

# STATE OF NEW YORK

8338

2019-2020 Regular Sessions

## IN ASSEMBLY

June 14, 2019

Introduced by M. of A. JOYNER -- read once and referred to the Committee on Ways and Means

AN ACT to amend the public health law, in relation to the maternal mortality review board

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Section 2509 of the public health law, as added by a chapter of the laws of 2019, amending the public health law relating to maternal mortality review boards and the maternal mortality and morbidity advisory council, as proposed in legislative bills numbers A.3276 and S.1819, is amended to read as follows:

2 § 2509. Maternal mortality review board. 1. (a) There is hereby established in the department the maternal mortality review board for the purpose of reviewing maternal deaths and maternal morbidity and developing and disseminating findings, recommendations, and best practices to contribute to the prevention of maternal mortality and morbidity. The board shall assess the cause of death, factors leading to death and preventability for each maternal death reviewed and, in the discretion of the board, cases of severe maternal morbidity, and shall develop and disseminate strategies for reducing the risk of maternal mortality and morbidity, including risk resulting from racial, economic, or other disparities. The commissioner may delegate the authority to conduct maternal mortality reviews.

3 (b) The commissioner may enter into an agreement with the city of New York providing:

4 (i) that the functions of the state board relating to maternal deaths and severe maternal morbidity occurring within the city of New York shall be conducted by the city board;

5 (ii) the city board shall provide to the state board the results of its reviews, relevant information in the possession of the city board, and the recommendations of the city board; and

EXPLANATION--Matter in italics (underscored) is new; matter in brackets [-] is old law to be omitted.

LBD00490-03-9

(iii) the department and the state board shall provide information and assistance to the city board for the performance of its functions.

(c) Nothing in this section shall prevent the city of New York from establishing, without an agreement with the commissioner, a board relating to maternal deaths and severe maternal morbidity occurring within the city of New York.

2. As used in this section, unless the context requires otherwise:

(a) "Advisory council" and "council" mean the advisory council on maternal mortality and morbidity, established under this section.

(b) "Board" means a maternal mortality review board established by this section, referred to in this section as the "state board", or a board operating under this section established by the city of New York, with or without an agreement with the commissioner, referred to in this section as the "city board".

(c) "Maternal death" means the death of a woman during pregnancy or within a year from the end of pregnancy.

(d) "Severe maternal morbidity" or "morbidity" means unexpected outcomes of pregnancy, labor, or delivery that result in significant short- or long-term consequences to a woman's health.

(e) "City commissioner" means the commissioner of the New York city department of health and mental hygiene.

3. (a) The members of the state board shall be comprised of multidisciplinary experts in the field of maternal mortality, women's health and public health, and shall include health care professionals or other experts who serve and are representative of the racial, ethnic, and socioeconomic diversity of the women and mothers [in] of the state and, to the extent possible, the medically underserved areas of the state or areas of the state with disproportionately high occurrences of maternal mortality or morbidity.

(b) The state board shall be composed of at least fifteen members, all of whom shall be appointed by the commissioner.

(c) The terms of the state board members shall be three years. The commissioner may choose to reappoint state board members to additional three year terms.

(d) A majority of the appointed membership of the state board, no less than three, shall constitute a quorum.

(e) When any member of the state board fails to attend three consecutive regular meetings, unless such absence is for good cause, that membership may be deemed vacant for purposes of the appointment of a successor.

(f) Meetings of the state board shall be held at least twice a year but may be held more frequently as deemed necessary, subject to request of the department.

(g) Members of the state and city boards shall be indemnified under section seventeen of the public officers law or section fifty-k of the general municipal law, as the case may be.

(h) Members of the state board shall not be compensated for their participation on the board but shall receive reimbursement for their ordinary and necessary expenses of participation.

(i) Membership on a board shall not disqualify any person from holding any public office or employment.

4. (a) The commissioner ~~[and the city commissioner, as the case may be,]~~ may request and shall receive upon request from any department, division, board, bureau, commission, local health departments or other agency of the state or political subdivision thereof or any public authority, such information, including but not limited to death records,

1 medical records, autopsy reports, toxicology reports, hospital discharge  
2 records, birth records and any other information that will help the  
3 department under this section to properly carry out its functions,  
4 powers and duties. The commissioner, or the city commissioner for the  
5 maternal deaths or maternal morbidity occurring within the vital statis-  
6 tics registration district of the city of New York may request and shall  
7 receive upon request from any department, division, board, commission or  
8 other agency under the authority of the city of New York as well as  
9 hospitals established pursuant to article twenty-eight of this chapter,  
10 birthing facilities, medical examiners, coroners and coroner physicians  
11 and any other facility providing services associated with maternal  
12 mortality or maternal morbidity, such information, including, but not  
13 limited to, death records, medical records, autopsy reports, toxicology  
14 reports, hospital discharge records, birth records and any other infor-  
15 mation that will help the department under this section to properly  
16 carry out its functions, powers and duties.

17 (b) The commissioner and the city commissioner shall receive and may  
18 solicit voluntary information, including oral or written statements,  
19 relating to any maternal death and case of severe maternal morbidity,  
20 from any family member or other interested party (including the patient  
21 in a case of severe maternal morbidity) relating to any case that may  
22 come before the board. Oral statements received under this paragraph  
23 shall be transcribed or summarized in writing. The commissioner and the  
24 city commissioner shall transmit that information to the board consider-  
25 ing the case.

26 (c) Before transmitting any information to the board, the commissioner  
27 or the city commissioner shall remove all personal identifying informa-  
28 tion of the woman, health care practitioner or practitioners or anyone  
29 else individually named in such information, as well as the hospital or  
30 facility that treated the woman, and any other information such as  
31 geographic location that may inadvertently identify the woman, practi-  
32 tioner or facility. This paragraph shall not preclude the transmitting  
33 of information to the board that is reasonably necessary to enable the  
34 board to perform an appropriate review under this section.

35 5. Each board:

36 (a) shall make and report findings and recommendations to the commis-  
37 sioner [~~or city commissioner, as the case may be~~], and in the case of  
38 the city board to the commissioner and the city commissioner regarding  
39 the cause of death, factors leading to death, and preventability of each  
40 maternal death case, and each case of severe maternal morbidity reviewed  
41 by the board, by reviewing relevant information for each case in the  
42 state or the city of New York, as the case may be, and consulting with  
43 experts as needed to evaluate the information for each death; and shall  
44 provide such findings and recommendations, including best practices and  
45 strategies for reducing the risk of maternal mortality and morbidity, to  
46 the advisory council; provided that material provided to the advisory  
47 council shall not include any information that would be confidential  
48 under this section;

49 (b) shall develop recommendations to the commissioner [~~or city commis-~~  
50 ~~sioner, as the case may be~~], and in the case of the city board to the  
51 commissioner and the city commissioner for areas of focus, including  
52 issues of severe maternal morbidity and issues of racial, economic or  
53 other disparities in maternal outcomes;

54 (c) may, in addition to the findings and recommendations made under  
55 this subdivision, and consistent with all applicable confidentiality  
56 protections, bring any particular matter to the attention of the commis-

1 sioner or the city commissioner, and in the case of the city board to  
2 the commissioner and the city commissioner;

3 (d) shall issue a report on its findings and recommendations every two  
4 years, and may also issue reports more frequently. The reports shall be  
5 public documents; and

6 (e) may request and shall receive the assistance of the commissioner  
7 in the instance of the state board and the city commissioner in the  
8 instance of the city board in carrying out its functions.

9 6. The commissioner and the city commissioner and the state and city  
10 boards shall each keep confidential any information collected or  
11 received under this section that includes personal identifying informa-  
12 tion of the woman, health care practitioner or practitioners or anyone  
13 else individually named in such information, as well as the hospital or  
14 facility that treated the woman, and any other information such as  
15 geographic location that may inadvertently identify the woman, practi-  
16 tioner or facility, and shall use the information provided or received  
17 under this section solely for the purposes of improvement of the quality  
18 of health care of women and to prevent maternal mortality and morbidity.  
19 This subdivision shall not preclude the transmitting of information to  
20 the board that is reasonably necessary to enable the board to perform an  
21 appropriate review under this section. All records received, meetings  
22 conducted, reports, except those reports required to be issued by the  
23 board by this section, and records made and maintained and all books and  
24 papers obtained by the board shall be confidential and shall not be made  
25 open or available, including under article six of the public officers  
26 law, and shall be limited to board members as well as those authorized  
27 by the commissioner or city commissioner. Such information shall not be  
28 discoverable or admissible as evidence in any action in any court or  
29 before any other tribunal, board, agency or person.

30 7. The commissioner and the city commissioner, within their respective  
31 legal authority, may use the recommendations and findings of the boards  
32 to develop guidance and other actions relating to best practices, and  
33 shall disseminate information relating to that guidance and other  
34 actions to appropriate health care providers.

35 8. (a) There is hereby established in the department an advisory coun-  
36 cil on maternal mortality and morbidity.

37 (b) The advisory council:

38 (i) may review the findings of the boards;

39 (ii) may develop recommendations on policies, best practices, and  
40 strategies to prevent maternal mortality and morbidity;

41 (iii) may hold public hearings on those matters;

42 (iv) may make findings and issue reports, including an annual report,  
43 on such matters; and

44 (v) may request and shall receive the assistance of the commissioner,  
45 the city commissioner, and the boards in carrying out its functions.

46 (c) The advisory council shall consist of at least twenty members[7]  
47 to be determined by the commissioner. The commissioner [~~and the city~~  
48 ~~commissioner~~] shall [~~each~~] appoint [~~half of~~] the members of the council,  
49 at least ten of whom shall be on the recommendation of the city commis-  
50 sioner. The commissioner shall appoint the chair of the council.

51 (d) The members of the council shall be comprised of multidisciplinary  
52 experts and lay persons knowledgeable in the field of maternal mortal-  
53 ity, women's health and public health and shall include members who  
54 serve and are representative of the racial, ethnic, and socioeconomic  
55 diversity of the women and mothers [~~in~~] of the state, and to the extent  
56 possible, the medically underserved areas of the state or areas of the

1 state with disproportionately high occurrences of maternal mortality or  
2 morbidity.

3 (e) The terms of the council members shall be three years. The  
4 [~~appointing official~~] commissioner may choose to reappoint council  
5 members to additional three-year terms. Vacancies on the council shall  
6 be filled by appointment by the [~~appointing official~~] commissioner,  
7 consistent with paragraph (c) of this subdivision. A majority of the  
8 appointed membership of the council shall constitute a quorum. When any  
9 member of the council fails to attend three consecutive regular meet-  
10 ings, unless such absence is for good cause, that membership may be  
11 deemed vacant for purposes of the appointment of a successor.

12 (f) Meetings of the council shall be held at least twice a year.

13 (g) Members of the council shall be indemnified under section seven-  
14 teen of the public officers law. Members of the council shall not be  
15 compensated for their participation on the council but shall receive  
16 reimbursement for their ordinary and necessary expenses of partic-  
17 ipation. Membership on the council shall not disqualify any person from  
18 holding any public office or employment.

19 § 2. This act shall take effect of the same date and in the same  
20 manner as a chapter of the laws of 2019, amending the public health law  
21 relating to maternal mortality review boards and the maternal mortality  
22 and morbidity advisory council, as proposed in legislative bills numbers  
23 A.3276 and S.1819, takes effect.