

Senate Executive Departments and Administration Committee

Kevin Condict 271-7875

SB 182, relative to the maternal mortality review committee.

Hearing Date: February 19, 2025

Time Opened: 9:02 a.m.

Time Closed: 9:10 a.m.

Members of the Committee Present: Senators Pearl, Gannon and Reardon

Members of the Committee Absent : Senators McGough and Altschiller

Bill Analysis: This bill renames the maternal mortality review panel as the maternal mortality review committee, revises its membership, and provides for the committee to be administered by the department of health and human services and facilitated by the New Hampshire perinatal quality collaborative (NHPQC) affiliated with Dartmouth Health. The bill also revises the definition of "pregnancy-related death" by removing the exclusion of accidental or incidental causes.

The bill is a request of the department of health and human services.

Sponsors:

Sen. Prentiss

Sen. Fenton

Sen. Rosenwald

Sen. Perkins Kwoka

Sen. Altschiller

Rep. Hakken-Phillips

Rep. Kuttab

Who supports the bill: Sen. Suzanne Prentiss (SD 5), Rep. Mary Hakken-Phillips (Grafton 12), Abby Rogers (DHHS), Erica Tenney (DHHS), Sen. Donovan Fenton (SD 10), Sarah McCarthy, Janet Lucas, Lissa Mascio (OCA), Sen. Debra Altschiller (SD 24), Oliver Matte, Hannah Willcutt, Courtney St. Gelais, and Tyler St. Gelais.

Who opposes the bill: Daniel Richardson.

Who is neutral on the bill: None.

Summary of testimony presented:

Representative Mary Hakken-Phillips, Grafton 12

- Rep. Hakken-Phillips introduced Senate Bill 182 on behalf of Sen. Prentiss.

- Rep. Hakken-Phillips said that SB 182 was filed at the request of the Department of Health and Human Services (DHHS). This bill addresses changes needed to the statute that establishes and governs New Hampshire's multidisciplinary committee charged with conducting comprehensive reviews of deaths that occur during or within a year of pregnancy.
- Rep. Hakken-Phillips explained the existence of what is known as the Maternal Mortality Review Panel, which is consulted when a fetal or pregnancy related death occurs.
- Rep. Hakken-Phillips said that the proposed legislation seeks to amend RSA 132:29 through RSA 132:31 to update and revise the Panel.
- Rep. Hakken-Phillips said the bill changes the name of the Panel to the Maternal Mortality Review Committee (MMRC). The bill revises the definition of a pregnancy associated death to include death of woman while pregnant or within one year of the end of pregnancy. It specifies the institutions administering and facilitating the MMRC, changes committee membership to include a representative from the Division for Children, Youth and Families (DCYF) and the Department of Corrections, authorizes compensation for mileage, and secures access of the MMRC and its abstractors to certain protected data.
- Rep. Hakken-Phillips said that this legislation will have bipartisan support if it were to pass through the Executive Departments and Administration Committee.

**Abby Rogers and Erica Tenney, Division of Public Health Services,
Department of Health and Human Services**

- Ms. Rogers said that DHHS is in support of SB 182.
- Ms. Rogers said that the legislation provides minor revisions and clarifications to RSA 132:29-31, which governs the MMRC.
- Ms. Rogers said that this bill will clarify statute and improve functionality.
- Ms. Rogers said that the statute needed an update, which will allow the Department to further update administrative rules.
- Ms. Rogers explained that the Maternal Mortality Review Panel, as referred to in statute, is comprised of a multi-disciplinary group of appointees including OBGYNs, fetal medicine specialists, the medical examiner, and representatives from the community.
- Ms. Tenney said that the MMRC only receives deidentified case narratives about maternal deaths, no medical records or personally identifiable information are shared. She explained that addresses, hospitals, and names are all redacted.

- Ms. Tenney said that the members and partners of the MMRC implement recommendations based on case review data to inform clinical care quality improvements, provide education, and policy interventions.
- Ms. Tenney said New Hampshire birthing hospitals are currently participating in evidence-based quality improvement programs for substance use disorder and perinatal mental health conditions. She said those factors have been found to be the major contributors to maternal death in the state.
- Ms. Tenney said there are efforts to reduce cardiac and cardiovascular causes and other complications. The efforts are being made with clinical education sessions.
- Ms. Tenney said that the New Hampshire MMRC is committed to continuing a comprehensive review of all cases of maternal death and identifying opportunities to eliminate future maternal deaths.
- Sen. Reardon asked how information is gathered with redacted data.
 - o Ms. Rogers responded that the MMRC looks at redacted data and does a case-by-case review of every maternal death. She said that the addition of a representative from DCYF would help the Committee get a fuller picture of challenges that women may face with pregnancy.
- Sen. Reardon asked for clarification that the goal of this committee would not be intervention but rather referral.
 - o Ms. Rogers answered that this is correct. She said that the MMRC reviews the case review of a maternal death and makes recommendations on how to prevent future maternal death.
- Sen. Pearl asked why the bill changes the name.
 - o Ms. Rogers answered that it was a federal recommendation.
- Sen. Pearl asked for clarification about the phrase “issues information” and wanted to know if the use of the term is similar to live birth worksheets.
 - o Ms. Rogers said that it is different. She said that it would be specific to maternal deaths.