



General Assembly

**Substitute Bill No. 6599**

January Session, 2023



**AN ACT CONCERNING INTIMATE PARTNER VIOLENCE AND OTHER DOMESTIC VIOLENCE.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 19a-59i of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective from passage*):

3 (a) There is established a maternal mortality review committee within  
4 the department to conduct a comprehensive, multidisciplinary review  
5 of maternal deaths for purposes of identifying factors associated with  
6 maternal death and making recommendations to reduce maternal  
7 deaths.

8 (b) The cochairpersons of the maternal mortality review committee  
9 shall be the Commissioner of Public Health, or the commissioner's  
10 designee, and a representative designated by the Connecticut State  
11 Medical Society. The cochairpersons shall convene a meeting of the  
12 maternal mortality review committee upon the request of the  
13 Commissioner of Public Health.

14 (c) The maternal mortality review committee may include, but need  
15 not be limited to, any of the following members, as needed, depending  
16 on the maternal death case being reviewed:

17 (1) A physician licensed pursuant to chapter 370 who specializes in  
18 obstetrics and gynecology, appointed by the Connecticut State Medical  
19 Society;

20 (2) A physician licensed pursuant to chapter 370 who is a  
21 pediatrician, appointed by the Connecticut State Medical Society;

22 (3) A community health worker, appointed by the Commission on  
23 Women, Children, Seniors, Equity and Opportunity;

24 (4) A nurse-midwife licensed pursuant to chapter 377, appointed by  
25 the Connecticut Nurses Association;

26 (5) A clinical social worker licensed pursuant to chapter 383b,  
27 appointed by the Connecticut Chapter of the National Association of  
28 Social Workers;

29 (6) A psychiatrist licensed pursuant to chapter 370, appointed by the  
30 Connecticut Psychiatric Society;

31 (7) A psychologist licensed pursuant to chapter 20-136, appointed by  
32 the Connecticut Psychological Association;

33 (8) The Chief Medical Examiner, or the Chief Medical Examiner's  
34 designee;

35 (9) A member of the Connecticut Hospital Association;

36 (10) A representative of a community or regional program or facility  
37 providing services for persons with psychiatric disabilities or persons  
38 with substance use disorders, appointed by the Commissioner of Public  
39 Health;

40 (11) A representative of The University of Connecticut-sponsored  
41 health disparities institute; or

42 (12) Any additional member the cochairpersons determine would be  
43 beneficial to serve as a member of the committee.

44 (d) Whenever a meeting of the maternal mortality review committee  
45 takes place, the committee shall consult with relevant experts to  
46 evaluate the information and findings obtained from the department  
47 pursuant to section 19a-59h and make recommendations regarding the  
48 prevention of maternal deaths. Not later than ninety days after such  
49 meeting, the committee shall report, to the Commissioner of Public  
50 Health, any recommendations and findings of the committee in a  
51 manner that complies with section 19a-25.

52 (e) Not later than January 1, 2022, and annually thereafter, the  
53 maternal mortality review committee shall submit a report of  
54 disaggregated data, in accordance with the provisions of section 19a-25,  
55 regarding the information and findings obtained through the  
56 committee's investigation process to the joint standing committee of the  
57 General Assembly having cognizance of matters relating to public  
58 health, in accordance with the provisions of section 11-4a. Such report  
59 may include recommendations to reduce or eliminate racial inequities  
60 and other public health concerns regarding maternal mortality and  
61 severe maternal morbidity in the state.

62 (f) All information provided by the department to the maternal  
63 mortality review committee shall be subject to the provisions of section  
64 19a-25.

65 (g) Not later than January 1, 2023, the maternal mortality review  
66 committee shall develop educational materials regarding:

67 (1) The health and safety of pregnant and postpartum persons with  
68 mental health disorders, including, but not limited to, perinatal mood  
69 and anxiety disorders, for distribution by the Department of Public  
70 Health to each birthing hospital in the state. As used in this subdivision,  
71 "birthing hospital" means a health care facility, as defined in section 19a-  
72 630, operated and maintained in whole or in part for the purpose of  
73 caring for patients during the delivery of a child and for a postpartum  
74 person and such person's newborn following birth;

75 (2) Evidence-based screening tools for screening patients for intimate  
76 partner violence, peripartum mood disorders and substance use  
77 disorder for distribution by the Department of Public Health to  
78 obstetricians and other health care providers who practice obstetrics;  
79 and

80 (3) Indicators of intimate partner violence for distribution by the  
81 Department of Public Health to (A) hospitals for use by health care  
82 providers in the emergency department and hospital social workers,  
83 and (B) obstetricians and other health care providers who practice  
84 obstetrics.

85 (h) Not later than January 1, 2024, the maternal mortality review  
86 committee shall develop educational materials regarding intimate  
87 partner violence toward pregnant and postpartum persons for  
88 distribution by the Department of Public Health to each birthing  
89 hospital in the state and to obstetricians and other health care providers  
90 who practice obstetrics for provision to pregnant and postpartum  
91 patients.

92 Sec. 2. (NEW) (*Effective July 1, 2023*) (a) On or before January 1, 2024,  
93 and annually thereafter, any health care provider licensed in the state  
94 who screens patients for domestic violence, as defined in section 46b-1  
95 of the general statutes, may submit documentation to the Department  
96 of Public Health, in a form and manner prescribed by the Commissioner  
97 of Public Health, demonstrating that the provider performs domestic  
98 violence screening of patients.

99 (b) On or before January 1, 2025, and annually thereafter, the  
100 Department of Public Health shall maintain a list of health care  
101 providers who have submitted documentation pursuant to subsection  
102 (a) of this section and who, in the determination of the Commissioner of  
103 Public Health, screen patients for domestic violence. The commissioner  
104 shall publish such list on the department's Internet web site.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	19a-59i
Sec. 2	<i>July 1, 2023</i>	New section

**PH**      *Joint Favorable Subst.*

**APP**     *Joint Favorable*