



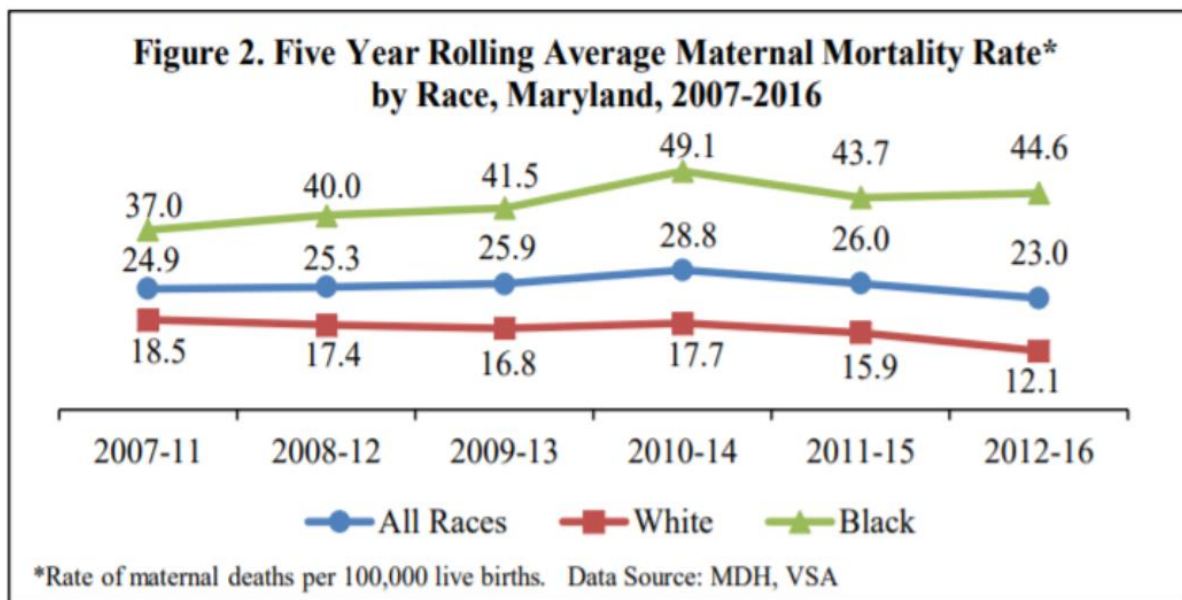
We improve the lives and experiences of Maryland's children and youth by advancing policies and programs that tackle disparities and close equity gaps to ensure that there is an opportunity for all our most vulnerable to thrive.

**Testimony before the Finance Committee
In SUPPORT with Sponsor Amendments of**

Senate Bill 602- Public Health - Maternal Mortality Review Program - Establishment of Local Teams

**Melissa Rock, 0-3 Strategic Initiative Director, Advocates for Children and Youth
February 14, 2019**

While the number of women who die related to childbirth is quite low, the maternal mortality rate in the United States is significantly higher than most other developed nations. Furthermore, Maryland's racial disparities are a public health crisis that needs immediate attention.



SB 602 allows, but doesn't require the creation of local maternal mortality review teams.

SB 602's language includes a drafting error. The intention was never to require the development of local maternal mortality review teams, but rather allow jurisdictions that want to create a local team do so. For jurisdictions that have the resources and desire to create a local team, we see great value in them doing so.

A local maternal mortality review team will complement rather than duplicate the State team's efforts.

Currently, the State Maternal Mortality Review Program reviews all deaths that occur within one year of a woman giving birth. However, the State team is almost solely medical providers, and

the local teams will be predominantly community service providers that work with pregnant women and women with young children. It will be far easier for the local team to target prevention efforts at the needs of their community members than it would be for the State team. Furthermore, the team members on the local team will be better positioned to understand the issues unique to its community. There will also be great value in bringing together the providers that will need to implement the systemic changes and prevention efforts.

SB 602 protects the confidentiality of the information that would be reviewed by the local teams.

When the local team reviews the cases of maternal mortality, all the information will be de-identified. Maintaining the confidentiality of the information will be a priority of the local team, as it is for the local Fetal Infant Mortality Review (FIMR) teams that review fetal and infant deaths. The FIMR teams have not had problems around the confidentiality despite the sensitive nature of the information. Finally, SB 602 includes protections of the confidentiality of the information.

SB 602 could lead to cost savings for Maryland and local jurisdictions

Some jurisdictions are hopeful that they can create a local MMRT with existing resources. The biggest burden will be the medical record abstraction. There are significant cost savings in preventing deaths. The activities of the local MMRT are well aligned with FIMR and can be aligned with FIMR's prevention activities. The team will be very similar—the same data partners and data sharing processes. The local teams will be eligible for additional federal funding—for maternal mortality prevention. They will be better positioned to go after federal grants around maternal mortality, pre-conception and interception health.

We urge this committee to issue a favorable report on SB 602 to allow jurisdictions to create local maternal mortality review teams to lower Maryland's maternal mortality rate and to reduce the racial disparities therein.