

## Department of Planning and Budget

### 2019 Fiscal Impact Statement

**1. Bill Number:** HB2581

<b>House of Origin</b>	<input checked="" type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
<b>Second House</b>	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

**2. Patron:** Kory

**3. Committee:** Health, Welfare and Institutions

**4. Title:** Maternal Mortality Review Team established; investigation.

**5. Summary:** Directs the Department of Health to establish a Maternal Mortality Review Team to review all pregnancy-associated deaths and pregnancy-related deaths, as defined in the bill, occurring in the Commonwealth in a systematic way and (i) prepare a de-identified case summary for each case; (ii) determine the rate of pregnancy-associated and pregnancy-related deaths in the Commonwealth, including rates of such deaths among different demographic groups; (iii) identify risk factors of pregnancy-associated or pregnancy-related deaths and factors contributing to disparities in rates of such deaths among demographic groups; and (iv) recommend components of prevention and intervention programs to reduce the rate of pregnancy-associated and pregnancy-related deaths in the Commonwealth, including programs (a) for the education and training of health care providers providing services to women who are pregnant or who have been pregnant within the previous year and (b) specifically targeted at reducing racial or other disparities in rates of pregnancy-associated and pregnancy-related deaths in the Commonwealth. The bill also requires reporting of pregnancy-associated and pregnancy-related deaths by certain health care providers, law-enforcement officers, funeral directors, or other persons having knowledge of such deaths and directs the Department to establish a program for the reduction of pregnancy-associated and pregnancy-related deaths in the Commonwealth.

**6. Budget Amendment Necessary:** See item #8.

**7. Fiscal Impact Estimates:** Indeterminate, see item #8.

**8. Fiscal Implications:** The fiscal impact this bill would have on the Commonwealth cannot be determined at this time. The Office of the Chief Medical Examiner currently has a Maternal Mortality Review Team (MMRT) that performs some of the same duties as provided in the bill. Currently, the MMRT has one wage level project coordinator that is responsible for requesting records, reviewing identified cases, writing reports, completing data requests, collecting, entering, and analyzing surveillance data, maintaining the MMRT database, presenting at meetings, vetting team recommendations, and working with vital statistics to identify cases. This legislation would require the MMRT to review all pregnancy-associated deaths and pregnancy-related deaths. The number of pregnancy-associated and pregnancy-

related cannot be determined at this time. The legislation will also allow anyone to report a suspected case to the local health department, which could result in additional cases that the MMRT will have to investigate to determine if it actually meets the outlined criteria. However it is unknown how many cases will be reported to the MMRT.

VDH reports that the single position assigned to the MMRT is currently working at capacity. It is therefore assumed that VDH would need more positions to handle the expected increase in workload and responsibilities for the program. VDH has estimated that it would take 100 to 140 hours per week to review every case reported as defined in the bill and 20 to 29 hours per week, per region, for the additional investigations. However, since there is no mandatory reporting and VDH currently only reviews cases that meets specific criteria, it is unknown how many additional investigations the MMRT would receive. Furthermore, these investigators will need to have a medical background that is similar to registered nurses to be able to determine if the MMRT should actually review a case. Depending on the increase in workload, VDH would need to hire wage investigators at a rate of \$51,672 annually. There would also be travel costs associated with the education and training of health care providers provided in the bill and each investigator would need approximately \$2,400 for travel costs. Since the MMRT would review every case and not just the ones that have met specific criteria, this may be a significant increase in workload. As a result, if the workload justifies it, a Maternal Mortality Team Coordinator would be required for developing, implementing, and overseeing the investigators and the investigations, at a rate of \$103,604 (salary and fringe).

**9. Specific Agency or Political Subdivisions Affected:** Department of Health.

**10. Technical Amendment Necessary:** No.

**11. Other Comments:** None.