### House Bill 1164 Senate Amendments

# Section-by-Section Analysis

# HOUSE VERSION

### SENATE VERSION (CS)

SECTION 1. Subchapter H, Chapter 241, Health and Safety Code, is amended by adding Section 241.1837 to read as follows: Sec. 241.1837. PATIENT SAFETY PRACTICES REGARDING PLACENTA ACCRETA SPECTRUM DISORDER. (a) In this section: (1) "Placenta accreta spectrum disorder" includes placenta accreta, placenta increta, and placenta percreta. (2) "Telemedicine medical service" has the meaning assigned by Section 111.001, Occupations Code. (b) The executive commissioner, in consultation with the department, the Perinatal Advisory Council established under Section 241.187, and other interested persons described by Subsection (c), shall by rule develop patient safety practices for the evaluation, diagnosis, treatment, and management of placenta accreta spectrum disorder. (c) In adopting the patient safety practices under Subsection (b), the executive commissioner must consult with: (1) physicians and other health professionals who practice in the evaluation, diagnosis, treatment, and management of placenta accreta spectrum disorder; (2) health researchers with expertise in placenta accreta spectrum disorder; (3) representatives of patient advocacy organizations; and (4) other interested persons. (d) The patient safety practices developed under Subsection (b) must, at a minimum, require a hospital assigned a maternal level of care designation under Section 241.182 to: (1) screen patients for placenta accreta spectrum disorder, if appropriate; (2) manage patients with placenta accreta spectrum disorder, including referring and transporting patients to a higher level

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## CONFERENCE

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### of care when clinically indicated;

(3) foster telemedicine medical services, referral, and transport relationships with other hospitals assigned a maternal level of care designation under Section 241.182 for the treatment and management of placenta accreta spectrum disorder;

(4) address inpatient postpartum care for patients diagnosed with placenta accreta spectrum disorder; and

(5) develop a written hospital preparedness and management plan for patients with placenta accreta spectrum disorder who are undiagnosed until delivery, including educating hospital and medical staff who may be involved in the treatment and management of placenta accreta spectrum disorder.

(e) In addition to implementing the patient safety practices required by Subsection (d), a hospital assigned a level IV maternal designation shall have available a multidisciplinary team of health professionals who have:

(1) successfully completed training on developing a team response to placenta accreta spectrum disorder; or

(2) experience as a team treating or managing placenta accreta spectrum disorder.

(f) The team of health professionals described by Subsection (e) may include anesthesiologists, obstetricians, gynecologists, urologists, surgical specialists, interventional radiologists, and other health professionals who are timely available on urgent request to assist in attending to a patient with placenta accreta spectrum disorder.

(g) The Perinatal Advisory Council, using data collected by the department from available sources related to placenta accreta spectrum disorder, shall recommend rules on patient safety practices for the evaluation, diagnosis, treatment, management, and reporting of placenta accreta spectrum of care when clinically indicated;

(3) foster telemedicine medical services, referral, and transport relationships with other hospitals assigned a maternal level of care designation under Section 241.182 for the treatment and management of placenta accreta spectrum disorder;

(4) address inpatient postpartum care for patients diagnosed with placenta accreta spectrum disorder; and

(5) develop a written hospital preparedness and management plan for patients with placenta accreta spectrum disorder who are undiagnosed until delivery, including educating hospital and medical staff who may be involved in the treatment and management of placenta accreta spectrum disorder.

(e) In addition to implementing the patient safety practices required by Subsection (d), a hospital assigned a level IV maternal designation shall have available a multidisciplinary team of health professionals who participate in continuing staff and team-based education and training to care for patients with placenta accreta spectrum disorder.

(f) The team of health professionals described by Subsection (e) may include anesthesiologists, obstetricians/gynecologists, urologists, surgical specialists, interventional radiologists, and other health professionals who are timely available on urgent request to assist in attending to a patient with placenta accreta spectrum disorder.

(g) The Perinatal Advisory Council, using data collected by the department from available sources related to placenta accreta spectrum disorder, shall recommend rules on patient safety practices for the evaluation, diagnosis, treatment, management, and reporting of placenta accreta spectrum

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disorder. The rules adopted under this subsection from the council's recommendations must be included in the patient safety practices a hospital assigned a maternal level of care designation under Section 241.182 is required to adopt under Subsection (d).

(h) Notwithstanding any other law, this section, including the use of or failure to use any patient safety practices, information, or materials developed or disseminated under this section, does not create a civil, criminal, or administrative cause of action or liability or create a standard of care, obligation, or duty that provides a basis for a cause of action, and may not be referred to or used as evidence in a health care liability claim under Chapter 74, Civil Practice and Remedies Code.

SECTION 2. Section 241.187(h), Health and Safety Code, is amended to read as follows:

(h) In developing the criteria for the levels of neonatal and maternal care, the advisory council shall consider:

(1) any recommendations or publications of the American Academy of Pediatrics and the American Congress of Obstetricians and Gynecologists, including "Guidelines for Perinatal Care";

(2) any guidelines developed by the Society of Maternal-Fetal Medicine; [and]

(3) the geographic and varied needs of citizens of this state; and

(4) the patient safety practices adopted under Section 241.1837.

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disorder. The rules adopted under this subsection from the council's recommendations must be included in the patient safety practices a hospital assigned a maternal level of care designation under Section 241.182 is required to adopt under Subsection (d).

(h) Notwithstanding any other law, this section, including the use of or failure to use any patient safety practices, information, or materials developed or disseminated under this section, does not create a civil, criminal, or administrative cause of action or liability or create a standard of care, obligation, or duty that provides a basis for a cause of action, and may not be referred to or used as evidence in a health care liability claim under Chapter 74, Civil Practice and Remedies <u>Code</u>.

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(1) any recommendations or publications of the American Academy of Pediatrics and the American <u>College</u> [Congress] of Obstetricians and Gynecologists, including "Guidelines for Perinatal Care";

(2) any guidelines developed by the Society of Maternal-Fetal Medicine; [and]

(3) the geographic and varied needs of citizens of this state; and

(4) the patient safety practices adopted under Section 241.1837.

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#### SECTION 3. (a) Not later than December 1, 2021:

(1) the Department of State Health Services, in collaboration with the Perinatal Advisory Council established under Section 241.187, Health and Safety Code, shall consult with interested persons as required by Section 241.1837(c), Health and Safety Code, as added by this Act; and

(2) the Department of State Health Services shall collect and provide to the Perinatal Advisory Council the data required by Section 241.1837(g), Health and Safety Code, as added by this Act.

(b) Not later than August 1, 2022, the executive commissioner of the Health and Human Services Commission shall adopt rules for the patient safety practices for the treatment of placenta accreta spectrum disorder as required by Section 241.1837, Health and Safety Code, as added by this Act, based on the Perinatal Advisory Council's recommendations as required by Section 241.1837(g), Health and Safety Code, as added by this Act.

(c) Not later than October 1, 2022, a hospital with a maternal level of care designation as described by Section 241.182, Health and Safety Code, shall adopt patient safety practices for the treatment of placenta accreta spectrum disorder as required by Section 241.1837, Health and Safety Code, as added by this Act.

(d) Notwithstanding Section 241.1837, Health and Safety Code, as added by this Act, a hospital assigned a maternal level of care designation under Section 241.182, Health and Safety Code, is not required to comply with Section 241.1837 before January 1, 2023.

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SECTION 3. (a) Not later than December 1, 2021:

(1) the Department of State Health Services, in collaboration with the Perinatal Advisory Council established under Section 241.187, Health and Safety Code, shall consult with interested persons as required by Section 241.1837(c), Health and Safety Code, as added by this Act; and

(2) the Department of State Health Services shall collect and provide to the Perinatal Advisory Council the data required by Section 241.1837(g), Health and Safety Code, as added by this Act.

(b) Not later than August 1, 2022, the executive commissioner of the Health and Human Services Commission shall adopt rules regarding patient safety practices for the treatment of placenta accreta spectrum disorder as required by Section 241.1837, Health and Safety Code, as added by this Act, based on the Perinatal Advisory Council's recommendations as required by Section 241.1837(g), Health and Safety Code, as added by this Act.

(c) Not later than October 1, 2022, a hospital with a maternal level of care designation as described by Section 241.182, Health and Safety Code, shall adopt patient safety practices for the treatment of placenta accreta spectrum disorder as required by Section 241.1837, Health and Safety Code, as added by this Act.

(d) Notwithstanding Section 241.1837, Health and Safety Code, as added by this Act, a hospital assigned a maternal level of care designation under Section 241.182, Health and Safety Code, is not required to comply with Section 241.1837 before January 1, 2023.

SECTION 4. This Act takes effect September 1, 2021.

SECTION 4. Same as House version.