

2019 -- H 5543 SUBSTITUTE B

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LC001829/SUB B
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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2019

A N A C T

RELATING TO HEALTH AND SAFETY - OFFICE OF STATE MEDICAL EXAMINERS

Introduced By: Representatives Williams, Alzate, Shanley, Diaz, and Almeida

Date Introduced: February 27, 2019

Referred To: House Health, Education & Welfare

(Dept. of Health)

It is enacted by the General Assembly as follows:

1 SECTION 1. Sections 23-4-3 and 23-4-3.1 of the General Laws in Chapter 23-4 entitled
2 "Office of State Medical Examiners" are hereby amended to read as follows:

3 **23-4-3. Functions.**

4 The office of state medical examiners shall be responsible for:

- 5 (1) The investigation of deaths within the state that, in its judgment, might reasonably be
6 expected to involve causes of death enumerated in this chapter;
- 7 (2) For the conduct of inquests when requested by the attorney general;
- 8 (3) For the performance of autopsies, including the retention, examination, and
9 appropriate disposal of tissue, when appropriate, for deaths that, in its judgment, might
10 reasonably be expected to involve causes of deaths enumerated in this chapter;
- 11 (4) For the written determination of the causes of death investigated pursuant to this
12 chapter;
- 13 (5) For the presentation to the courts of Rhode Island of expert testimony relating to the
14 cause of death;
- 15 (6) For the keeping of complete records, including names, places, circumstances, and
16 causes of deaths, of deaths investigated and reported, copies of which shall be delivered to the
17 attorney general and of which written determinations of causes of death shall be made available
18 for public inspection;
- 19 (7) For the burial of bodies for which there is no other existing legal responsibility to do

1 so;

2 (8) For the development and enforcement of procedures for the pronouncement of death
3 and for the transplantation of organs from bodies of persons who have died within the state;

4 (9)(i) For a multi-disciplinary team review of child fatalities with the goal to decrease the
5 prevalence of preventable child deaths and report recommendations for community- and systems-
6 intervention strategies. A child death-review team shall include, but is not limited to,
7 representation from state agencies, health care, child welfare, and law enforcement; and

8 (ii) The work product of the child death review team shall be confidential and protected
9 under all applicable laws, including the federal Health Insurance Portability and Accountability
10 Act of 1996 and the Rhode Island confidentiality of health care information act (chapter 37.3 of
11 title 5) and shall be exempt from the provisions of chapter 2 of title 38 and shall be deemed
12 privileged pursuant to § 23-17.21-8.

13 (10) The department of health shall work with the department of children, youth and
14 families and the office of the child advocate to develop a process to ensure the timely availability
15 of autopsy reports on child deaths; and

16 (11)(i) For a multi-disciplinary team review of drug-related overdose deaths with the goal
17 of reducing the prevalence of these deaths by examining emerging trends in overdose, identifying
18 potential demographic, geographic, and structural points for prevention and other factors. The
19 multi-disciplinary team for review of drug-related overdose deaths may include, as determined by
20 the director of the department of health, representatives from the department of health; the
21 department of the attorney general; the Rhode Island state police; the department of corrections;
22 the department of behavioral healthcare, developmental disabilities and hospitals; the Rhode
23 Island Police Chiefs Association; the Hospital Association of Rhode Island; an emergency
24 department physician; a primary care physician; an addiction medicine/treatment provider; a
25 mental health clinician; a toxicologist; a recovery coach or other representative of the recovery
26 community; and others as may be determined by the director of the department of health; ~~and~~

27 (ii) The work product of the multi-disciplinary team for review of drug-related overdose
28 deaths shall be confidential and protected under all applicable laws, including the federal Health
29 Insurance Portability and Accountability Act of 1996 and the Rhode Island confidentiality of
30 health care information act (chapter 37.3 of title 5), and shall be exempt from the provisions of
31 chapter 2 of title 38, not subject to subpoena, discovery, or introduction into evidence in any civil
32 or criminal proceeding, and not subject to disclosure beyond the team members (except to
33 authorized employees of the department of health as necessary to perform its official duties ~~of the~~
34 ~~department~~ pursuant to this subsection (11));

1 (iii) The multidisciplinary team shall report on or before December 1 of each year to the
2 governor, the speaker of the house, and president of the senate, which report shall summarize the
3 activities of the team, as well as the team's findings, progress towards reaching its goals, and
4 recommendations for any needed changes in legislation or otherwise; ~~and~~

5 (iv) The provisions of subsection (11) ~~(i)~~ shall sunset and be repealed effective December
6 31, 2020.

7 (12)(i) For a multi-disciplinary maternal mortality review committee for review of
8 maternal deaths of women that occur during pregnancy, delivery, or within one year of the end of
9 pregnancy with the goal of reducing the prevalence of such deaths by examining emerging trends
10 in such deaths, identifying potential demographic, geographic, and structural points for
11 prevention and other factors. This committee has the authority to request and receive data from
12 vital records, health care providers, health care facilities, pharmacy records, and any other
13 agencies or officials having information that is necessary for the committee to carry out its duties
14 under this section. The multi-disciplinary maternal mortality review committee shall include, but
15 not be limited to, as determined by the director of the department of health, representation from
16 state agencies, an obstetric provider from each hospital that delivers obstetrical care, a neonatal
17 specialist, individuals or organizations that represent the populations that are most affected by
18 pregnancy-related deaths or pregnancy-associated deaths and lack of access to maternal health
19 care services, a perinatal pathologist and a maternal fetal medicine specialist. This committee
20 shall develop recommendations for the prevention of maternal deaths and disseminate findings
21 and recommendations to policy makers, health care providers, health care facilities, and the
22 general public.

23 (ii) The work product of the maternal mortality review committee shall be confidential
24 and protected under all applicable laws, including the federal Health Insurance Portability and
25 Accountability Act of 1996 and the Rhode Island confidentiality of health care information act
26 (chapter 37.3 of title 5) and shall be exempt from the provisions of chapter 2 of title 38 and shall
27 be deemed privileged pursuant to § 23-17.21-8.

28 **23-4-3.1. Immunity.**

29 No member of the multi-disciplinary ~~teams~~ ~~team for review of drug-related overdose~~
30 ~~deaths~~ shall be subject to arrest, prosecution, or penalty in any manner, or denied any right or
31 privilege, including, but not limited to, civil penalty or disciplinary action by a business,
32 occupational, or professional licensing board or entity (and, for members who are state
33 employees, termination, loss of employee or pension benefits), for acting in accordance with §
34 23-4-3.

1 SECTION 2. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
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RELATING TO HEALTH AND SAFETY - OFFICE OF STATE MEDICAL EXAMINERS

1 This act would provide that the multi-disciplinary maternal mortality review committee
2 be placed under the review of the office of state medical examiners and would provide that the
3 work product of the multi-disciplinary maternal mortality review committee and the child death
4 review team be considered confidential and would extend the immunity's for criminal and civil
5 action to all multi-disciplinary teams. It would also provide that the committee would include
6 representation from state agencies, an obstetric provider, a neonatal specialist, perinatal
7 pathologist and maternal fetal medicine specialist.

8 This act would take effect upon passage.

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