

SENATE BILL NO. 818

April 10, 2024, Introduced by Senators GEISS, SANTANA, ANTHONY, CHANG, CAVANAGH, WOJNO, SHINK, MOSS, BAYER and CAMILLERI and referred to the Committee on Housing and Human Services.

A bill to amend 1978 PA 368, entitled "Public health code," by amending sections 2227, 2617, 2617a, and 2618 (MCL 333.2227, 333.2617, 333.2617a, and 333.2618), section 2227 as added by 2006 PA 653 and section 2617a as added by 2016 PA 479, and by adding section 2617b.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 2227. The department shall do all of the following:
- 2 (a) Develop and implement a structure to address racial and

1 ethnic health disparities in this state.

2 (b) Monitor minority health progress.

3 (c) Establish minority health policy.

4 (d) Develop and implement an effective statewide strategic
5 plan for the reduction of racial and ethnic health disparities **and**
6 **inequities.**

7 (e) Utilize federal, state, and private resources, as
8 available and within the limits of appropriations, to fund minority
9 health programs, research, and other initiatives.

10 (f) Provide the following through interdepartmental
11 coordination:

12 (i) Data and technical assistance to minority health coalitions
13 and any other local entities addressing the elimination of racial
14 and ethnic health disparities.

15 (ii) Measurable objectives to minority health coalitions and
16 any other local health entities for the development of
17 interventions that address the elimination of racial and ethnic
18 health disparities.

19 (g) Establish a ~~web page~~ **webpage** on the department's website,
20 in coordination with the state ~~health disparities reduction and~~
21 ~~minority health section,~~ **office of equity and minority health**, that
22 provides information or links to all of the following:

23 (i) Research within minority populations.

24 (ii) A resource directory that can be distributed to local
25 organizations interested in minority health.

26 (iii) Racial and ethnic specific data including, but not limited
27 to, morbidity and mortality.

28 (iv) **Published studies and reports on biased or unjust**
29 **perinatal care, including, but not limited to, studies or reports**

1 on instances of obstetric racism and obstetric violence predicated
2 on the Patient-Reported Experience Measure of Obstetric Racism
3 Scale or a similar tool.

4 (h) Develop and implement recruitment and retention strategies
5 to increase the number of minorities in the health and social
6 services professions.

7 (i) Develop and implement awareness strategies targeted at
8 health and social service providers in an effort to eliminate the
9 occurrence of racial and ethnic health disparities.

10 (j) Identify and assist in the implementation of culturally
11 and linguistically appropriate health promotion and disease
12 prevention programs that would emphasize prevention and incorporate
13 an accessible, affordable, and acceptable early detection and
14 intervention component.

15 (k) Promote the development and networking of minority health
16 coalitions.

17 (l) Appoint a department liaison to provide the following
18 services to local minority health coalitions:

19 (i) Assist in the development of local prevention and
20 intervention plans.

21 (ii) Relay the concerns of local minority health coalitions to
22 the department.

23 (iii) Assist in coordinating minority input on state health
24 policies and programs.

25 (iv) Serve as the link between the department and local efforts
26 to eliminate racial and ethnic health disparities.

27 (m) Provide funding, within the limits of appropriations, to
28 support evidence-based preventative health, education, and
29 treatment programs that include outcome measures and evaluation

1 plans in minority communities.

2 (n) Provide technical assistance to local communities to
3 obtain funding for the development and implementation of a health
4 care delivery system to meet the needs, gaps, and barriers
5 identified in the statewide strategic plan for eliminating racial
6 and ethnic health disparities.

7 (~~o) One year after the effective date of this section~~
8 **Beginning January 9, 2007**, and each year thereafter, submit a
9 written report on the status, impact, and effectiveness of ~~the~~
10 ~~amendatory act that added this section~~ **2006 PA 653** to the standing
11 committees in the senate and house of representatives with
12 jurisdiction over issues pertaining to public health, the senate
13 and house of representatives appropriations subcommittees on
14 ~~community health~~ **and human services**, and the senate and house
15 fiscal agencies.

16 Sec. 2617. **(1)** The health information system ~~shall~~**must**
17 include statistics relative to:

18 (a) The causes, effects, extent, and nature of illness and
19 disability of the people of this state, or a grouping of its
20 people, which may include the incidence and prevalence of various
21 acute and chronic illnesses and infant and maternal morbidity and
22 mortality, **and must include the incidence and prevalence of**
23 **obstetric violence and obstetric racism.**

24 (b) The impact of illness and disability of the people of this
25 state on the economy of this state and on other aspects of the
26 well-being of its people or a grouping of its people.

27 (c) Environmental, social, and other health hazards and health
28 knowledge and practices of the people of this state.

29 (d) Determinants of health and nutritional practices and

1 status, including behavior related to health.

2 (e) Health resources, which may include health care
3 institutions.

4 (f) The utilization of health care, which may include the
5 utilization of ambulatory health services by specialties and types
6 of practice of the health professionals providing the services, and
7 services of health facilities and agencies ~~defined in section 20106~~
8 and other health care institutions.

9 (g) Health care costs and financing, which may include the
10 trends in health care prices and costs, the sources of payments for
11 health care services, and federal, state, and local governmental
12 expenditures for health care services.

13 **(2) As used in this section:**

14 (a) "Health facility or agency" means that term as defined in
15 section 20106.

16 (b) "Obstetric racism" means that a health facility or agency,
17 health professional, or other person that provides care to a
18 patient during the perinatal period is influenced by the patient's
19 race in making a treatment or diagnostic decision and that decision
20 places the patient's health and well-being at risk.

21 (c) "Obstetric violence" means physical, sexual, emotional, or
22 verbal abuse; bullying; coercion; humiliation; or assault,
23 perpetrated by a health care professional on a patient during the
24 perinatal period.

25 Sec. 2617a. **(1)** A physician or an individual in charge of a
26 health facility who is present for or is aware of a maternal death
27 shall submit information regarding that death at the time and in
28 the manner specified or approved by the department for inclusion in
29 the health information system established under section 2616.

1 (2) As used in this section:

2 (a) "Health facility" means a hospital, **freestanding birth**
3 **center licensed under article 17**, freestanding surgical outpatient
4 facility, or other outpatient facility that is licensed or
5 otherwise authorized to operate in this state under article 17.

6 (b) "Maternal death" means the death of a woman who was
7 pregnant at the time of her death or within 1 year before her
8 death.

9 (c) "Physician" means an individual who is licensed or
10 otherwise authorized to engage in the practice of medicine or
11 practice of osteopathic medicine and surgery under article 15.

12 **Sec. 2617b. (1) The department shall maintain a team that**
13 **comprehensively reviews maternal deaths in this state, facilitates**
14 **best practices for sharing data regarding maternal deaths,**
15 **coordinates meetings with maternal mortality review teams**
16 **throughout the country, and participates in regional or national**
17 **maternal mortality review activities.**

18 (2) The department shall study the use of research evidence in
19 policies related to the perinatal period in this state, including
20 all of the following:

21 (a) The public payment systems and the systems' policies
22 related to labor and delivery services.

23 (b) In consultation with the department of insurance and
24 financial services, malpractice insurance policies related to
25 perinatal care, including, but not limited to, labor and delivery
26 services.

27 (c) In consultation with the department of insurance and
28 financial services, the private payment systems and the systems'
29 policies related to labor and delivery services.

1 (3) No later than January 1, 2026, the department shall, using
2 the implementation science framework, report to the standing
3 committees in the house of representatives and the senate concerned
4 with health policy the results of the study under subsection (2).

5 (4) The department may contract with a third party to complete
6 the study under subsection (2).

7 Sec. 2618. (1) The department shall publish and make available
8 periodically to agencies and individuals health statistics
9 publications of general interest, publications bringing health
10 statistics into focus on priority programmatic issues and health
11 profiles. An annual report on the health information system shall
12 be made available to the governor and the legislature and to
13 collaborating agencies. A summary report of each area described in
14 sections 2616 and 2617 ~~shall~~**must** be included in the annual report
15 not less than once each 5 years. The department shall include in
16 the report a statement of the limitations of the data used in terms
17 of their quality, accuracy, and completeness.

18 (2) Beginning January 1, 2026, and every 3 years thereafter,
19 the department shall submit a report to the standing committees of
20 the house of representatives and senate concerned with health
21 policy on all of the following:

22 (a) A list of the most preventable causes of maternal
23 mortality that the department identifies as having the greatest
24 impact on the pregnant and postpartum population in this state.

25 (b) In consultation with the perinatal care quality
26 collaborative designated for this state, a list of recommendations
27 for best practices and quality improvement in clinical settings
28 that may reduce the incidence of pregnancy-related deaths, maternal
29 mortality, and morbidity in prenatal, perinatal, and postnatal

1 clinical settings.

2 (3) The department shall incorporate into the report under
3 subsection (2) any findings from the department of civil rights
4 provided under section 5(3) of the biased and unjust care reporting
5 act.

6 Enacting section 1. This amendatory act does not take effect
7 unless all of the following bills of the 102nd Legislature are
8 enacted into law:

9 (a) Senate Bill No. ____ or House Bill No. ____ (request no.
10 00315'23 *).

11 (b) Senate Bill No. 821.

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13 (c) Senate Bill No. 819.

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