

Amend HB 2131 (senate committee report) as follows:

(1) In added Section 32.071(a), Health and Safety Code (page 1, lines 31-35), strike "entities in this state that provide comprehensive maternal, fetal, and neonatal health care for pregnant women with high-risk pregnancies complicated by one or more fetuses with anomalies, with genetic conditions, or with compromise caused by a pregnancy condition or by exposure" and substitute "entities or programs in this state, including institutions of higher education as defined by Section 61.003, Education Code, or the programs of those institutions".

(2) In added Section 32.071(b), Health and Safety Code (page 1, line 39), between "health care entity" and "in this state", insert "or program".

(3) In added Section 32.072(a), Health and Safety Code (page 1, line 48), between "health care entity" and "in this", insert "or program".

(4) In added Section 32.073, Health and Safety Code (page 1, line 58), between "care entity" and "that", insert "or program".

(5) In added Section 32.073(1), Health and Safety Code (page 2, lines 2-3), strike "the rules established under Section 241.183(a)(1)" and substitute "its level of care designation received under Section 241.182".

(6) Strike added Section 32.074, Health and Safety Code (page 2, lines 11-22), and substitute the following:

Sec. 32.074. QUALIFICATIONS FOR DESIGNATION. The rules adopted under Section 32.071(b) must ensure that a health care entity or program that receives a center of excellence designation under this subchapter:

(1) provides or is affiliated with a hospital facility that provides advanced maternal and neonatal care in accordance with its level of care designation received under Section 241.182;

(2) implements and maintains a multidisciplinary health care team, including maternal fetal medicine specialists, pediatric and surgical specialists, neonatologists, nurses with specialized maternal and neonatal training, and other ancillary and support staff as appropriate to provide maternal, fetal, and neonatal services;

(3) establishes minimum criteria for medical staff, nursing staff, and ancillary and support personnel;

(4) measures short-term and long-term patient diagnostic and therapeutic outcomes; and

(5) provides to the department annual reports containing aggregate data on short-term and long-term diagnostic and therapeutic outcomes as requested or required by the department and makes those reports available to the public.

(7) In SECTION 2(a) of the bill (page 2, line 26), strike "March 1, 2018" and substitute "March 1, 2017".

(8) In SECTION 2(b) of the bill (page 2, line 27), strike "September 1, 2018" and substitute "September 1, 2017".