

Good morning Chairwoman Lee and members of the Senate Human Services Committee. My name is Alicia Belay and I serve as the Public Health Specialist for the North Dakota Department of Health (NDDoH). I am here to provide testimony in support of House Bill 1205, relating to establishing a maternal mortality review committee.

The NDDoH administers the state Maternal and Child Health (MCH) Block Grant. Formalizing states' Maternal Mortality Review Committees (MMRC) has been a federal MCH priority for several years. The NDDoH's MCH Program supports this priority and participated in the development of House Bill 1205 to improve coordination, allow for more effective action on issues of maternal mortality and morbidity, and to contribute to national strategies to improve maternal outcomes.

Formalizing North Dakota's MMRC is necessary to collaborate more effectively with other states and to participate on a national scale in the reduction of maternal mortality and morbidity. This bill will allow North Dakota to join with 48 other states that have a formalized MMRC to participate in the national data-sharing program with the Centers for Disease Control and Prevention (CDC). Maternal mortality data is critically important, as it represents measures of the overall effectiveness of our health care delivery systems and assists with identifying gaps and areas for improvement.

Formalizing North Dakota's MMRC will also be beneficial for the functioning of the North and South Dakota Perinatal Quality Collaborative (NSDPQC), a coordinated multi-state effort to improve the health of families across the Dakotas that was formed in 2018. The MMRC's recommendations will serve as a foundation for the initiatives of the NSDPQC, ensuring timely action on identified maternal mortality and morbidity issues in our state.

This concludes my testimony. I am happy to answer any questions you may have.