

Department of Legislative Services  
 Maryland General Assembly  
 2018 Session

FISCAL AND POLICY NOTE  
 Third Reader - Revised

House Bill 716

(Delegate R. Lewis, *et al.*)

Health and Government Operations

Finance

Maryland Health Care Commission - Mortality Rates of African American  
 Infants and Infants in Rural Areas - Study

This bill requires the Maryland Health Care Commission (MHCC), in consultation with the Office of Minority Health and Health Disparities, the Maternal and Child Health Bureau, the Vital Statistics Administration, and interested stakeholders, to conduct a study regarding the mortality rates of African American infants and infants in rural areas. By November 1, 2019, MHCC must report its findings and recommendations to specified committees of the General Assembly. **The bill takes effect July 1, 2018.**

Fiscal Summary

**State Effect:** Special fund expenditures for MHCC increase by at least \$100,000 in FY 2019 only to conduct the required study. Revenues are not affected.

(in dollars)	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
Revenues	\$0	\$0	\$0	\$0	\$0
SF Expenditure	100,000	0	0	0	0
Net Effect	(\$100,000)	\$0	\$0	\$0	\$0

*Note: ( ) = decrease; GF = general funds; FF = federal funds; SF = special funds; - = indeterminate increase; (-) = indeterminate decrease*

**Local Effect:** None.

**Small Business Effect:** None.

Analysis

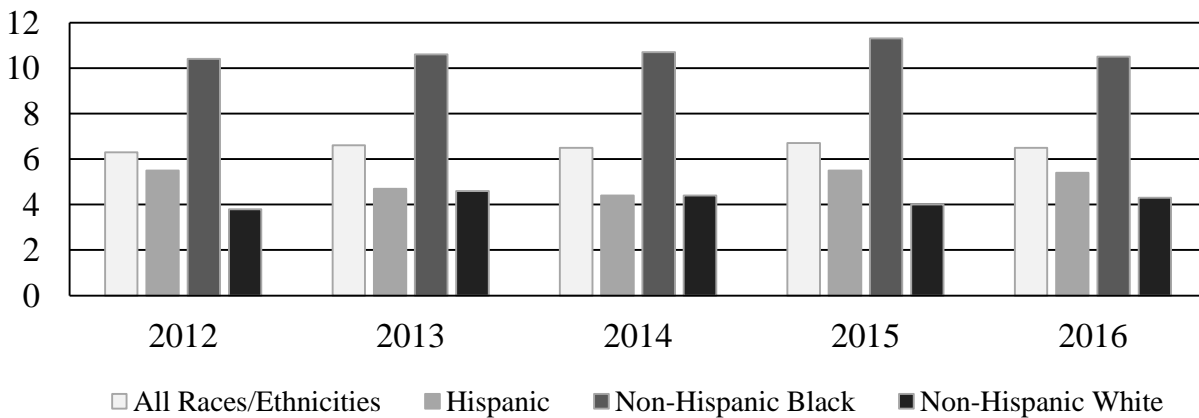
**Bill Summary:** In conducting the study, MHCC must (1) examine factors, beyond the known factors, affecting the mortality of African American infants and infants in rural

areas in the United States and in Maryland; (2) research programs that have aimed to reduce the infant mortality rate; (3) make recommendations on methods to reduce the mortality rate of African American infants and infants in rural areas; (4) make recommendations on ways to use pregnancy navigators or community health workers to assist pregnant women with the goal of reducing the infant mortality rate; (5) make recommendations regarding the establishment of a permanent task force or workgroup for lowering rates of disparity with respect to infant mortality; and (6) make recommendations regarding methods to reduce the costs associated with low birth weight infants and with infant mortality.

**Current Law/Background:** According to the annual [Infant Mortality in Maryland](#) report, in 2016 (the most recent year for which data is available), the overall infant mortality rate in Maryland was 6.5 per 1,000 live births, a 3% decrease over 2015. A total of 478 infants died in 2016, compared with 491 in 2015. Infant mortality rates in Maryland by race/ethnicity for 2012 through 2016 are shown in **Exhibit 1**.

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**Exhibit 1**  
**Infant Mortality Rates in Maryland per 1,000 Live Births**  
**2012-2016**



Source: Maryland Department of Health; Department of Legislative Services

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While the infant mortality rate for non-Hispanic Black infants increased annually from 2012 through 2015, it declined to 10.5 per 1,000 live births in 2016. However, this rate remains 1.6 times the rate for all races/ethnicities and 2.4 times greater than the rate for non-Hispanic White infants.

Relatively few statistics are available on the rate of infant mortality in rural areas relative to the rest of the State. However, 2016 data indicate that infant mortality rates in the

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Southern and Eastern Shore regions generally exceed the overall infant mortality rate in the State, with rates of 8.4 per 1,000 live births and 8.8 per 1,000 live births, respectively.

**State Expenditures:** MHCC advises that it needs to hire a contractor to conduct the required study at a cost of \$200,000 in fiscal 2019. However, the Department of Legislative Services (DLS) advises that, while conducting the required study requires contractual assistance, expenditures may also be significantly lower based on the scope and complexity of the study. Therefore, DLS advises that special fund expenditures increase by *at least* \$100,000 in fiscal 2019 to hire a contractor to conduct the required study. Other State agencies can participate with existing resources.

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### Additional Information

**Prior Introductions:** None.

**Cross File:** SB 266 (Senator Nathan-Pulliam, *et al.*) - Finance.

**Information Source(s):** Maryland Department of Health; Department of Legislative Services

**Fiscal Note History:** First Reader - February 7, 2018  
mm/jc Third Reader - March 12, 2018  
Revised - Amendment(s) - March 12, 2018

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