

**Texas Maternal Mortality and Morbidity Review Committee
Meeting Minutes
Friday, December 09, 2022
8:00 a.m.**

**Virtual: Teams Meeting Platform
Location: Texas Department of State Health Services
Moreton Building, Room M-100
1100 West 49th Street,
Austin, TX 78756**

Agenda Item 1: Call to order, welcome, roll call, and introductions

Dr. Carla Ortique, Chair, called the meeting to order at 8:01 a.m. Dr. Ortique announced this was the Texas Maternal Mortality and Morbidity Review Committee (MMMRC) meeting.

Dr. Ortique, Chair, acknowledged the work done by the committee honors the lives that have been lost, and requested a moment of silence in respect and remembrance of those impacted by the loss of a mother.

Dr. Ortique welcomed the committee members, the staff, the members of the public who were in attendance. She announced that the committee met on December 08, 2022, for a closed executive session to review cases. From the 2019 as well as the 2020 cohort, twenty-five (25) reviews of maternal deaths were completed. One hundred and forty (140) out of one hundred and forty-seven (147) total cases were completed for 2019 case cohort.

Dr. Ortique turned the floor over to Ms. Tessa Buck-Ragland, HHSC, Advisory Committee Coordination Office. Ms. Buck-Ragland read logistical announcements, called roll, and asked the members to provide a brief introduction and determined with 11 members present a quorum was reached.

Table 1: Texas M3RC attendance Friday, December 09, 2022, meeting.

MEMBER NAME	IN ATTENDANCE
Dr. Eumenia Castro	No
Dr. Kendall Crowns	No
Dr. Meitra Doty	Yes
Dr. Catherine Eppes	Yes
Dr. Kelly Fegan-Bohm	Yes
Dr. Manda Hall	Yes
Dr. James Hill	Yes
Dr. Sherri Onyiego	Yes
Dr. Carla Ortique, Chair	Yes
Dr. Lavannya Pandit	No
Ms. Nancy Puig	Yes
Dr. Amy Raines-Milenkov	Yes
Dr. Christina Murphey	Yes
Dr. Patrick Ramsey, Vice Chair	Yes
Dr. Robin Page	Yes
Ms. Nakeenya Wilson	Yes- joined at 8:16 a.m.
VACANT	

Yes: Indicates attended the meeting

No: Indicates did not attend the meeting

Agenda Item 2: Consideration of September 2, 2022, draft meeting minutes

Dr. Ortique noted members received a copy of the September 2, 2022, meeting minutes in their electronic packet and she called for any edits or changes. With no noted edits Dr. Ortique requested a motion to accept the September 2, 2022, minutes as written.

MOTION:

Dr. Robin Page made the motion to approve the September 2, 2022, meeting minutes as written. Dr. Carey Eppes seconded the motion. Ms. Buck-Ragland conducted a roll call vote, and the motion passed with ten approvals, no disapprovals, and one abstention.

Agenda Item 3: Remarks from Dr. Jennifer Shuford and update to the 2019 cohort

Dr. Carla Ortique introduced Dr. Jennifer Shuford, MD, Interim DSHS Commissioner.

Highlights included:

- Dr. Shuford thanked the committee and DSHS staff for their work.
- She provided an update on the status of the DSHS Maternal Mortality and Morbidity Review Committee Biennial Report.
- The MMMRC has reviewed 140 out of the 147 cases in the 2019 Case Cohort.
- The findings and recommendations drafted earlier this year are still applicable.
- DSHS will release the DSHS Maternal Mortality and Morbidity Review Committee Biennial Report as early as next week and DSHS will plan to update the report next year after the MMMRC has completed the review and analysis for the entire 2019 cohort.
- DSHS will also continue conversations as the legislative session gets underway about possible resources or modifications that could be useful to streamline the review process.
- The MMMRC Committee will review findings and recommendations of the 2022 Biennial Report.
- Dr. Manda Hall summarized findings from the 2022 Biennial Report:
 - 141 provisionally identified cases of maternal deaths;
 - Finalized cohort size of 147 cases;
 - 118 of the provisionally identified cases had been reviewed at the time of the Biennial Report;
 - 44% of pregnancy associated deaths reviewed were determined to be pregnancy related; and
 - 90% of those deaths were determined to be preventable.
 - Six underlying causes of death accounted for 79% of all 2019 reviewed deaths:
 - obstetric hemorrhage;
 - mental health;
 - non-cerebral thrombotic embolism;
 - injury;
 - cardiovascular conditions; and
 - infection.
 - In addition, multiple underlying conditions contributed to pregnancy related deaths caused by obstetric hemorrhage, including:
 - obesity;
 - mental health;

- discrimination; and
 - substance abuse.
- Violence was also a cause of maternal death
- Racial and ethnic disparities were identified in the reviewed cases:
 - non-hispanic black women were found to be disproportionately affected.
- The enhanced maternal mortality ratio (MMR) was stable between 2013 – 2017:
 - 18.3 – 20.7 maternal deaths per 100,000 live births.
 - Between 2016 – 2020:
 - demographic and geographic disparities in severe maternal mortality/morbidity (SMM) rates related to in-hospital delivery continued to persist.
 - Overall, related to in-hospital deliveries:
 - SMM associated w/ obstetric hemorrhage decreased, and
 - SMM associated with sepsis and pre-eclampsia increased.
 - Beginning April 2020, SMM associated with Covid 19 began to appear:
 - Hispanic women were disproportionately affected.
- The Committee’s recommendations based on findings:
 - increase access to comprehensive health services before, during and for one year after pregnancy;
 - engage black communities;
 - implement statewide maternal health and safety initiatives and incorporate health equity principles;
 - increase public awareness and community engagement;
 - improve integrated behavioral health care access before, during and following pregnancy for women with mental health and substance use problems;
 - improve statewide infrastructure and programs to address violence and intimate partner violence at state and community levels;
 - foster safe and supportive community environments to help women achieve full health potential;
 - support emergency and maternal health service coordination;
 - improve post-partum care management for those with mental health and/or high-risk medical conditions;
 - prioritize continuing education and diversification of health care workforce and increase capacity of maternal health care workforce; and
 - apply continuous process improvement strategies for committee review, increasing case review capacity, quality, and recommendation development.

At this point, comments from committee members were sought.

There being none, the arrival of two more committee members to the meeting was announced:

Nakeenya Wilson, and Nancy Puig.

Committee member Wilson spoke of her experience as a woman who experienced obstetric hemorrhage with a previous pregnancy and missed opportunities for her to receive optimal

care, as well as current health problems that arose as a direct result of those lost opportunities. She also spoke against the decision made at the September MMMRC meeting to withhold data that reflected unfavorably on the agency from public release.

Members of the Texas House of Representatives provided public comment.

House of Representative Donna Howard, District 48, shared her personal experience of obstetric hemorrhage and the development of gestational diabetes with subsequent pregnancies

She spoke of the value of contributions made by the committee and the role of its findings and recommendations in the development of legislation, policies and practices aimed at saving the lives of Texas moms and improving the health of Texas women.

Representative Howard directed release of full state Biennial Report, as required by statute, without further delay.

House of Representative Shawn Thierry, District 146, spoke of her own experience as a birthing mother, whose epidural was inappropriately placed, causing cardiac complications. She acknowledged that even with Texas AIM safety bundles implemented, pregnant black women are still dying at a disproportional rate. She wants Maternal and Child Health Epidemiology to execute the inferential statistics needed to compare death rates for black mothers to all other mothers. Representative Thierry feels black mothers are being treated as a footnote in the Biennial Report. She further expressed her feeling that black mothers should be treated as the report, addressed first, not last. She also spoke of the need to address implicit bias and cultural competence in the health care workforce.

Dr. Ortique responded to Representative Thierry. She does not feel black women are treated as a footnote in the Biennial Report, however, she acknowledges that bias and discrimination play a role in healthcare outcomes.

Dr. Ramsey also responded to Representative Thierry. He expressed his frustration that data from the Biennial Report lags by three to four years and does not inform current care. He feels the Committee needs real time data to create interventions that might have an impact.

Dr. Ortique informed the Committee members that Representative Thierry supports HB 663, which would create a Maternal Morbidity and Mortality data registry.

Dr. Hill stated that he feels women on Medicaid need to be placed at the forefront for receiving maternal health care.

Ms. Wilson provided the committee with additional suggestions. She stated that Texas is the only state that has a redaction process for the medical records. She feels it wastes time and money and decreases effectiveness at committee to continue the current medical record redaction process. She revealed that in other states, including Michigan, hospitals/medical providers are required to immediately report deaths to the committee, rather than following the Texas process of having to wait for Vital Statistics to provide the committee with data. She would like the committee to have more consistent access to informant interviews. She pointed out that maternal morbidity is not being adequately considered by the committee – data is not being collected for maternal morbidity. Pregnancy related morbidity can impact the mother for the remainder of her life, so it is important to start considering morbidity, not just mortality. Ms. Wilson is in support of pending legislation that would add seats to the

committee and would prioritize committee place applications from individuals who live in rural areas and whose native language is not English. Finally, she pointed out that the overturn of Roe vs. Wade and implementation of “Heartbeat” laws are negatively impacting women’s health, particularly the health of black women.

Dr. Eppes, in response to Dr. Ramsey and Ms. Wilson, stated that committee data needs to be more timely

Dr. Ortique responded that while the committee could quantify maternal morbidity there is no funding for that activity. She also reminded committee members that there is currently no funding for a data registry.

Agenda Item 4: Texas Maternal Mortality and Morbidity Review Committee Operational and Maternal Health and Safety Initiative Updates

Dr. Carla Ortique introduced Ms. Julie Stagg MSN, RN, DSHS, Healthy Texas Mothers and Babies (HTMB) Branch Manager, to provide updates.

Highlights included:

- Ms. Stagg thanked the MMMRC members for their dedication and service to the women and families in Texas and she thanked the team at University of Texas Health Science Center for their work and ongoing partnership.
- The DSHS Maternal and Child Health Epidemiologists identified the complete death case-cohort for 2019. The final 2019 cohort size is 147 pregnancy-associated deaths.
- Yesterday, Committee met in closed session to review 24 cases:
 - They reviewed 11 2019 cases and 13 2020 cases.
- Seven final 2019 cases are to be reviewed in March 2023
- The December 2022 Biennial Maternal Health and Safety Report to the Legislature is now available on the DSHS Legislative Reports webpage.
- The 3rd Biennial TexasAIM Summit will convene this afternoon.
- The HearHer Texas campaign builds on the national HearHer campaign. Testimonials are available on the HearHer Texas website at dshs.texas.gov/HearHerTX.

Dr. Ortique sought questions/comments from the committee members. Seeing none, she proceeded to Agenda Item #5.

Agenda Item 5: Texas Maternal Mortality and Morbidity Review Committee Subcommittee updates

Dr. Carla Ortique and Dr. Patrick Ramsey provided subcommittees update.

Highlights included:

Dr. Ortique stated that in 2018 the legislature updated committee’s charge. They were to do more for most at-risk patients. This resulted in the formation of the Subcommittee on Maternal Health Disparities.

The Subcommittee met last week. There was a consensual acknowledgement that race in and of itself has an impact on maternal morbidity and mortality. A national level “Discrimination Checkbox” has now been added to the MMMRC review forms. However, the Checkbox lacks standardized instructions for use. A pilot project was instituted to discover

the most effective way to use the Checkbox, however, the Covid pandemic and staff shortages have delayed data analytics for the pilot project. More funding is needed for data analysis. Dr. Ortique would like to see bias and discrimination training in medical schools. Last week was Dr. Ortique's last meeting as the Subcommittee on Maternal Health Disparities chair – she is retiring role. Sherri Onyiego will be taking over as the new Subcommittee chair.

Dr. Ortique also provided an update on Bills impacting maternal health and/or the MMMRC which are being considered this legislative session:

- reimbursement for MMMRC member travel expenses;
- additional reimbursement for redaction services;
- process to streamline the attainment of records;
 - hospitals reporting data directly to the committee, being one idea, and
- Pay parity – Medicaid versus private insurance.
 - An extension of Medicaid is being considered, however, there are not enough doctors to see Medicaid patients because there is not enough funding for Medicaid reimbursement. There has been no increase in reimbursement levels for past 10 years.

Dr. Ramsey provided a summary of the COVID-19 Subcommittee activities.

The COVID-19 Subcommittee was created with the goal of developing processes and guidelines for the MMMRC, to put the lens of COVID-19 on every maternal death reviewed, starting with 2020, to adequately determine the impact of COVID-19 on maternal death.

Carey Eppes will serve as chair of subcommittee

Echoing Dr. Hall, Dr. Ramsey reiterated that beginning in April 2020, SMM associated with COVID-19 began to appear and that Hispanic women were disproportionately affected.

Some obvious variables affecting SMM include:

- vaccine availability;
- vaccine hesitancy;
- available therapies;
- evolution of knowledge of adverse outcomes for maternal patients, and
- viral variants.

Some not so obvious variables include:

- healthcare staffing issues;
- decrease in in-person prenatal visits;
- access to medical care in general; and
- decreased ability of support advocates to be in the labor and delivery suite due to restricted access in hospitals.

Dr. Ortique sought questions/comments for Dr. Ramsey.

Seeing none – she opened the floor for discussion of future agenda items

Agenda Item 6: Future Agenda Items

Dr. Ortique opened discussion for new business and potential agenda items for the next meeting scheduled for March 3, 2023. Hearing no items, Dr. Ortique proceeded to the next agenda item.

Agenda Item 7: Public Comment

Seven (7) written public comments were received, those letters were shared with members prior to the meeting. Four individuals pre-registered to provide oral comments, three virtually and one appeared in person to give oral comment. Oral comments were received from Ms. Patricia A. Major, who spoke on behalf of the East Dallas Persistent Women, Ms. Diana Forester, Texans Care for Children, Dr. Anjanette Wyatt, Clinical Care Pharmacy and Ms. Uduak Nkanga, AFIYA Center who joined onsite addressed the committee. Additional public comments onsite were from: Anice Greiner, East Dallas Persistent Women; Krystal Brown, Co-President for Midwives of Color for Central Texas, Owner of Lovers Lane Birth Center; Jasmine Farrish, Co-President of the Texas Midwife Color Committee; Dinah Waranch, East Dallas Persistent Women, Consortium of Texas Certified Nurse Midwives, Founder of Lovers Lane Birth Center; Erin Boldt, RN, Consortium of Texas Certified Nurse Midwives; and Jackie Griggs, Coalition of Texas Birth Centers

Agenda Item 8: Adjournment

Dr. Ortique reminded members that the next meeting would be on March 03, 2023, provided closing remarks, thanked members and the public and adjourned at 11:00 a.m.

Below is the link to the archived video of the December 09, 2022, Texas Maternal Mortality and Morbidity Review Committee (MMMRC) that will be available for viewing approximately two years from date meeting was posted on website and based on the DSHS records retention schedule.

[Texas Maternal Mortality and Morbidity Review Committee \(MMMRC\)](#)