

Article - Health - General

§13–1201.

- (a) In this subtitle the following words have the meanings indicated.
- (b) “Faculty” means the Medical and Chirurgical Faculty in the State.
- (c) “Maternal child health committee” means the maternal child health committee of the Faculty that is a medical review committee, as defined under § 1-401 of the Health Occupations Article.
- (d) “Maternal death” means the death of a woman during pregnancy or within 1 year after the woman ceases to be pregnant.

§13–1202.

The General Assembly finds that:

- (1) Maternal deaths are a serious public health concern and have a tremendous family and societal impact;
- (2) Maternal deaths are significantly underestimated and inadequately documented, preventing efforts to identify and reduce or eliminate the causes of death;
- (3) No processes exist in the State for the confidential identification, investigation, or dissemination of findings regarding maternal deaths; and
- (4) There is a need to establish a Maternal Mortality Review Program to review maternal deaths and to develop strategies for the prevention of maternal deaths.

§13–1203.

The Secretary shall establish a Maternal Mortality Review Program to review maternal deaths and to develop strategies for the prevention of maternal deaths.

§13–1204.

- (a) The Secretary may contract with the Faculty to administer the Maternal Mortality Review Program.
- (b) In consultation with the maternal child health committee of a faculty, the Secretary shall develop a system to:
  - (1) Identify maternal death cases;
  - (2) Review medical records and other relevant data;
  - (3) Contact family members and other affected or involved persons to collect additional relevant data;
  - (4) Consult with relevant experts to evaluate the records and data collected;
  - (5) Make determinations regarding the preventability of maternal deaths;
  - (6) Develop recommendations for the prevention of maternal deaths; and
  - (7) Disseminate findings and recommendations to policy makers, health care providers, health care facilities, and the general public.
- (c) In accordance with § 4-221 of this article and notwithstanding § 4-224 of this article, the Secretary may provide the Program with a copy of the death certificate of any woman whose death is suspected to have been a maternal death.

§13–1205.

- (a) **A health care provider or health care facility, as defined under Title 19, Subtitles 3, 3A, and 3B of this article, shall provide the Maternal Mortality Review Program reasonable access to all relevant medical records associated with a case under review by the Maternal Mortality Review Program.**
- (b) **The provisions of Title 4, Subtitle 3 of this article do not apply to a disclosure made to the Program under this subtitle.**

§13–1206.

(a) Notwithstanding the provisions of Title 4, Subtitle 3 of this article, if a patient of a health care provider or a health care facility dies of a maternal death and the health care provider or the health care facility has knowledge of the circumstances of the death, the health care provider or the health care facility shall report the death to the Maternal Mortality Review Program.

(b) Any health care provider and health care facility report required under this section shall be:

- (1) Confidential;
- (2) Not open to public inspection; and
- (3) Except under a court order sealing the court record, not subject to subpoena or discovery in any criminal or civil proceeding.

(c) A health care provider or health care facility may not be held liable for civil damages or subject to any criminal or disciplinary action for good faith efforts made to comply with the provisions of this subtitle.

§13–1207.

On or before December 1 of each year, the Secretary shall submit a report on findings, recommendations, and Program actions to the Governor and, subject to § 2-1246 of the State Government Article, to the General Assembly