

SENATE BUDGET AND APPROPRIATIONS COMMITTEE

STATEMENT TO

SENATE, No. 3377

with committee amendments

STATE OF NEW JERSEY

DATED: MARCH 18, 2019

The Senate Budget and Appropriations Committee reports favorably Senate Bill No. 3377, with committee amendments.

Senate Bill No. 3377, with committee amendments, designated the “Listening to Mothers Survey Act,” requires the Commissioner of Health to develop a maternity care experience survey to evaluate women’s experiences with maternity care services provided throughout the pre-conception, pregnancy, childbirth, and postpartum periods. The survey is to include, at a minimum, questions concerning the woman’s experiences with maternity care service providers and her perceptions of how she was received by practitioners, how well her questions and concerns were addressed, the responsiveness and availability of service providers, and whether she was offered information and services with regard to key health metrics related to maternity care. The survey is also required to include the option for respondents to report cultural, demographic, and socioeconomic background data, along with any other information requested by the commissioner.

The survey is to be made available to women receiving maternity care services at a hospital, ambulatory care facility, or birthing center, and women are to be offered the opportunity to voluntarily complete the survey following the termination of a pregnancy, regardless of whether the pregnancy ends in live birth, or at such time as a woman concludes a course of treatment related to maternity or reproductive care, such as assisted reproduction services that do not result in pregnancy or the administration of long-term or permanent contraception, including sterilization. The survey is to be distributed or otherwise made available no earlier than 14 days following the termination of the pregnancy or the end of a course of treatment related to maternity or reproductive care, but no later than 90 days following termination of the pregnancy or the end of the course of treatment.

The collected survey data is to be reviewed to identify local and Statewide trends in the provision of maternity care and disparities in the care received by discrete racial, cultural, and socioeconomic groups, and to develop programs, resources, and strategies to improve access to, and the quality of, maternity care services throughout the State.

COMMITTEE AMENDMENTS:

The amendments change the effective date of the bill to 180 days after enactment, instead of immediately upon enactment.

FISCAL IMPACT:

The Office of Legislative Services (OLS) estimates that this bill will increase State spending for developing, implementing, and tabulating data from a new Department of Health (DOH) survey to gauge women's experiences with maternity care services provided throughout the pre-conception, pregnancy, childbirth, and postpartum periods, as well as producing a report concerning the results of the survey and the DOH recommendations for legislation or other action.

The cost to design, conduct, and collect survey data cannot be quantified without information on the manner in which the DOH would carry out the survey requirements. The DOH may decide to leverage a United States Centers for Disease Control and Prevention (CDC) survey, which the State already conducts with the CDC, to satisfy the requirements of this bill, or may select a less rigorous protocol. The DOH may opt to use in-house staff or contract with a third-party entity to conduct the survey, review the resulting data, and produce a report on the results. Utilizing a third-party contractor would likely result in higher State costs than if DOH staff were tasked with these responsibilities. Even if DOH staff manages all phases of the survey, the agency would likely need to hire additional personnel to carry out the requirements of this bill.