

SUBJECT: Adding a member to the Maternal Mortality and Morbidity Task Force

COMMITTEE: Public Health — favorable, without amendment

VOTE: 9 ayes — Price, Sheffield, Arévalo, Burkett, Collier, Cortez, Klick,  
Oliverson, Zedler

0 nays

2 absent — Coleman, Guerra

WITNESSES: For — (*Registered, but did not testify*: Rebecca Marques, ACLU of Texas; Wendy Wilson, Consortium of Texas Certified Nurse-Midwives; Heather Busby and Blake Rocap, NARAL Pro-Choice Texas; Greg Hansch, National Alliance on Mental Illness-TX; Will Francis, National Association of Social Workers-Texas Chapter; Lucy Stein, Progress Texas; Adriana Kohler, Texans Care for Children; Mary Allen, Texas Association of Community Health Centers; Ryan Valentine, Texas Freedom Network; Yannis Banks, Texas NAACP; Andrew Cates, Texas Nurses Association; John Burleson, Travis County Resistance; and 14 individuals)

Against — None

On — (*Registered, but did not testify*: Manda Hall, Department of State Health Services)

BACKGROUND: Health and Safety Code, ch. 34 governs the Maternal Mortality and Morbidity Task Force. This multidisciplinary advisory committee within the Department of State Health Services (DSHS) is composed of 15 members, including a representative of the department's family and community health programs, the state epidemiologist or a designee, and 13 members appointed by the DSHS commissioner, as follows:

- seven physicians, including four specializing in obstetrics and one each in family practice, psychiatry, and pathology;

- one registered nurse and one certified nurse midwife;
- one epidemiologist, biostatistician, or researcher of pregnancy-related deaths;
- one social worker or social service provider;
- one community advocate in a relevant field; and
- one medical examiner or coroner.

**DIGEST:** HB 28 would increase the number of appointed members on the Maternal Mortality and Morbidity Task Force from 13 to 14 by including one nurse specializing in labor and delivery. The total task force membership would increase from 15 to 16.

This bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect on the 91st day after the last day of the special session.

**SUPPORTERS SAY:** HB 28 would enhance the Maternal Mortality and Morbidity Task Force's ability to fulfill its duties by adding a member with practical experience working directly with women during the labor and delivery process. A labor and delivery nurse plays a vital role during a woman's pregnancy and after childbirth because the nurse is often the first person to detect pregnancy-related complications such as hemorrhaging. The addition of this health professional would provide valuable, hands-on knowledge when the task force makes recommendations to reduce the maternal mortality and morbidity rate in Texas.

**OPPONENTS SAY:** No apparent opposition.

**NOTES:** Three other bills related to changes to the Maternal Mortality and Morbidity Task Force are on today's calendar for second-reading consideration. HB 9 by Burkett, et al., HB 10 by Walle, et al., and HB 11 by Thierry each would continue the task force until 2023 and amend its duties, among other provisions.