

TEXAS DEPARTMENT OF STATE HEALTH SERVICES

P.O. Box 149347 Austin, Texas 78714-9347 1-888-963-7111 TTY: 1-800-735-2989 www.dshs.state.tx.us

JOHN HELLERSTEDT, M.D. COMMISSIONER

| Dear | |
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The Department of State Health Services (DSHS), on behalf of the Texas Maternal Mortality and Morbidity Task Force requests records of the decedent identified below. Records are requested for the purpose of collecting information on maternal deaths in order to identify prevention, risk reduction, and system improvement factors to inform state quality improvement efforts. A maternal death includes any death of a woman residing in Texas who, at the time of death, was pregnant or whose pregnancy ended within 12 months of her death, regardless of the cause.

Pursuant to the legal authority of Texas Health and Safety Code §§ 34.008, DSHS is given the broad authority to obtain access to health and medical records and other information relevant to selected cases of pregnancy-related deaths and severe morbidity. DSHS staff, under this statute and the guidance of DSHS, is authorized to request and obtain medical and other records for this purpose without the authorization of the patient or the patient's family. Strict confidentiality and privacy for decedents, decedent families, and health care providers is ensured.

Please provide the following documentation:

Autopsy report (including toxicology report and any additional consultant reports) and Medical Examiner investigation report (if applicable)

For the following decedent:

Name:

DOB:

DOD:

Medical Examiner certification date:

So that the review of this information may be conducted in a timely manner, <u>please respond to this request within 14 calendar days.</u>

If you have any questions, please contact Sonia Baeva at (512) 776-3022. Sincerely,

Sonia Baeva Epidemiologist Office of Program Decision Support Family and Community Health Services Department of State Health Services

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Name of the Addressee DATE Page 2

Background:

The Maternal Mortality and Morbidity Task Force (Task Force) was established by DSHS in December 2013 in accordance with Texas Health and Safety Code Chapter 34 (HSC. 34) as created by Senate Bill 495 83(R). The Task Force, a 15-member multidisciplinary panel of experts appointed by the DSHS Commissioner, studies cases of pregnancy-related deaths as well as trends in severe maternal morbidity and makes recommendations to help reduce the incidence of pregnancy-related deaths and severe maternal morbidity in Texas.

The Task Force reviews the medical and psychosocial factors associated with maternal deaths occurring within one year of a birth or fetal death. Information is gathered from vital records, medical and clinic records, hospital data, autopsy, coroner and medical examiner reports, and other pertinent records. Records are abstracted at DSHS by clinical and epidemiology subject matter experts following standardized protocols. The information is stripped of identifying information of a patient, hospital, or health care provider. Information is then synthesized into de-identified case summaries for review by the Task Force. All members have signed a confidentiality agreement to not discuss or disclose information gathered through review.

Information pertaining to a pregnancy-related death or severe maternal morbidity that can be connected with any specific individual, case, or health care provider will be strictly confidential and will not be reported. Only aggregate recommendations compiled after review of all cases for a full calendar year will be provided in a biennial report. No information about individual case recommendations will be sent back to either health care providers or facilities. All protocols comply with the Health Insurance Portability and Accountability Act (HIPPA) Privacy Rule and state medical privacy statutes.

The Department of State Health Services is a covered entity and public health authority as delineated in HIPAA. Federal law allows a covered entity to disclose protected health information without individual authorization as required by law 1) to a public health authority for public health activities authorized by law and 2) to a health oversight agency for oversight activities authorized by law [45 CFR Section 164.512 (a), (b) and (d)].