

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

# Fax

То:	[Recipient Name]		From:	[Your Name	e]	
Fax:	[fax number]		Pages:	[number of	pages]	
Phone:	[phone number]		Date:	[Click to select date]		
Re:	Medical records Maternal Mortalit Task Force	•	cc:	[Name]		
✓ Urgent	☐ For Review	☐ Please Commen	t 🗆 PI	ease Reply	☐ Please Recycle	

URGENT—PRIORITY PROJECT OF THE TEXAS DEPARTMENT OF STATE HEALTH SERVICES

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DATE: Click here to enter a date.

TO:

RE: Request for Medical Record for Maternal Mortality Review

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.

Based on death certificate and hospital discharge data, the following case is subject to this review.

Name:

DOB:

Date of delivery:

Please provide all medical records for this individual. MARK PACKAGE CONFIDENTIAL.

## <u>COMPLETE RECORDS FOR ALL VISITS, including but not limited to the following records</u> as applicable:

- Client identification and personal data
- Eligibility screening
- Rights and Responsibilities
- Copy of Medicaid and/or CHIP denial letter, if applicable
- Patient contact information
- Medical history and risk assessment
- Physical assessment
- Laboratory and other diagnostic tests
- Plan of care, including education/counseling, treatment, special instructions, scheduled revisits and referral notes

- Documentation regarding follow-up of missed appointments
- Informed consent documentation
- Refusal of services documentation when applicable
- Medication and other allergic reactions
- Problem list
- Client education
- Consultation notes



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So that the review of this information may be conducted in a timely manner, <u>please respond</u> to this request within 14 calendar days. If electronic copies of records are available, please send in a CD or DVD, in a common file format such as .pdf, to:

Sonia Baeva
Office of Program Decision Support
Division for Family and Community Health Services
Texas Department of State Health Services
Mail Code 1642
PO Box 149347
1100 W. 49<sup>th</sup> Street
Austin, Texas 78714-9347

Please send via secured carrier and marked CONFIDENTIAL.

You may contact Sonia Baeva at <u>Sonia.Baeva@dshs.state.tx.us</u> or 512-776-3022 to request a FedEx Airbill be emailed to you.

If only paper records are available, please send to the address above.

#### **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, fetal death, or miscarriage. 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 by clinical and epidemiology subject matter experts following standardized protocols at DSHS. The abstracted information is stripped of all information that could identify a patient, hospital, or health care provider. Information is then synthesized into de-identified case summaries for review by the Task Force. All Task Force members and involved DSHS staff have signed a confidentiality agreement to not discuss or disclose information gathered through review.



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Information that may be connected with any specific individual, case, or health care provider will be strictly confidential and will not be included in reports. Only aggregate data and recommendations compiled after review of all cases in a full calendar year will be provided in a biennial report. No information about individual case recommendations will be provided to either health care providers or facilities. All protocols comply with the Health Insurance Portability and Accountability Act (HIPAA) 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)].

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

Sincerely,

Sonia Baeva, M.A. Epidemiologist Office of Program Decision Support Family and Community Health Services Department of State Health Services