

[First Reprint]

# ASSEMBLY RESOLUTION No. 226

## STATE OF NEW JERSEY 218th LEGISLATURE

INTRODUCED FEBRUARY 7, 2019

**Sponsored by:**

**Assemblywoman ANGELA V. MCKNIGHT**

**District 31 (Hudson)**

**Assemblywoman VALERIE VAINIERI HUTTLE**

**District 37 (Bergen)**

**Assemblywoman JOANN DOWNEY**

**District 11 (Monmouth)**

**Co-Sponsored by:**

**Assemblywomen Reynolds-Jackson, Murphy, Assemblyman Conaway and  
Assemblywoman Jasey**

**SYNOPSIS**

Urges CDC to adopt uniform data system to collect information on maternal mortality.

**CURRENT VERSION OF TEXT**

As reported by the Assembly Appropriations Committee on March 18, 2019, with amendments.



**(Sponsorship Updated As Of: 3/26/2019)**

- 1 **AN ASSEMBLY RESOLUTION** urging the Centers for Disease Control  
2 and Prevention to adopt a uniform data system to collect  
3 information on maternal mortality.  
4
- 5 **WHEREAS**, The United States is ranked 50th in the world for its  
6 maternal mortality rate, and is one of eight countries in which the  
7 maternal mortality rate has been on the rise; and
- 8 **WHEREAS**, Recent studies have found that the estimated maternal  
9 mortality rate in the United States increased by approximately 27  
10 percent between 2000 and 2014, with the rate increasing in  
11 nearly every state in the country; and
- 12 **WHEREAS**, Maternal deaths in the United States result from  
13 pregnancy-related causes such as hemorrhage, hypertensive  
14 disease, preeclampsia, embolic disease, and sepsis, addiction-  
15 related causes such as substance use disorder and overdose, and  
16 violent causes, including motor vehicle accidents, homicide, and  
17 suicide; and
- 18 **WHEREAS**, The most severe complications of pregnancy, generally  
19 referred to as severe maternal morbidity, affect more than 65,000  
20 women in the United States each year; and
- 21 **WHEREAS**, In 1986, the<sup>1</sup>federal<sup>1</sup> Centers for Disease Control and  
22 Prevention (CDC) implemented a Pregnancy Mortality  
23 Surveillance System (PRAMS) to obtain information about the  
24 frequency and causes of pregnancy-related death in the United  
25 States; and
- 26 **WHEREAS**, Despite declines in maternal deaths in other parts of the  
27 world, the data collected under the PRAMS has shown a steady  
28 increase in the number of reported pregnancy-related deaths in  
29 the United States; and
- 30 **WHEREAS**, In 2012, the most recent year for which surveillance  
31 data is available, there were approximately 16 pregnancy-related  
32 deaths per every 100,000 live births in the United States; and
- 33 **WHEREAS**, The most recent State-level data available on this issue  
34 indicates that, from 2006 to 2008, the average pregnancy-related  
35 mortality rate in New Jersey was 14.4 deaths per 100,000 births;  
36 and
- 37 **WHEREAS**, Systemic reviews of maternal pregnancy-related and  
38 pregnancy-associated deaths are essential in determining  
39 strategies for developing prevention efforts, identifying at-risk  
40 populations, and understanding how to support expectant  
41 mothers and make pregnancy and the postpartum period safer;  
42 and
- 43 **WHEREAS**, The CDC recommends that maternal deaths be  
44 investigated through State maternal mortality review committees;  
45 and

**EXPLANATION** – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

<sup>1</sup>Assembly AAP committee amendments adopted March 18, 2019.

1 **WHEREAS**, Currently, fewer than 25 states conduct systemic  
2 reviews of maternal deaths or have standing maternal mortality  
3 review committees; and

4 **WHEREAS**, Although <sup>1</sup>**【there is a bill pending before】** several bills  
5 have been introduced<sup>1</sup> in the United States Congress<sup>1</sup>**【**, S.1112,  
6 the federal “Maternal Health Accountability Act of 2017,” that  
7 would require the CDC to support states and federally  
8 recognized Indian tribes and tribal organizations in assessing the  
9 various factors that may contribute to maternal mortality,  
10 including quality of care and systemic problems in the delivery  
11 of health care,**】** in the current and past sessions that would  
12 provide grants and funding to assist states in tracking and  
13 reviewing maternal mortality data, no federal legislation has yet  
14 been enacted and<sup>1</sup> there is <sup>1</sup>currently<sup>1</sup> no uniform data system to  
15 collect information on pregnancy-related and pregnancy-  
16 associated deaths; and

17 **WHEREAS**, Adopting such a system would allow states and the federal  
18 government to share responsibility in identifying opportunities for  
19 improving maternal health care services, make recommendations on  
20 improving maternal health before, during, and after pregnancy, and  
21 implement system changes relating to maternal health care; now,  
22 therefore,

23  
24 **BE IT RESOLVED** *by the Assembly of the State of New Jersey:*

25  
26 1. This House respectfully urges the <sup>1</sup>federal<sup>1</sup> Centers for  
27 Disease Control and Prevention <sup>1</sup>**【to adopt】**<sup>1</sup> a adopt a uniform data  
28 system to collect information on maternal mortality to allow states  
29 and the federal government to share responsibility in identifying  
30 opportunities for improving maternal health care services, make  
31 recommendations on improving maternal health before, during, and  
32 after pregnancy, and implement system changes relating to maternal  
33 health care.

34  
35 2. Copies of this resolution, as filed with the Secretary of State,  
36 shall be transmitted by the <sup>1</sup>**【Secretary of State】** Clerk of the  
37 General Assembly<sup>1</sup> to the Director of the <sup>1</sup>federal<sup>1</sup> Centers for  
38 Disease Control and Prevention and to every member of New  
39 Jersey’s congressional delegation.