PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type.~~

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~*this style type*~~ reconciles conflicts between statutes enacted by the 2017 Regular Session of the General Assembly.

SENATE ENROLLED ACT No. 142

AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 16-18-2-218.3 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: **Sec. 218.3. "Maternal morbidity", for purposes of IC 16-50, has the meaning set forth in IC 16-50-1-1.**

SECTION 2. IC 16-18-2-218.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: **Sec. 218.5. "Maternal mortality", for purposes of IC 16-50, has the meaning set forth in IC 16-50-1-2.**

SECTION 3. IC 16-50 IS ADDED TO THE INDIANA CODE AS A **NEW** ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]:

ARTICLE 50. MATERNAL MORTALITY REVIEW

Chapter 1. Statewide Maternal Mortality Review Committee

Sec. 1. As used in this article, "maternal morbidity" refers to any health condition occurring to an individual in Indiana that is attributable to or aggravated by pregnancy and childbirth.

Sec. 2. As used in this article, "maternal mortality" refers to death, occurring in Indiana, of an individual during pregnancy through up to one (1) year after pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or management of the pregnancy.

Sec. 3. (a) The state department shall establish a statewide

maternal mortality review committee to:

(1) review cases of maternal morbidity and maternal mortality;

(2) determine factors contributing to maternal morbidity and maternal mortality;

(3) identify public health and clinical interventions to improve systems of care and enhance coordination; and

(4) develop strategies for the prevention of maternal morbidity and maternal mortality;

in Indiana.

(b) The statewide mortality review committee:

(1) shall review cases of maternal mortality; and

(2) may review cases of maternal morbidity.

Sec. 4. (a) The state health commissioner or the commissioner's designee shall appoint members to the statewide maternal mortality review committee.

(b) The membership of the statewide maternal mortality review committee must be multidisciplinary, be culturally diverse, and include the following:

(1) One (1) representative from each of the following:

(A) The state department.

(B) The office of the secretary of family and social services.

(C) The Indiana Hospital Association.

(2) Two (2) representatives of a local health department, each representing a different regional area and population size.

(3) Two (2) representatives of community based organizations that focus on maternal health and well-being.

(4) One (1) epidemiologist.

(5) One (1) representative from each of the following areas who provides services or community resources to families, with expertise and knowledge in the area:

(A) Obstetrics.

(B) Maternal-fetal medicine.

(C) Family medicine.

(D) Social work.

(E) Pathology.

(F) Public health nursing.

(G) Midwifery.

(H) Anesthesiology.

(I) Mental health.

(c) The state health commissioner shall designate a member of the statewide maternal mortality review committee as the

chairperson.

(d) The statewide maternal mortality review committee shall meet at the call of the chairperson. Except as provided in subsection (e), statewide maternal mortality review committee meetings are open to the public.

(e) Statewide maternal mortality review committee meetings that involve confidential records or identifying information regarding a maternal death or maternal morbidity that is confidential under state or federal law must be held as an executive session and are not open to the public.

Sec. 5. A member of the statewide maternal mortality review committee shall:

(1) sign a confidentiality form prepared by the statewide maternal mortality review coordinator under IC 16-50-2-3;

(2) review the purpose and goals of the statewide maternal mortality review committee; and

(3) review the data collection form developed by the statewide maternal mortality review coordinator under IC 16-50-2-2.

Sec. 6. (a) If a health care provider or a health care facility has a patient who suffers a maternal mortality and the health care provider or health care facility has knowledge of the circumstances of the maternal mortality, the health care provider or the health care facility shall report the maternal mortality to the statewide maternal mortality review committee in the manner established by the statewide maternal mortality review coordinator under IC 16-50-2-4.

(b) The state department may provide data held by the state department, including:

(1) vital statistics;

(2) trauma data; and

(3) hospital discharge data;

to the statewide maternal mortality review coordinator to aid in the identification of cases of maternal morbidity and maternal mortality.

Sec. 7. (a) The statewide maternal mortality review committee shall review all cases of maternal mortality reported to the statewide maternal mortality review committee.

(b) The statewide maternal mortality review committee may do any of the following concerning each maternal mortality case reported to the statewide maternal mortality review committee:

(1) Review medical records and other relevant data as set forth in section 8(a) of this chapter.

(2) Contact family members and other affected or involved persons to collect data.

(3) Consult with relevant experts to evaluate the records and data described in subdivisions (1) and (2).

(4) Make determinations regarding the factors contributing to maternal morbidities and maternal mortalities and the preventability of maternal morbidities and maternal mortalities.

(5) Identify, if applicable, public health and clinical health interventions to improve systems of care and enhance coordination.

(6) Develop recommendations for the prevention of maternal morbidities and maternal mortalities.

(7) Disseminate findings and recommendations as required under this chapter.

(c) The statewide maternal mortality review committee's findings for each case must be maintained in a data collection form developed by the statewide maternal mortality review coordinator under IC 16-50-2-2.

Sec. 8. (a) In conducting a review under this chapter, the statewide maternal mortality review committee shall review all applicable records and information related to the death, including the following:

(1) Records held by the local or state health departments, including the death certificate.

(2) Medical records submitted by the health care provider or health care facility.

(3) Law enforcement records.

(4) Coroner records, including an autopsy report.

(5) Mental health records.

(6) Emergency medical services reports.

(7) Subject to IC 31-33-18-2, records held by the department of child services.

(8) To the extent allowable under state and federal law, other records held by the state department.

(b) The following shall provide to the statewide maternal mortality review committee, in good faith, access to records concerning a case under review under this chapter:

(1) A health care provider.

(2) A health care facility.

(3) An individual.

(4) An entity.

(c) A person described in subsection (b) that provides access to records in good faith under this section is not subject to liability in:

(1) a civil;

(2) an administrative;

(3) a disciplinary; or

(4) a criminal;

action that might otherwise be imposed as a result of the disclosure.

(d) Except as otherwise provided under this chapter, information and records acquired and interviews conducted by the statewide maternal mortality review committee in the exercise of the committee's duties under this chapter are confidential and exempted from disclosure.

(e) Records, information, documents, and reports acquired or produced by the statewide maternal mortality review committee are not:

(1) subject to subpoena or discovery; or

(2) admissible as evidence;

in any judicial or administrative proceeding. Information that is otherwise discoverable or admissible from original sources is not immune from discovery or use in any proceeding merely because the information was presented during proceedings before the statewide maternal mortality review committee.

(f) The statewide maternal mortality review committee members and individuals who attend a statewide maternal mortality review committee meeting at the invitation of the chairperson shall maintain the confidentiality of records and information discussed and disseminated during the statewide maternal mortality review committee meeting.

Sec. 9. (a) The statewide maternal mortality review committee shall, before July 1 of each year, submit a report to the state department that includes the following information:

(1) A summary of the data collected regarding the reviews conducted by the statewide maternal mortality review committee.

(2) Actions recommended by the statewide maternal mortality review committee to improve systems of care and enhance coordination to reduce maternal morbidity and maternal mortality in Indiana.

(3) Legislative recommendations for consideration by the general assembly.

(b) A report released under this section must not contain

identifying information relating to the deaths reviewed by the statewide maternal mortality review committee.

(c) The state department shall make a report prepared under this section available to public inspection and post the report on the state department's Internet web site.

Sec. 10. (a) The statewide maternal mortality review committee members and individuals who attend a statewide maternal mortality review committee meeting at the invitation of the chairperson:

(1) may discuss among themselves confidential matters that are before the statewide maternal mortality review committee; and

(2) are, except when acting:

(A) with malice;

(B) in bad faith; or

(C) with negligence;

immune from any civil or criminal liability that might otherwise be imposed as a result of sharing among themselves those matters.

(b) The discussions, determinations, conclusions, and recommendations of the statewide maternal mortality review committee or its members concerning a review of a fatality at a statewide maternal mortality review committee meeting:

(1) are privileged; and

(2) are not:

(A) subject to subpoena or discovery; or

(B) admissible as evidence;

in any judicial or administrative proceeding.

Sec. 11. Nothing in this chapter shall preclude any death, illness, or injury investigation or review to the extent authorized by other laws.

Sec. 12. This article expires June 30, 2023.

Chapter 2. Statewide Maternal Mortality Review Coordinator

Sec. 1. The state department shall employ a statewide maternal mortality review coordinator to support the statewide maternal mortality review committee.

Sec. 2. The statewide maternal mortality review coordinator shall develop a data collection form that includes:

(1) identifying and nonidentifying information;

(2) information regarding the circumstances surrounding a maternal morbidity or maternal mortality;

(3) factors contributing to a maternal morbidity or maternal

mortality; and

(4) findings and recommendations that include the following information:

(A) Whether similar future maternal morbidities or maternal mortalities could be prevented.

(B) A list of:

(i) agencies and entities that should be involved; and

(ii) any other resources that should be used;

to prevent future maternal morbidities and maternal mortalities in Indiana.

Sec. 3. (a) The statewide maternal mortality review coordinator shall develop a confidentiality form for use by the statewide maternal mortality review committee and any individuals who are invited by the chairperson to attend a meeting of the statewide maternal mortality review committee.

(b) Any individual who is invited by the chairperson to attend a meeting of the statewide maternal mortality review committee shall sign the confidentiality form described in subsection (a) in order to attend the meeting.

Sec. 4. The statewide maternal mortality review coordinator shall establish a process for a person to report a maternal morbidity and maternal mortality to the statewide maternal mortality review committee.

SECTION 4. IC 31-33-18-2, AS AMENDED BY P.L.258-2017, SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 2. The reports and other material described in section 1(a) of this chapter and the unredacted reports and other material described in section 1(b) of this chapter shall be made available only to the following:

(1) Persons authorized by this article.

(2) A legally mandated public or private child protective agency investigating a report of child abuse or neglect or treating a child or family that is the subject of a report or record.

(3) Any of the following who are investigating a report of a child who may be a victim of child abuse or neglect:

(A) A police officer or other law enforcement agency.

(B) A prosecuting attorney.

(C) A coroner, in the case of the death of a child.

(4) A physician who has before the physician a child whom the physician reasonably suspects may be a victim of child abuse or neglect.

(5) An individual legally authorized to place a child in protective

custody if:

(A) the individual has before the individual a child whom the individual reasonably suspects may be a victim of abuse or neglect; and

(B) the individual requires the information in the report or record to determine whether to place the child in protective custody.

(6) An agency having the legal responsibility or authorization to care for, treat, or supervise a child who is the subject of a report or record or a parent, guardian, custodian, or other person who is responsible for the child's welfare.

(7) An individual named in the report or record who is alleged to be abused or neglected or, if the individual named in the report is a child or is otherwise incompetent, the individual's guardian ad litem or the individual's court appointed special advocate, or both.

(8) Each parent, guardian, custodian, or other person responsible for the welfare of a child named in a report or record and an attorney of the person described under this subdivision, with protection for the identity of reporters and other appropriate individuals.

(9) A court, for redaction of the record in accordance with section 1.5 of this chapter, or upon the court's finding that access to the records may be necessary for determination of an issue before the court. However, except for disclosure of a redacted record in accordance with section 1.5 of this chapter, access is limited to in camera inspection unless the court determines that public disclosure of the information contained in the records is necessary for the resolution of an issue then pending before the court.

(10) A grand jury upon the grand jury's determination that access to the records is necessary in the conduct of the grand jury's official business.

(11) An appropriate state or local official responsible for child protection services or legislation carrying out the official's official functions.

(12) The community child protection team appointed under IC 31-33-3 (or IC 31-6-11-14 before its repeal), upon request, to enable the team to carry out the team's purpose under IC 31-33-3.

(13) A person about whom a report has been made, with protection for the identity of:

(A) any person reporting known or suspected child abuse or neglect; and

(B) any other person if the person or agency making the

information available finds that disclosure of the information would be likely to endanger the life or safety of the person.

(14) An employee of the department, a caseworker, or a juvenile probation officer conducting a criminal history check under IC 31-26-5, IC 31-34, or IC 31-37 to determine the appropriateness of an out-of-home placement for a:

(A) child at imminent risk of placement;

(B) child in need of services; or

(C) delinquent child.

The results of a criminal history check conducted under this subdivision must be disclosed to a court determining the placement of a child described in clauses (A) through (C).

(15) A local child fatality review team established under IC 16-49-2.

(16) The statewide child fatality review committee established by IC 16-49-4.

(17) The department.

(18) The division of family resources, if the investigation report:

(A) is classified as substantiated; and

(B) concerns:

(i) an applicant for a license to operate;

(ii) a person licensed to operate;

(iii) an employee of; or

(iv) a volunteer providing services at;

a child care center licensed under IC 12-17.2-4 or a child care home licensed under IC 12-17.2-5.

(19) A citizen review panel established under IC 31-25-2-20.4.

(20) The department of child services ombudsman established by IC 4-13-19-3.

(21) The state superintendent of public instruction with protection for the identity of:

(A) any person reporting known or suspected child abuse or neglect; and

(B) any other person if the person or agency making the information available finds that disclosure of the information would be likely to endanger the life or safety of the person.

(22) The state child fatality review coordinator employed by the state department of health under IC 16-49-5-1.

(23) A person who operates a child caring institution, group home, or secure private facility if all the following apply:

(A) The child caring institution, group home, or secure private facility is licensed under IC 31-27.

(B) The report or other materials concern:

(i) an employee of;

(ii) a volunteer providing services at; or

(iii) a child placed at;

the child caring institution, group home, or secure private facility.

(C) The allegation in the report occurred at the child caring institution, group home, or secure private facility.

(24) A person who operates a child placing agency if all the following apply:

(A) The child placing agency is licensed under IC 31-27.

(B) The report or other materials concern:

(i) a child placed in a foster home licensed by the child placing agency;

(ii) a person licensed by the child placing agency to operate a foster family home;

(iii) an employee of the child placing agency or a foster family home licensed by the child placing agency; or

(iv) a volunteer providing services at the child placing agency or a foster family home licensed by the child placing agency.

(C) The allegations in the report occurred in the foster family home or in the course of employment or volunteering at the child placing agency or foster family home.

(25) The National Center for Missing and Exploited Children.

(26) A local domestic violence fatality review team established under IC 12-18-8, as determined by the department to be relevant to the death or near fatality that the local domestic violence fatality review team is reviewing.

(27) The statewide domestic violence fatality review committee established under IC 12-18-9-3, as determined by the department to be relevant to the death or near fatality that the statewide domestic violence fatality review committee is reviewing.

(28) The statewide maternal mortality review committee established under IC 16-50-1-3, as determined by the department to be relevant to the case of maternal morbidity or maternal mortality that the statewide maternal mortality review committee is reviewing.

SECTION 5. IC 34-30-2-84.4, AS ADDED BY P.L.119-2013, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 84.4. **(a)** IC 16-49-4-5 (Concerning hospitals, physicians, coroners, law enforcement officers, and mental health

providers who provide certain records to the statewide child fatality review committee).

(b) IC 16-49-4-10 (Concerning a member of the statewide child fatality review committee or an individual who attends a meeting of the statewide child fatality review committee as an invitee of the chairperson).

SECTION 6. IC 34-30-2-84.6, AS ADDED BY P.L.119-2013, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 84.6. ~~IC 16-49-4-10 (Concerning a member of the statewide child fatality review committee or an individual who attends a meeting of the statewide child fatality review committee as an invitee of the chairperson).~~ **(a) IC 16-50-1-8 (Concerning a health care provider, health care facility, individual, or entity that provides certain records to the statewide maternal mortality review committee).**

(b) IC 16-50-1-10 (Concerning discussion of confidential matters by a member of the statewide maternal mortality review committee or an individual who attends a meeting of the statewide maternal mortality review committee by invitation of the chairperson).

SECTION 7. IC 34-46-2-11.7 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: **Sec. 11.7. IC 16-50-1-10 (Concerning discussions, determinations, conclusions, and recommendations of the statewide maternal mortality review committee).**

SECTION 8. IC 36-2-14-18, AS AMENDED BY P.L.160-2017, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 18. (a) Notwithstanding IC 5-14-3-4(b)(1), when a coroner investigates a death, the office of the coroner is required to make available for public inspection and copying the following:

(1) The name, age, address, sex, and race of the deceased.

(2) The address where the dead body was found, or if there is no address the location where the dead body was found and, if different, the address where the death occurred, or if there is no address the location where the death occurred.

(3) The name of the agency to which the death was reported and the name of the person reporting the death.

(4) The name of any public official or governmental employee present at the scene of the death and the name of the person certifying or pronouncing the death.

(5) Information regarding an autopsy (requested or performed) limited to the date, the person who performed the autopsy, where the autopsy was performed, and a conclusion as to:

(A) the probable cause of death;

(B) the probable manner of death; and

(C) the probable mechanism of death.

(6) The location to which the body was removed, the person determining the location to which the body was removed, and the authority under which the decision to remove the body was made.

(7) The records required to be filed by a coroner under section 6 of this chapter and the verdict and the written report required under section 10 of this chapter.

(b) A county coroner or a coroner's deputy who receives an investigatory record from a law enforcement agency shall treat the investigatory record with the same confidentiality as the law enforcement agency would treat the investigatory record.

(c) Notwithstanding any other provision of this section, a coroner shall make available a full copy of an autopsy report, other than a photograph, a video recording, or an audio recording of the autopsy, upon the written request of a parent of the decedent, an adult child of the decedent, a next of kin of the decedent, or an insurance company investigating a claim arising from the death of the individual upon whom the autopsy was performed. A parent of the decedent, an adult child of the decedent, a next of kin of the decedent, and an insurance company are prohibited from publicly disclosing any information contained in the report beyond that information that may otherwise be disclosed by a coroner under this section. This prohibition does not apply to information disclosed in communications in conjunction with the investigation, settlement, or payment of the claim.

(d) Notwithstanding any other provision of this section, a coroner shall make available a full copy of an autopsy report, other than a photograph, a video recording, or an audio recording of the autopsy, upon the written request of:

(1) the director of the division of disability and rehabilitative services established by IC 12-9-1-1;

(2) the director of the division of mental health and addiction established by IC 12-21-1-1; or

(3) the director of the division of aging established by IC 12-9.1-1-1;

in connection with a division's review of the circumstances surrounding the death of an individual who received services from a division or through a division at the time of the individual's death.

(e) Notwithstanding any other provision of this section, a coroner shall make available, upon written request, a full copy of an autopsy report, including a photograph, a video recording, or an audio recording

of the autopsy, to:

(1) the department of child services established by IC 31-25-1-1, including an office of the department located in the county where the death occurred;

(2) the statewide child fatality review committee established by IC 16-49-4; or

(3) a county child fatality review team or regional child fatality review team established under IC 16-49-2 for the area where the death occurred;

for purposes of an entity described in subdivisions (1) through (3) conducting a review or an investigation of the circumstances surrounding the death of a child (as defined in IC 16-49-1-2) and making a determination as to whether the death of the child was a result of abuse, abandonment, or neglect. An autopsy report made available under this subsection is confidential and shall not be disclosed to another individual or agency, unless otherwise authorized or required by law.

(f) Notwithstanding any other provision of this section, a coroner shall make available, upon written request, a full copy of an autopsy report, including a photograph, a video recording, or an audio recording of the autopsy, to the statewide maternity mortality review committee established under IC 16-50-1.

~~(f)~~ **(g)** Notwithstanding any other provision of this section, and except as otherwise provided in this subsection, a coroner may make available, upon written request, a full copy of an autopsy report to the peer review committee (as defined in IC 34-6-2-99) of a hospital at which the decedent was treated immediately before death for purposes of the hospital's peer review activities. An autopsy report made available under this subsection:

(1) may not include:

(A) a photograph;

(B) a video recording; or

(C) an audio recording;

of the autopsy; and

(2) is confidential and may not be disclosed to another individual or agency, unless otherwise authorized or required by law.

However, if immediately making available an autopsy report under this subsection will interfere with the coroner's investigation or other legal proceedings related to the decedent's death, the coroner may delay making available the requested autopsy related information until the investigation or other legal proceedings are concluded.

~~(g)~~ **(h)** Except as provided in subsection ~~(h),~~ **(i),** the information

required to be available under subsection (a) must be completed not later than fourteen (14) days after the completion of:

(1) the autopsy report; or

(2) if applicable, any other report, including a toxicology report, requested by the coroner as part of the coroner's investigation;

whichever is completed last.

~~(h)~~ **(i)** The prosecuting attorney may petition a circuit or superior court for an order prohibiting the coroner from publicly disclosing the information required in subsection (a). The prosecuting attorney shall serve a copy of the petition on the coroner.

~~(i)~~ **(j)** Upon receipt of a copy of the petition described in subsection ~~(h),~~ **(i),** the coroner shall keep the information confidential until the court rules on the petition.

~~(j)~~ **(k)** The court shall grant a petition filed under subsection ~~(h)~~ **(i)** if the prosecuting attorney proves by a preponderance of the evidence that public access or dissemination of the information specified in subsection (a) would create a significant risk of harm to the criminal investigation of the death. The court shall state in the order the reasons for granting or denying the petition. An order issued under this subsection must use the least restrictive means and duration possible when restricting access to the information. Information to which access is restricted under this subsection is confidential.

~~(k)~~ **(l)** Any person may petition the court to modify or terminate an order issued under subsection ~~(j).~~ **(k).** The petition for modification or termination must allege facts demonstrating that:

(1) the public interest will be served by allowing access; and

(2) access to the information specified in subsection (a) would not create a significant risk to the criminal investigation of the death.

The person petitioning the court for modification or termination shall serve a copy of the petition on the prosecuting attorney and the coroner.

~~(l)~~ **(m)** Upon receipt of a petition for modification or termination filed under subsection ~~(k),~~ **(l),** the court may:

(1) summarily grant, modify, or dismiss the petition; or

(2) set the matter for hearing.

If the court sets the matter for hearing, upon the motion of any party or upon the court's own motion, the court may close the hearing to the public.

~~(m)~~ **(n)** If the person filing the petition for modification or termination proves by a preponderance of the evidence that:

(1) the public interest will be served by allowing access; and

(2) access to the information specified in subsection (a) would not create a significant risk to the criminal investigation of the death;

the court shall modify or terminate its order restricting access to the information. In ruling on a request under this subsection, the court shall state the court's reasons for granting or denying the request.

President of the Senate

President Pro Tempore

Speaker of the House of Representatives

Governor of the State of Indiana

Date: _____ Time: _____

SEA 142 — Concur