

**FIRST ENGROSSMENT  
with Senate Amendments  
ENGROSSED HOUSE BILL NO. 1205**

Introduced by

Representatives Steiner, Lefor, Meier, Rohr, Skroch, Strinden

Senators Myrdal, Wardner

1 A BILL for an Act to create and enact chapter 23-51 of the North Dakota Century Code, relating  
2 to establishing the maternal mortality review committee; to provide for a continuing  
3 appropriation; and to provide for a report to the legislative management and other agencies.

4 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

5 **SECTION 1.** Chapter 23-51 of the North Dakota Century Code is created and enacted as  
6 follows:

7 **23-51-01. Definitions.**

8 As used in this chapter:

9 1. "Committee" means the maternal mortality review committee.

10 2. "Department" means the obstetrics and gynecology department of the university of  
11 North Dakota school of medicine and health sciences.

12 3. "Health care provider" means:

13 a. An individual licensed, certified, or otherwise authorized to provide health care  
14 services in the ordinary course of business in the state; or

15 b. A health facility licensed by the state department of health.

16 4. "Maternal mortality" means the death of a pregnant woman or a woman within one  
17 year postpartum.

18 5. "School" means the university of North Dakota school of medicine and health  
19 sciences.

20 6. "Severe maternal morbidity" means a condition occurring in a woman during  
21 pregnancy or within one year of the end of pregnancy which results in:

22 a. Admission to the intensive care unit of a health facility; or

23 b. Transfusion of four or more units of blood products.

1       **23-51-02. Maternal mortality review committee.**

2       The department shall appoint individuals to serve as members on the maternal mortality  
3 review committee. Committee membership must include representatives of multiple specialties  
4 and disciplines, including forensic pathology. In appointing members, the department shall  
5 endeavor to appoint individuals working in and representing communities affected by  
6 pregnancy-related deaths, severe maternal morbidity, and a lack of access to relevant perinatal  
7 and intrapartum care services.

8       **23-51-03. Powers and duties of committee.**

9       1. The committee shall:

- 10       a. Identify maternal mortality cases in the state;  
11       b. Obtain and conduct comprehensive reviews of medical records and other  
12       relevant data using best practices for case reviews to identify factors associated  
13       with the deaths;  
14       c. Consult, as appropriate, with relevant experts to evaluate and interpret the  
15       records and data;  
16       d. Consult, as appropriate, with family members and other affected or involved  
17       persons to collect additional relevant information;  
18       e. Make determinations regarding the preventability of maternal deaths;  
19       f. Develop policy recommendations to improve health care services for women and  
20       reduce the incidence of maternal mortality in the state;  
21       g. Convene annually and provide committee members with the available information  
22       necessary to fully review each case; and  
23       h. Compile annually a state report of fatalities reviewed.

24       2. The committee may review cases and trends in severe maternal morbidity.

25       **23-51-04. Powers and duties of school - Continuing appropriation.**

- 26       1. The school shall provide or arrange for administrative services to assist the committee  
27       in performing official duties, including collection and management of case review files,  
28       maintenance of records, collection and analysis of data, and the issuance of an annual  
29       state report on maternal mortality. The school is responsible for the confidentiality and  
30       security of data on the sharing site on which the documents are stored.

1       2. The school may accept gifts and grants from any source to fund the duties of the  
2       department and the committee under this chapter. The school shall apply for and use  
3       available federal money to fund the duties of the committee under this chapter. All  
4       moneys received by the school under this section are appropriated on a continuing  
5       basis to the school for the purpose of funding the duties of the committee and the  
6       department under this chapter.

7       **23-51-05. Confidentiality.**

8       1. Notwithstanding section 44-04-19, all portions of a meeting of the committee during  
9       which the committee reviews maternal mortality and severe maternal morbidity are  
10      closed to the public. Notwithstanding section 44-04-18, all documentation and reports  
11      of the committee which are related to committee review of maternal deaths are  
12      confidential, except for the annual state report, which may not disclose personally  
13      identifiable information of decedents. Records deemed confidential under this section  
14      are not discoverable as evidence.

15      2. All proceedings and activities of the committee under this chapter; committee  
16      members' opinions formed as a result of the proceedings and activities; and records  
17      obtained, created, or maintained under this chapter including records of interviews,  
18      written reports, and statements procured by the department, the committee, or any  
19      other person acting jointly or under contract with the department or committee in  
20      connection with requirements of this chapter, are confidential and not subject to  
21      section 44-04-18, or subject to subpoena, discovery, or introduction into evidence in  
22      any civil or criminal proceeding. This section may not be construed to limit or restrict  
23      the right to discover or use information or records available from another source and  
24      independent of the proceedings of the committee in any civil or criminal proceeding.

25      **23-51-06. Access to records.**

26      1. The presiding officer of the committee may request from a health care provider all  
27      patient records of the provider from the most recent thirty-six-month period which  
28      pertain to an identified maternal mortality. Upon receipt of a written request for the  
29      information, a health care provider shall disclose the records. The presiding office also  
30      may acquire the information from health care facilities, maternal mortality review

1 programs, and other sources in other states to ensure the committee's records of  
2 North Dakota maternal mortality cases are accurate and complete.

3 2. The state department of health shall provide a certified copy of a complete death  
4 record to the committee upon request.

5 **23-51-07. Immunity.**

6 A member of the committee or person employed by or acting in an advisory capacity to the  
7 committee and which provides information, counsel, or services to the committee is not liable  
8 for damages for an action taken within the scope of the functions of the committee. Members of  
9 the committee may not be questioned in any civil or criminal proceeding regarding the  
10 information presented in or opinions formed as a result of a meeting or communication of the  
11 committee. A committee member or health care provider providing access to medical records  
12 pursuant to this chapter may not be held liable for civil damages or be subject to any criminal or  
13 disciplinary action for a good faith effort in providing the records.

14 **23-51-08. Annual state report.**

15 1. The committee's annual state report must include the identification of patterns, trends,  
16 and policy issues related to maternal mortality, but may not disclose personally  
17 identifiable information.  
18 2. The committee shall provide the annual state report to the legislative management, the  
19 state department of health, the North Dakota society of obstetricians and  
20 gynecologists, and other entities as determined necessary by the committee to  
21 facilitate the objectives of the committee. The committee's findings and  
22 recommendations must be made available to health care providers and the public.