

1 AN ACT  
2 RELATING TO PUBLIC HEALTH; AMENDING THE MATERNAL MORTALITY  
3 AND MORBIDITY PREVENTION ACT TO CLARIFY THE TYPES OF CASES  
4 REVIEWED BY THE MATERNAL MORTALITY REVIEW COMMITTEE;  
5 EXPANDING COMMITTEE LEADERSHIP, MEMBERSHIP, POWERS AND  
6 PRIVILEGES; REQUIRING APPROVAL BY THE SECRETARY OF HEALTH FOR  
7 COMMITTEE ACTIONS; PROVIDING FOR AN EXECUTIVE COMMITTEE;  
8 CLARIFYING MEMBERSHIP; ELIMINATING A SUBCOMMITTEE; PROVIDING  
9 A DEADLINE FOR RULEMAKING.

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11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

12 SECTION 1. Section 24-32-1 NMSA 1978 (being Laws 2019,  
13 Chapter 41, Section 1) is amended to read:

14 "24-32-1. SHORT TITLE.--Chapter 24, Article 32 NMSA  
15 1978 may be cited as the "Maternal Mortality and Morbidity  
16 Prevention Act"."

17 SECTION 2. Section 24-32-2 NMSA 1978 (being Laws 2019,  
18 Chapter 41, Section 2) is amended to read:

19 "24-32-2. DEFINITIONS.--As used in the Maternal  
20 Mortality and Morbidity Prevention Act:

21 A. "administrative co-chair" means the chief  
22 medical officer of the department or another representative  
23 of the department appointed by the secretary of health;

24 B. "aggregate data" means health care data that  
25 exclude any individually identifiable health information,

1 including patient and health care provider identification;

2 C. "chief medical officer" means the chief medical  
3 officer of the department;

4 D. "clinical co-chair" means a committee member  
5 with maternal child health clinical or paraprofessional  
6 training nominated by the committee and approved by the  
7 department to serve in this position;

8 E. "committee" means the maternal mortality review  
9 committee;

10 F. "committee member" means a person who has been  
11 appointed to sit as a member of the committee and who  
12 participates in committee business and votes on committee  
13 matters;

14 G. "critical income" means income lost as a result  
15 of uncompensated work time used to attend a committee  
16 meeting;

17 H. "de-identified data" means data from which the  
18 following identifiers have been removed:

19 (1) names;

20 (2) any geographic subdivision smaller than  
21 a state, including street address, city, county, precinct and  
22 zip code and their equivalent geocodes;

23 (3) all elements of dates, except the year  
24 of an incident, that are directly related to an individual,  
25 including birth date, admission date, date of delivery,

1 discharge date and date of death;

2 (4) telephone numbers;

3 (5) fax numbers;

4 (6) electronic mail addresses;

5 (7) social security numbers;

6 (8) medical record numbers;

7 (9) health plan beneficiary numbers;

8 (10) account numbers;

9 (11) certificate and license numbers;

10 (12) vehicle identifiers and serial numbers,

11 including license plate numbers;

12 (13) device identifiers and serial numbers;

13 (14) web universal resource locators, also

14 known as "URLs";

15 (15) internet protocol address numbers;

16 (16) biometric identifiers, including finger

17 and voice prints;

18 (17) full-face photographic images and any

19 comparable images; and

20 (18) any other unique identifying number,

21 characteristic or code;

22 I. "department" means the department of health;

23 J. "health care provider" means:

24 (1) an individual licensed, certified or

25 otherwise authorized to provide health care services in the

1 ordinary course of business in the state; or

2 (2) a health facility that the department  
3 licenses;

4 K. "law enforcement agency" means a law  
5 enforcement agency of the state, an Indian nation, tribe or  
6 pueblo or a political subdivision of the state;

7 L. "maternal mortality" means the death of a  
8 pregnant woman or a woman within one year postpartum;

9 M. "medical record" means the written or graphic  
10 documentation, sound recording or electronic record relating  
11 to medical, behavioral health and health care services that a  
12 patient receives from a health care provider or under the  
13 direction of a physician or another licensed health care  
14 provider. "Medical record" includes diagnostic  
15 documentation, including an x-ray, electrocardiogram and  
16 electroencephalogram; other test results; data entered into a  
17 prescription drug monitoring program; and an autopsy report;

18 N. "operational staff" means staff or contractors  
19 of the department assigned or contracted to support the work  
20 of the committee or its executive committee;

21 O. "qualified invited guest" means a person  
22 approved by the co-chairs and invited by the committee to  
23 attend a committee meeting to provide technical expertise to  
24 the committee, to enhance training in maternal health, to  
25 provide insight on maternal mortality or severe maternal

1 morbidity review in other jurisdictions or to provide  
2 operational support to the committee; and

3 P. "severe maternal morbidity" means unexpected  
4 outcomes of labor and delivery that result in significant  
5 short- or long-term consequences to a woman's health as  
6 identified by hospitalizations using administrative hospital  
7 discharge data and the world health organization's  
8 *International Classification of Diseases* diagnosis and  
9 procedure codes."

10 SECTION 3. Section 24-32-3 NMSA 1978 (being Laws 2019,  
11 Chapter 41, Section 3) is amended to read:

12 "24-32-3. MATERNAL MORTALITY REVIEW  
13 COMMITTEE--CREATION--MEMBERSHIP--DUTIES.--

14 A. The "maternal mortality review committee" is  
15 created in the department. The committee shall be composed  
16 of:

17 (1) the chief medical officer of the  
18 department or another representative of the department  
19 appointed by the secretary of health, who shall be the  
20 ex-officio administrative co-chair;

21 (2) a clinical co-chair, who shall be  
22 nominated by the committee and approved by the department;  
23 and

24 (3) a maximum of thirty additional members,  
25 who shall be appointed by the administrative co-chair;

1 provided that four of those members shall include:

2 (a) two members nominated by the  
3 secretary of Indian affairs; and

4 (b) two members nominated by the  
5 director of the office on African American affairs.

6 B. Each member of the committee, except the  
7 administrative co-chair, shall serve a term of three years,  
8 with no consecutive terms.

9 C. Pursuant to requirements established by the  
10 department, each member of the committee shall receive  
11 training on trauma and the impacts of trauma, including  
12 secondary trauma, trauma of racism and trauma of maternal  
13 mortality and morbidity.

14 D. In appointing members of the committee, the  
15 administrative co-chair shall include members that work in  
16 and represent communities that are most impacted per the  
17 state maternal mortality ratio so that the composition of the  
18 committee reflects:

19 (1) the racial, ethnic and linguistic  
20 diversity of the state;

21 (2) the differing geographic regions within  
22 the state, including rural and urban areas; and

23 (3) communities that are most impacted by  
24 pregnancy-related deaths, severe maternal morbidity and a  
25 lack of access to relevant perinatal and intrapartum care

1 services.

2 E. The committee shall meet at the call of the  
3 co-chairs. A majority of committee members appointed  
4 constitutes a quorum for the transaction of any business.  
5 The affirmative vote of at least a majority of a quorum  
6 present and approval by the secretary of health or the  
7 secretary's designee shall be necessary for any action to be  
8 taken by the committee. No vacancy in the membership of the  
9 committee shall impair the right of a quorum to exercise all  
10 rights and perform all duties of the committee.

11 F. Operational staff and qualified guests may  
12 participate in committee deliberations in an advisory  
13 capacity as directed by the co-chairs of the committee.  
14 Operational staff and qualified guest presence at a committee  
15 meeting shall not convey committee membership.

16 G. A committee member required to travel in excess  
17 of fifty miles to attend a meeting of the committee may, with  
18 the approval of the department, receive per diem and mileage  
19 for attendance at that meeting pursuant to the Per Diem and  
20 Mileage Act. A committee member forsaking critical income to  
21 attend a committee meeting may, with the approval of the  
22 department and pursuant to rules established by the  
23 department, be additionally reimbursed for loss of that  
24 income in an amount not to exceed three hundred dollars  
25 (\$300) per meeting.

1 H. The committee shall:

2 (1) review each incident of maternal  
3 mortality using a de-identified case summary prepared by  
4 operational staff;

5 (2) review aggregate data relating to severe  
6 maternal morbidity;

7 (3) outline trends and patterns and provide  
8 recommendations relating to maternal mortality and severe  
9 maternal morbidity in the state;

10 (4) compile reports using aggregate data on  
11 an annual basis in an effort to further study the causes and  
12 problems associated with maternal mortality and severe  
13 maternal morbidity and distribute these reports to the  
14 legislature, government agencies, including the Indian  
15 Affairs department and the office on African American  
16 affairs, health care providers, community-based organizations  
17 working in the interest of maternal and child health and  
18 others as necessary to reduce the maternal mortality rate in  
19 the state. These reports shall include recommendations to  
20 assist health care providers and the health care system in  
21 reducing maternal mortality and morbidity;

22 (5) serve as a link with maternal mortality  
23 and morbidity review teams nationwide and participate in  
24 national maternal mortality and morbidity review team  
25 activities; and



1                   (6) perform any other functions as resources  
2 allow to enhance efforts to reduce and prevent maternal  
3 mortality and severe maternal morbidity in the state.

4                   I. The co-chairs of the committee may designate an  
5 executive committee to conduct business as necessary. The  
6 executive committee shall:

7                   (1) consist of the co-chairs of the  
8 committee and any other committee members or operational  
9 staff that the co-chairs deem necessary. Operational staff  
10 and qualified guests may participate in executive committee  
11 deliberations in an advisory capacity as directed by the  
12 co-chairs of the committee. Operational staff and qualified  
13 guest presence at an executive committee meeting shall not  
14 convey committee membership;

15                   (2) meet at the call of the co-chairs;

16                   (3) monitor and support the activities of  
17 the full committee and recruit committee members for  
18 recommendation to the administrative co-chair; and

19                   (4) make final decisions regarding:

20                   (a) committee operations and rules;

21                   (b) data analysis, data dissemination  
22 and evaluation based on findings and recommendations from the  
23 full committee; and

24                   (c) any other issues within the scope  
25 of decisions that may be made by the committee pursuant to

1 the Maternal Mortality and Morbidity Prevention Act that the  
2 full committee or department deems necessary."

3 SECTION 4. Section 24-32-4 NMSA 1978 (being Laws 2019,  
4 Chapter 41, Section 4) is amended to read:

5 "24-32-4. ACCESS TO HEALTH INFORMATION.--

6 A. A health care provider, the office of the state  
7 medical investigator and the vital records and health  
8 statistics bureau of the department shall notify operational  
9 staff of any incident of maternal mortality within three  
10 months of the incident.

11 B. Except as otherwise provided by law, the  
12 clinical co-chair and operational staff may access medical  
13 records and other health information relating to an incident  
14 of maternal mortality at any time within five years from the  
15 date of the incident. At the request of the clinical  
16 co-chair or operational staff with co-chairs or department  
17 approval, a health care provider, the office of the state  
18 medical investigator and the vital records and health  
19 statistics bureau of the department shall provide medical  
20 records and other requested health information to the  
21 department relating to an incident of maternal mortality.  
22 Upon the request of the clinical co-chair or operational  
23 staff, a law enforcement agency shall provide any report  
24 relating to an incident of maternal mortality to the  
25 department. A health care provider or law enforcement agency

1 that provides a medical record, health information or report  
2 pursuant to this section with reasonable care and in  
3 compliance with the law shall not be held criminally or  
4 civilly liable for that release of information.

5 C. The following shall be confidential and shall  
6 not be subject to the Open Meetings Act or the Inspection of  
7 Public Records Act or subject to any subpoena, discovery  
8 request or introduction into evidence in a civil or criminal  
9 proceeding unless obtained from a source separate and apart  
10 from the committee or department by valid means as provided  
11 by law:

12 (1) any meeting, part of a meeting or  
13 activity of the committee or its executive committee at which  
14 data or other information is to be discussed and that may  
15 result in disclosure to the public of information protected  
16 by law; and

17 (2) except as may be necessary in  
18 furtherance of the duties of the committee or in response to  
19 an alleged violation of a confidentiality agreement pursuant  
20 to Subsection E of this section, any information, record,  
21 report, notes, memorandum or other data that the department  
22 or committee obtains pursuant to the Maternal Mortality and  
23 Morbidity Prevention Act.

24 D. Only the clinical co-chair and operational  
25 staff shall collect and have access to medical records, law

1 enforcement reports and vital records data to support the  
2 work of the full committee.

3 E. Each committee member and qualified guest shall  
4 sign a confidentiality agreement that indicates the member's  
5 or qualified guest's adherence to the provisions of this  
6 section."

7 SECTION 5. Section 24-32-5 NMSA 1978 (being Laws 2019,  
8 Chapter 41, Section 5) is amended to read:

9 "24-32-5. RULEMAKING.--By December 31, 2021, the  
10 secretary of health shall adopt and promulgate amended rules  
11 to carry out the provisions of the Maternal Mortality and  
12 Morbidity Prevention Act."

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