



Senate Fiscal Agency
P. O. Box 30036
Lansing, Michigan 48909-7536

BILL



ANALYSIS

Telephone: (517) 373-5383
Fax: (517) 373-1986

House Bill 4235 (Substitute H-2 as passed by the House)
Sponsor: Representative George T. Darany
House Committee: Health Policy
Senate Committee: Health Policy

Date Completed: 11-29-16

CONTENT

The bill would amend the Public Health Code to require a physician or an individual in charge of a health facility who was present for or was aware of a maternal death to submit information regarding the death at the time and in the manner specified or approved by the Department of Health and Human Services for inclusion in the Department's comprehensive health information system.

The bill would define "maternal death" as the death of a woman who was pregnant at the time of or within one year before her death. "Physician" would mean an individual who is licensed or otherwise authorized to engage in the practice of medicine or the practice of osteopathic medicine and surgery under the Code. "Health facility" would mean a hospital, freestanding surgical outpatient facility, or other outpatient facility that is licensed or otherwise authorized to operate in Michigan under the Code.

(The health information system provides for the collection, compilation, coordination, analysis, indexing, dissemination, and use of both purposefully collected and extant health-related data and statistics, including the training of producers and users of the data and statistics in a manner involving the collaboration at the policy and technical levels of major state and local health operational, planning, professional, and university groups and agencies that require the data in their work.)

The bill would take effect 90 days after enactment.

Proposed MCL 333.2617a

Legislative Analyst: Julie Cassidy

FISCAL IMPACT

The bill would have a minimal negative fiscal impact on the Department of Health and Human Services (DHHS), and no fiscal impact on local units of government. Currently, the Department gathers data regarding maternal death for the Michigan Maternal Mortality Surveillance, although the data are submitted on a voluntary basis. By making data reporting mandatory, the bill could increase the amount of data received by the DHHS, possibly resulting in a minimal increase in costs to the Department.

Fiscal Analyst: Ellyn Ackerman

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.