relating to the
100 delivery of maternal health care in the District.

101 (2) The annual report submitted pursuant to paragraph (1) of this subsection shall
102 not contain any personally identifiable information, but may include aggregated data.

103 Sec. 4. Composition of the Maternal Mortality Review Committee.

104 (a) The Mayor shall appoint at least one representative from each of the following agencies:

105 (1) The Office of the Chief Medical Examiner;

106 (2) The Department of Health;

107 (3) The Department of Behavioral Health;

108 (4) The Department of Health Care Finance; and

109 (5) The Department of Human Services.

110 (b) The Mayor shall additionally appoint the following members in accordance with section
111 2(f) of the Confirmation Act of 1978, effective March 3, 1979 (D.C. Law 2-142; D.C. Official
112 Code § 1-523.01(f)):

113 (1) One person with experience in obstetrics and gynecology from each of the
114 District's hospitals and birthing centers;

115 (2) One representative from the American Congress of Obstetricians and
116 Gynecologists;

117 (3) One representative from the American College of Nurse-Midwives;

- 118 (4) One obstetric registered nurse;
- 119 (5) One certified nurse midwife;
- 120 (6) One doula;
- 121 (7) One representative from a pediatric hospital;
- 122 (8) Three representatives from community organizations specializing in women's
- 123 health, teen pregnancy, or public health;
- 124 (9) One social worker specializing in women's health or maternal health; and
- 125 (10) One person who has been directly impacted by a maternal mortality ~~or severe~~
- 126 ~~maternal morbidity.~~
- 127 (c) The Committee shall select a Chairperson according to procedures set forth by the
- 128 Committee.
- 129 (d) The Committee shall establish quorum and other procedural requirements as it
- 130 considers necessary.
- 131 (e)(1) Members appointed pursuant to subsection (a) of this section shall serve at the
- 132 pleasure of the Mayor.
- 133 (2) Members appointed pursuant to subsection (b) of this section shall serve a 3-
- 134 year term and may be removed by the Mayor for cause. Vacancies in membership shall be filled
- 135 in the same manner in which the original appointment was made.
- 136 (f) No member shall serve in a hold-over capacity for longer than 180 days after the
- 137 expiration of the term to which they were appointed.

138 (g) The Committee may invite other stakeholders to attend or present at any relevant
139 portion of a Committee meeting.

140 Sec. 5. Access to information.

141 (a) Notwithstanding any other provision of law, immediately upon the request of the
142 Committee and as necessary to carry out the Committee's purpose and duties, the Committee shall
143 be provided, without cost and without authorization of the persons to whom the information or
144 records relate, access to:

145 (1) All information and records of any District agency, or a District agency's
146 contractors, including birth and death certificates, law enforcement investigation data, medical
147 examiner investigation data, and autopsy reports, and information and records of health agencies
148 that provide prenatal services to the woman; and

149 (2) All information and records of any healthcare provider, healthcare facility,
150 clinic, laboratory, or medical record department, including providers of mental health services who
151 provided services to the deceased mother, that receives information related to maternal mortalities;
152 ~~severe maternal morbidities~~, or prenatal care.

153 (b) The Committee may seek information from entities and agencies outside the District
154 by any legal means.

155 (c)(1) Notwithstanding subsection (a)(1) of this section, information and records
156 concerning a current law enforcement investigation may be withheld, at the discretion of the
157 investigating authority, if disclosure of the information would compromise a criminal
158 investigation.

159 (2) If information or records are withheld under paragraph (1) of this subsection, a
160 report on the status of the investigation shall be submitted to the Committee every 3 months until
161 the earliest of the following events occurs:

162 (A) The investigation is concluded and the information or records are
163 provided to the Committee; or

164 (B) The investigating authority determines that providing the information
165 will no longer compromise the investigation and the information or records are provided to the
166 Committee.

167 (d)(1) The Committee may have access to personally identifiable information relating to
168 maternal mortalities ~~or severe maternal morbidities~~; provided, that the Committee shall not
169 disclose personally identifiable information.

170 (2) The Department of Health and the Committee may retain data on facilities
171 where maternal mortalities ~~or severe maternal morbidities~~ occur for analytical purposes.

172 Sec. 6. Subpoena power.

173 (a) When necessary for the discharge of its duties, the Committee may issue subpoenas to
174 compel witnesses to appear, testify, or produce books, papers, correspondence, memoranda,
175 documents, medical records, or other relevant records.

176 (b) Except as provided in subsection (c) of this section, subpoenas shall be served
177 personally upon the witness or the witness's designated agent, not less than 5 business days before
178 the date the witness must appear or the documents must be produced, by a special process server,
179 at least 18 years of age, engaged by the Committee.

180 (c) If, after a reasonable attempt, personal service on a witness or a witness's agent cannot
181 be effected, a special process server identified in subsection (b) of this section may serve a
182 subpoena by registered or certified mail not fewer than 8 business days before the date the witness
183 must appear, testify, or produce documents.

184 (d) If a witness who has been personally summoned neglects or refuses to obey the
185 subpoena issued pursuant to subsection (a) of this section, the Committee may report that fact to
186 the Superior Court of the District of Columbia, and the court may compel obedience to the
187 subpoena to the same extent as witnesses may be compelled to obey the subpoenas of the court.

188 Sec. 7. Confidentiality of Committee information and meetings.

189 (a) Except as provided in this section, information and records obtained or created by the
190 Committee are confidential and not subject to civil discovery or to disclosure pursuant to the
191 Freedom of Information Act, effective March 25, 1977 (D.C. Law 1-96; D.C. Official Code § 2-
192 531 *et seq.*).

193 (b) Information and records presented to the Committee for review shall not be immune
194 from subpoena, discovery, or prohibited from being introduced into evidence solely because they
195 were presented to or reviewed by the Committee if the information and records have been obtained
196 through other sources.

197 (c) A person other than a Committee member who appears before or participates in the
198 Committee's review of maternal mortalities ~~and severe maternal morbidities~~ shall sign a
199 confidentiality agreement acknowledging that any information provided to the Committee is
200 confidential; provided, that any such confidentiality agreement shall account for situations where

201 disclosure is necessary for the person to comply with a request for information from the
202 Committee.

203 (d) Committee meetings are closed to the public and are not subject to the Open Meetings
204 Act, effective March 31, 2011 (D.C. Law 18-350; D.C. Official Code § 2-571 *et seq.*). Committee
205 members who attend closed meetings shall not disclose what occurred with anyone who was not
206 in attendance, other than Committee members, except insofar as disclosure is necessary to carry
207 out the duties of the Committee.

208 (e) Committee members may disclose information and records related to the Committee
209 only as necessary to carry out the Committee's duties and purposes.

210 (f) Any party who discloses information pursuant to this act shall take all reasonable steps
211 to ensure that the information disclosed, and the person to whom the information is disclosed, are
212 as limited as possible.

213 Sec. 8. Immunity from liability for providing information to the Committee.

214 (a) Any person, hospital, or institution participating in good faith in providing information
215 to the Committee pursuant to this act shall have immunity from administrative, civil, or criminal
216 liability that might otherwise be incurred or imposed with respect to the disclosure of the
217 information. In any such proceeding, there shall be a rebuttable presumption that the person,
218 hospital, or institution that provided information to the Committee acted in good faith.

219 (b) If acting in good faith, without malice, and within the parameters of the protocols
220 established by this act, representatives of the Committee are immune from civil liability for an
221 activity related to reviews of maternal mortalities ~~and severe maternal morbidities.~~

222 Sec. 9. Unlawful disclosure of information; penalties.

223 Whoever knowingly discloses, receives, makes use of, or permits the use of information
224 concerning a deceased woman or other person in violation of this act shall be subject to a civil fine
225 of not more than \$1,000. Violations of this act shall be prosecuted by the Office of the Attorney
226 General or the Attorney General's designee in the name of the District of Columbia.

227 Sec. 10. Applicability.

228 (a) This act shall apply upon the date of inclusion of its fiscal effect in an approved budget
229 and financial plan.

230 (b) The Chief Financial Officer shall certify the date of the inclusion of the fiscal effect in
231 an approved budget and financial plan, and provide notice to the Budget Director of the Council
232 of the certification.

233 (c)(1) The Budget Director shall cause the notice of the certification to be published in the
234 District of Columbia Register.

235 (2) The date of publication of the notice of the certification shall not affect the
236 applicability of this act.

237 Sec. 11. Fiscal impact statement.

238 The Council adopts the fiscal impact statement in the committee report as the fiscal impact
239 statement required by section 4a of the General Legislative Procedures Act of 1975, approved
240 October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

241

242

ENGROSSED ORIGINAL

243 Sec. 12. Effective date.

244 This act shall take effect following approval by the Mayor (or in the event of veto by the
245 Mayor, action by the Council to override the veto), a 30-day period of congressional review as
246 provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24,
247 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of
248 Columbia Register.