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To: [Apodaca, Sheila, DOH](#)
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Subject: [EXTERNAL] Written Public Comment Submission: proposed new rule, 7.4.8 NMAC
Date: Tuesday, July 26, 2022 2:44:41 PM
Attachments: [Outlook-x4obfndn.png](#)
[Coalition MMRC Rule Making Public Comment.pdf](#)

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Hi Shelia, attached please find written comment on the proposed new rule, 7.4.8 NMAC, "Maternal Mortality and Severe Maternal Morbidity Review". The comment attached is being submitted on behalf of New Mexico's Black and Indigenous Maternal Health Policy Coalition before COB, as directed in today's public hearing. Thank you for including this among the exhibits.

Great Work Ahead,

Sunshine



Sunshine Muse, Black Health New Mexico
The New Mexico Birth Equity Collaborative

July 26, 2022

Attn: Sheila M. Apodaca

Re.: Proposed new rule, 7.4.8 NMAC, “Maternal Mortality and Severe Maternal Morbidity Review”

Enclosed please find feedback on the proposed rules for implementation of SB96. The most tragic shortcoming of the draft rules heard today, July 26, 2022, at the public hearing on the proposed new rule, 7.4.8 NMAC, “Maternal Mortality and Severe Maternal Morbidity Review” is that they fail to operationalize the spirit of SB96 which was meant to ensure that the maternal mortality review committee (MMRC) in New Mexico has membership and leadership that reflects the communities most impacted by maternal mortality and morbidity and removes barriers to their participation.

The re-centralization of power with cochairs that are not representative of the communities most impacted, and a proposed executive committee that would make decisions on behalf of what is, for the first time in the history of New Mexico, a diverse maternal mortality review committee, is deeply problematic.

Moving forward with the rules as they are written does not reflect the spirit of SB96, to ensure diversity in membership and leadership and remove barriers to participation. These rules must ensure that the priorities and operation of the committee reflects the disciplinary and cultural diversity that SB96 and the department have begun to put in place. Thus, ensuring that everyone serving has a voice, equal access to information and that silos cannot be formed. Further, these rules must ensure that the role of co-chair is explicitly linked to health equity and that leadership roles, such as co-chair and executive committee member, are clearly outlined in terms of accessibility, function, term of service, and power.

Here then are our official recommendations for how these rules can be improved:

Committee Purpose: the purpose of the MMRC must include addressing systemic racism and inequity within the rules in order to achieve the goals of SB96.

PROGRAM ADMINISTRATION: We would ask that the rules reflect that all program administration occur through a health equity and racial justice lens to enhance equity, cultural awareness and understanding during case review and that the rules reflect that value.

Executive Committee: We would like the rules to include that an MMRC executive committee will not be formed without the expressed consent of 2/3rds of the committee.

And to clearly outline how Executive committee members will be chosen to serve in that role and for how long. Additionally, we would like the rules to reflect that the executive committee must meet the same membership requirements set forth for the committee as a whole, but in a smaller amount.

Information collection process: To expand the perspective and apply a diverse lens to the information being collected and reviewed, we ask that the rules reflect that any committee member may request additional information from the committee co-chairs or designated operational staff on the cases being reviewed. And that the committee may request information about race and ethnicity, including zip code, in otherwise de-identified data to better evaluate the role of systemic racism and inequities related to pregnancy-related deaths or severe maternal morbidity. Research indicates that zip codes are strongly linked to health outcomes.

Abstractor: We ask that the rules clearly state that any committee member may request to the co-chairs that the lead abstractor's work be reviewed, or that an alternative abstractor be assigned, or that the materials the abstractor used to create the summaries be reviewed, if the committee member is concerned that information related to racial justice and health equity is being missed by the abstractor in creating summaries.

COMMITTEE RESPONSIBILITIES: We ask that the rules indicate that a quorum shall not be achieved if those committee members who reflect the racial, ethnic and linguistic diversity of the state are not present or have not made proxy votes. This would help to ensure structural equity through the rules.

DEFINITIONS:

"Abstractor": It is crucial that the rules reflect that the Abstractor possess a professional background in maternal health equity and the training and/or lived experience to approach cases with an anti-racist lens. Absent these skills, an abstractor may present cases in a manner that perpetuates instead of addresses racial bias or victim blame. This is known as unconscious bias and presents a significant barrier to effective case review and the recommendations that result from it.

"Administrative co-chair": It is crucial that the rules reflect that the administrative co-chair be equipped with the measurable skills, training and/or lived experience to incorporate the racial, ethnic and linguistic diversity of the state into their leadership role on this committee. The Administrative co-chair definition in the rules must make clear the importance of health equity and racial justice in the work of maternal mortality and morbidity case review.

Clinical co-chair: In defining the clinical co-chair, the rules must reflect that the clinical co-chair be appointed with an intent that includes but is not limited to ensuring the broad

regional, racial, and ethnic diversity of New Mexico, demonstrated by lived experience and professional background.

The rules should ensure that the Clinical co-chair is nominated and voted on by committee members. Co-chairs ultimately should reflect an interdisciplinary multi-ethnic background.

“Contributing factors”: When defining contributing factors, it is important that the rules reflect that “contributing factors” may include systemic racism or inequities.

“Expert”: A key success of SB 96 was to expand the expertise on the committee. As a result, having the rules ensure that the definition of “Expert” include “lived-experience” is an important part of recognizing and ensuring that expertise is not limited to job title and academic training.

“Qualified invited guest”: It is important to equity efforts that the rules ensure that the entire committee be part of the body that **approves** the people and experts that attend committee meetings. The NM MMRC is diverse, and that diversity is not yet, reflected by its co-chairs. As a result, it is inequitable to rely on co-chairs to approve who can and can’t attend meetings.

“Travel expenses”: It is important that the rules reflect that any expense incurred by a committee member to participate in committee meetings will be reimbursed and that these expenses may include, but not be limited to, parking, bus fare, meals, mileage, car rental, childcare, internet access, etc. We would like the rules to reflect that MMRC members will be reimbursed up to \$300.00 per attended meeting upon request, whether the meeting was virtual or in person, to uphold the equity and dignity of members.

A priority for our Coalition, which is representative of the communities most impacted by maternal mortality and morbidity, is the need for structural empathy for every case. Including full acknowledgement that these are human lives being reviewed and discussed. We would like the rules to reflect this understanding.

Thank you for the opportunity to offer public comment and to partner with the Department to operationalize health equity and racial justice through the rule making process.

With Gratitude,

New Mexico’s Black and Indigenous Maternal Health Policy Coalition