

By: Kolkhorst

H.B. No. 15

A BILL TO BE ENTITLED

1 AN ACT
2 relating to level of care designations for hospitals that provide
3 neonatal and maternal services.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

5 SECTION 1. Chapter 241, Health and Safety Code, is amended
6 by adding Subchapter H to read as follows:

7 SUBCHAPTER H. HOSPITAL LEVEL OF CARE DESIGNATIONS FOR NEONATAL AND
8 MATERNAL CARE

9 Sec. 241.181. DEFINITIONS. In this subchapter:

10 (1) "Department" means the Department of State Health
11 Services.

12 (2) "Executive commissioner" means the executive
13 commissioner of the Health and Human Services Commission.

14 Sec. 241.182. LEVEL OF CARE DESIGNATIONS. (a) The
15 executive commissioner shall assign level of care designations to
16 each hospital based on the neonatal and maternal services provided
17 at the hospital.

18 (b) A hospital may receive different level designations for
19 neonatal and maternal care, respectively.

20 Sec. 241.183. RULES. (a) The executive commissioner shall
21 adopt rules:

22 (1) establishing the levels of care for neonatal and
23 maternal care to be assigned to hospitals;

24 (2) prescribing criteria for designating levels of

1 neonatal and maternal care, respectively, including specifying the
2 minimum requirements to qualify for each level designation;

3 (3) establishing a process for the assignment of
4 levels of care to a hospital for neonatal and maternal care,
5 respectively;

6 (4) dividing the state into neonatal and maternal care
7 regions;

8 (5) establishing neonatal and maternal care regional
9 advisory councils and prescribing processes for the councils; and

10 (6) detailing confidential reporting requirements.

11 (b) Each level of care designation must require the hospital
12 to:

13 (1) actively participate in the appropriate neonatal
14 and maternal care regional advisory council; and

15 (2) regularly submit outcome and other data to the
16 department as required or requested.

17 (c) The criteria a hospital must achieve to receive each
18 level of care designation must be posted on the department's
19 Internet website.

20 Sec. 241.184. ASSIGNMENT OF LEVEL OF CARE DESIGNATION. (a)
21 The executive commissioner in consultation with the department
22 shall assign the appropriate level of care designation to each
23 hospital that meets the minimum standards for that level of care.
24 The executive commissioner shall evaluate separately the neonatal
25 and maternal services provided at the hospital and assign the
26 respective level of care designations accordingly.

27 (b) Biennially, the executive commissioner and the

1 department shall review the levels of care designations assigned to
2 each hospital and, as necessary, assign a hospital a different
3 level of care designation or remove the hospital's level of care
4 designation.

5 Sec. 241.185. HOSPITAL FAILING TO ACHIEVE MINIMUM LEVELS OF
6 CARE. A hospital that does not meet the minimum requirements for
7 any level of care designation for neonatal or maternal services:

8 (1) may not receive a level of care designation for
9 those services; and

10 (2) is not eligible to receive reimbursement through
11 the Medicaid program for neonatal or maternal services, as
12 applicable.

13 SECTION 2. (a) In this section:

14 (1) "Department" means the Department of State Health
15 Services.

16 (2) "Executive commissioner" means the executive
17 commissioner of the Health and Human Services Commission.

18 (3) "Task force" means the Perinatal Facility
19 Designation Implementation Task Force established under this
20 section.

21 (b) The task force consists of 14 members appointed by the
22 executive commissioner as follows:

23 (1) four neonatologists, at least two of whom must
24 practice in a Level IIIC neonatal intensive care unit;

25 (2) one general pediatrician;

26 (3) two general obstetrician-gynecologists;

27 (4) two maternal fetal medicine specialists;

1 (5) one family practice physician who provides
2 obstetrical care and practices in a rural community;

3 (6) one representative from a children's hospital;

4 (7) one representative from a hospital with a Level II
5 neonatal intensive care unit;

6 (8) one representative from a rural hospital; and

7 (9) one representative from a general hospital.

8 (c) To the extent possible, the executive commissioner
9 shall appoint members to the task force who previously served on the
10 Neonatal Intensive Care Unit Council established under Chapter 818
11 (H.B. 2636), Acts of the 82nd Legislature, Regular Session, 2011.

12 (d) A member of the task force serves without compensation
13 but is entitled to reimbursement for actual and necessary travel
14 expenses related to the performance of task force duties.

15 (e) The Health and Human Services Commission, the
16 department, and the task force shall work together to develop a
17 process for the designation of levels of neonatal and maternal care
18 at hospitals in accordance with Subchapter H, Chapter 241, Health
19 and Safety Code, as added by this Act.

20 (f) The task force shall:

21 (1) develop criteria for designating levels of
22 neonatal and maternal care, respectively, including specifying the
23 minimum requirements to qualify for each level designation;

24 (2) develop a process for the assignment of levels of
25 care to a hospital for neonatal and maternal care, respectively;

26 (3) make recommendations for the division of the state
27 into neonatal and maternal care regions;

1 (4) develop processes for neonatal and maternal care
2 regional advisory councils; and

3 (5) develop confidential reporting requirements.

4 (g) In developing the criteria for the levels of neonatal
5 and maternal care, the task force shall consider:

6 (1) any recommendations or publications of the
7 American Academy of Pediatrics and the American Congress of
8 Obstetricians and Gynecologists, including the *Guidelines for*
9 *Perinatal Care*; and

10 (2) the geographic and varied needs of citizens of
11 this state.

12 (h) Each level of care designation must comply with Section
13 241.183(b), Health and Safety Code, as added by this Act.

14 (i) The task force shall submit a report detailing the task
15 force's determinations and recommendations to the department and
16 the executive commissioner not later than September 1, 2015.

17 (j) The task force is abolished August 31, 2016.

18 SECTION 3. (a) Not later than December 1, 2013, the
19 executive commissioner of the Health and Human Services Commission
20 shall appoint the members of the Perinatal Facility Designation
21 Implementation Task Force as required by Section 2 of this Act.

22 (b) Not later than March 1, 2016, after consideration of the
23 report of the Perinatal Facility Designation Implementation Task
24 Force, the executive commissioner of the Health and Human Services
25 Commission shall adopt the initial rules required by Section
26 241.183, Health and Safety Code, as added by this Act.

27 (c) Not later than August 31, 2016, the executive

1 commissioner of the Health and Human Services Commission shall
2 complete the neonatal and maternal level of care designation
3 assignments for each hospital in this state.

4 (d) Notwithstanding Section 241.185, Health and Safety
5 Code, as added by this Act, a hospital is not required to have a
6 level of care designation as a condition of reimbursement through
7 the Medicaid program before September 1, 2016.

8 SECTION 4. If before implementing any provision of this Act
9 a state agency determines that a waiver or authorization from a
10 federal agency is necessary for implementation of that provision,
11 the agency affected by the provision shall request the waiver or
12 authorization and may delay implementing that provision until the
13 waiver or authorization is granted.

14 SECTION 5. This Act takes effect September 1, 2013.