Maternal Levels of Care Designation-Overview Panel Discussion

Elizabeth Stevenson, RN, Designation Program Manager Emily Briggs, MD, Chair, Texas HHSC Perinatal Advisory Council Eugene Toy, MD, Past Chair, HHSC Perinatal Advisory Council





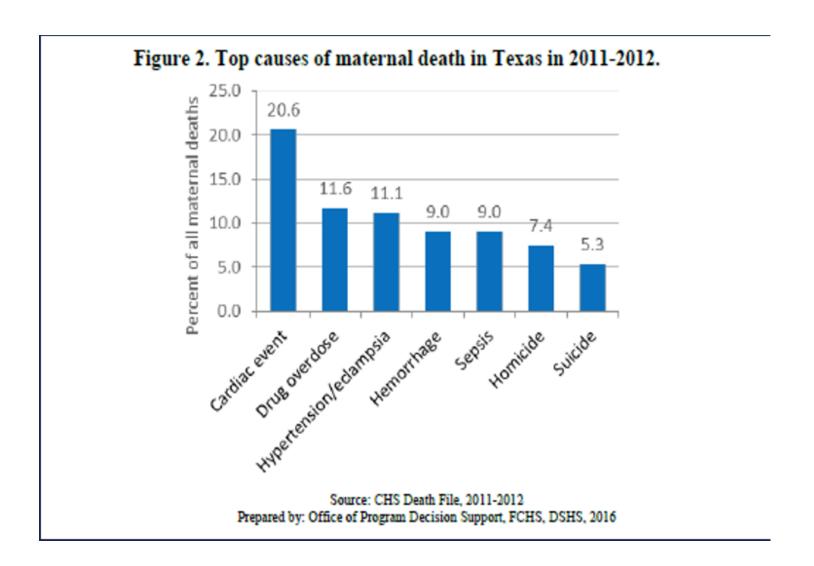
Disclosures

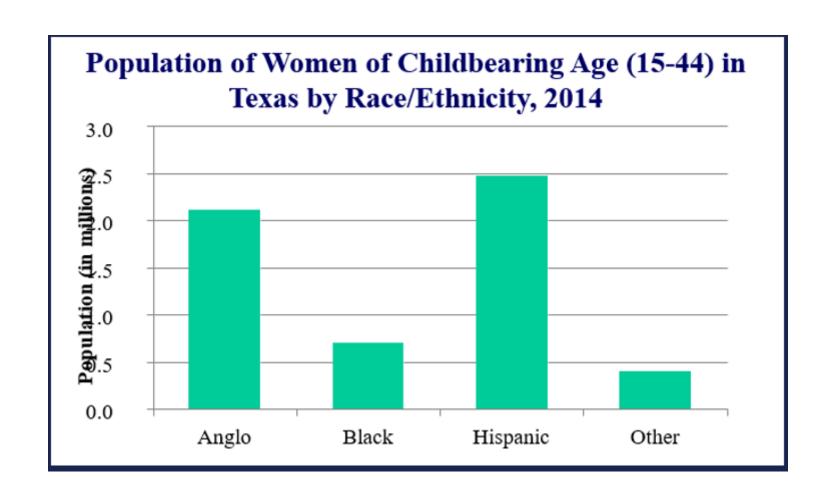
• Dr. Toy is Medical Director for the ACOG Levels of Care Designation Program in Texas. He does not receive any financial renumeration from the designation program.

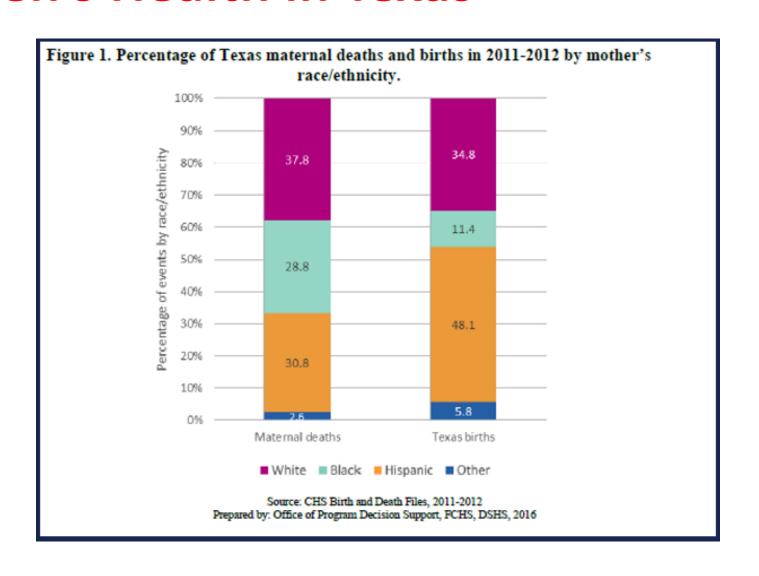
 Ms. Stevenson and Dr. Briggs have no disclosures or conflicts of interest.

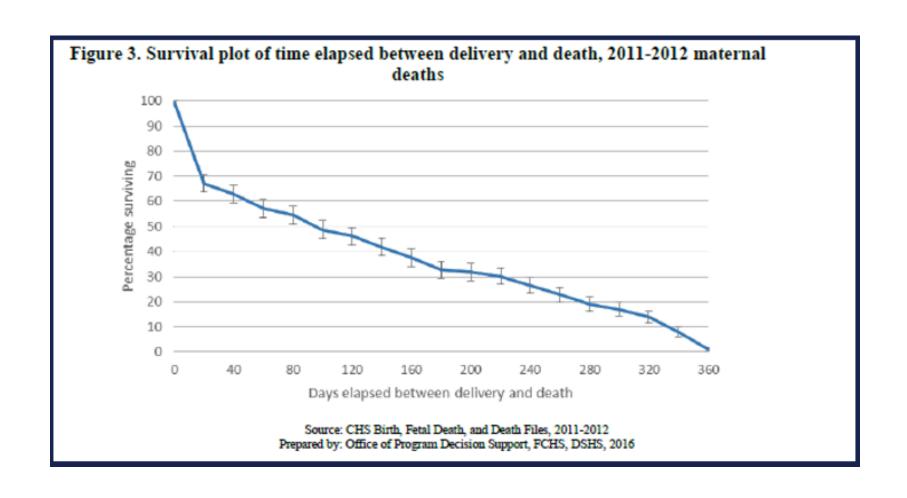
Objectives

- 1. Describe the goals of neonatal/maternal designation.
- 2. Briefly provide an overview of the maternal designation program.
- 3. Describe the current status of the neonatal/maternal designations in Texas.
- 4. Describe why perinatal designation is important.
- 5. Describe the survey and application process









EMS/Trauma Systems Website



Home > EMS-Trauma Systems > EMS-Trauma Systems
EMS-Trauma Systems

SIGN UP FOR EMAIL UPDATES

NEW!

Sign up to receive announcements by email regarding the EMS Trauma Systems program. This feature will serve as a tool to increase communication with stakeholders regarding new information added to the website.

Customer Service Survey

We value your feedback. Please take our online customer service survey at https://www.surveymonkey.com/r/RLUsurvey. Thank you.

Welcome to the home page of the DSHS program that regulates EMS and trauma systems in Texas. This website contains information about EMS certification and licensure, trauma designation, how to contact us and more.



Memorandums of Agreement for Disaster Response Click Here

Special message for military personnel and veterans

Emergency Guidance Regarding Professional and Business License and Certification Renewal Applications in Texas Counties Under The Governor's Disaster Declaration

In accordance with section 418.016 of the Texas Government Code, the Office of the Governor temporarily suspended all necessary DSHS statutes and rules pertaining to professional and business license or certification repowal applications, including the suspension of any late foor.

- Applications/Forms
- Complaints and Criminal History
- Contact Us
- Enforcement Actions
- FAQs
- Links
- Open Records
- Rules and Policies
- Statutes and Laws

Maternal Designation Website

Maternal Levels of Care Designation

SIGN UP FOR EMAIL UPDATES

The purpose of the Maternal Levels of Care Designation is to implement House Bill 15, 83rd Legislature, Regular Session, 2013, which added Health and Safety Code, Subchapter H, Hospital Level of Care Designations for Neonatal and Maternal Care, Sections 241.181 - 241.187. House Bill 3433, 84th Legislature, Regular Session, 2015 amended Health and Safety Code, Chapter 241 and requires the development of initial rules to create the neonatal/maternal level of care designation by March 1, 2018. The maternal levels of care designation rule became effective on March 1, 2018 and the designation for maternal level of care is an eligibility requirement for Medicaid reimbursement beginning September 1, 2020.

Rules

The maternal designation rule, effective March 1, 2018 is found at the <u>Texas Administrative</u> <u>Code, Title 25, Chapter 133, Subchapter K.</u>

Related Programs

Survey Organizations

American College of Obstetricians and Gynecologists

TETAF Maternal Services and Consultation

Advisory Council

Perinatal Advisory Council

The Perinatal Advisory Council, created by House Bill 15 of the 83rd Texas Legislature (Regular Session), develops and recommends criteria for designating levels of neonatal and maternal care, including specifying the minimum requirements to qualify for each level designation and a process for the assignment of levels of care to a hospital, makes recommendations for dividing the state into neonatal and maternal care regions, examines utilization trends in neonatal and maternal care, and recommends ways to improve neonatal and maternal outcomes.

Maternal Rule



Texas Administrative Code

TITLE 25 HEALTH SERVICES

PART 1 DEPARTMENT OF STATE HEALTH SERVICES

CHAPTER 133 HOSPITAL LICENSING

Subchapters

SUBCHAPTER A GENERAL PROVISIONS

SUBCHAPTER B HOSPITAL LICENSE

SUBCHAPTER C OPERATIONAL REQUIREMENTS

SUBCHAPTER D VOLUNTARY AGREEMENTS

SUBCHAPTER E WAIVER PROVISIONS

SUBCHAPTER F INSPECTION AND INVESTIGATION PROCEDURES

SUBCHAPTER G ENFORCEMENT

SUBCHAPTER H FIRE PREVENTION AND SAFETY REQUIREMENTS

SUBCHAPTER I PHYSICAL PLANT AND CONSTRUCTION REQUIREMENTS

SUBCHAPTER J HOSPITAL LEVEL OF CARE DESIGNATIONS FOR NEONATAL AND MATERNAL CARE

SUBCHAPTER K HOSPITAL LEVEL OF CARE DESIGNATIONS FOR MATERNAL CARE

SUBCHAPTER L CENTERS OF EXCELLENCE FOR FETAL DIAGNOSIS AND THERAPY

Texas Administrative Code

Maternal Rule

TITLE 25 HEALTH SERVICES

PART 1 DEPARTMENT OF STATE HEALTH SERVICES

CHAPTER 133 HOSPITAL LICENSING

SUBCHAPTER K HOSPITAL LEVEL OF CARE DESIGNATIONS FOR MATERNAL CARE

Rules

§133.201	Purpose
§133.202	Definitions
§133.203	General Requirements
§133.204	Designation Process
§133.205	Program Requirements
§133.206	Maternal Designation Level I
§133.207	Maternal Designation Level II
§133.208	Maternal Designation Level III
§133.209	Maternal Designation Level IV
§133.210	Survey Team

Maternal Rule - Purpose

The purpose of this subchapter is to implement Health and Safety Code, Chapter 241, Subchapter H, Hospital Level of Care Designations for Neonatal and Maternal Care, which requires a level of care designation of maternal services to be eligible to receive reimbursement through the Medicaid program for maternal services.

Source Note: The provisions of this §133.201 adopted to be effective March 1, 2018, 43 TexReg 875

Important Points

- Designation is a formal recognition for a hospital's maternal care capabilities and commitment to excellence that exceed minimum hospital licensure requirements.
- The hospital's commitment is evaluated through compliance with the Texas Administrative Code (TAC) requirements.
- The Quality Assurance and Performance Improvement process is essential in the designation program to ensure patients receive appropriate and quality care during their stay in the hospital.
- Peer Review process utilized to evaluate appropriate care and patient outcomes.

Perinatal Designation Program Today

- Facilities Surveyed for Maternal Designation 23 Total
 - Level IV 13
 - Level III 4
 - Level II 2

Applications Received – 10

Neonatal Designations – 233 Total

Level IV - 20

Level III - 56

Level II - 75

Level I - 82

The Perinatal Advisory Council (PAC)

- Established in 2013 by HB 15 of the 83rd Texas Legislature
- Charged with providing clinical recommendations to DSHS → fold them into required rules template
 - detailed for both Neonatal levels of care and for Maternal levels of care
 - both rules have been adopted now and the PAC (Sunset 2025) will focus on
 - best practices
 - trends in neonatal and maternal results post implementation of the new hospital designation programs.
- Maternal levels of care designation rule effective March 1, 2018; designation for maternal level of care is an eligibility requirement for Medicaid reimbursement beginning September 1, 2020

Perinatal Advisory Council

Completed tasks

- develop and recommend criteria for designating levels of neonatal and maternal care, respectively, including specifying the minimum requirements to qualify for each level designation;
- develop and recommend a process for the assignment of levels of care to a hospital for neonatal and maternal care, respectively;
- make recommendations for the division of the state into neonatal and maternal care regions; Completed, however DSHS made final decision to use the infrastructure already in place for the RACs that support Trauma and EMS

Focus for future PAC meetings

- examine utilization trends relating to neonatal and maternal care;
- make recommendations related to improving neonatal and maternal outcomes.

PAC - Role of the Family Physician

- Wide knowledge base allows for comprehensive care with low and moderate risk patients
- May serve as the Maternal Medical Director for Level I or Level II facilities
- May serve as the Primary Provider caring for the obstetric patient
- Must be available to attend all deliveries or other obstetrical emergencies at Level I or Level II facilities

Perinatal Advisory Council

- Stakeholders are able to voice concerns at the Council meetings
 - Rural facility representatives
 - Underserved populations
- Improved awareness of unintended consequences



Survey Process: Generic

- Level 1 = self-assessment and affidavit required
- Level 2 and Level 3 = survey by 1 OB/GYN physician and 1 maternal nurse
- Level 4 = survey by 1 MFM physician, 1 OB/GYN physician and 1 maternal nurse
- Survey generally lasts 1.5 to 2 days

Neonatal and Maternity Designations

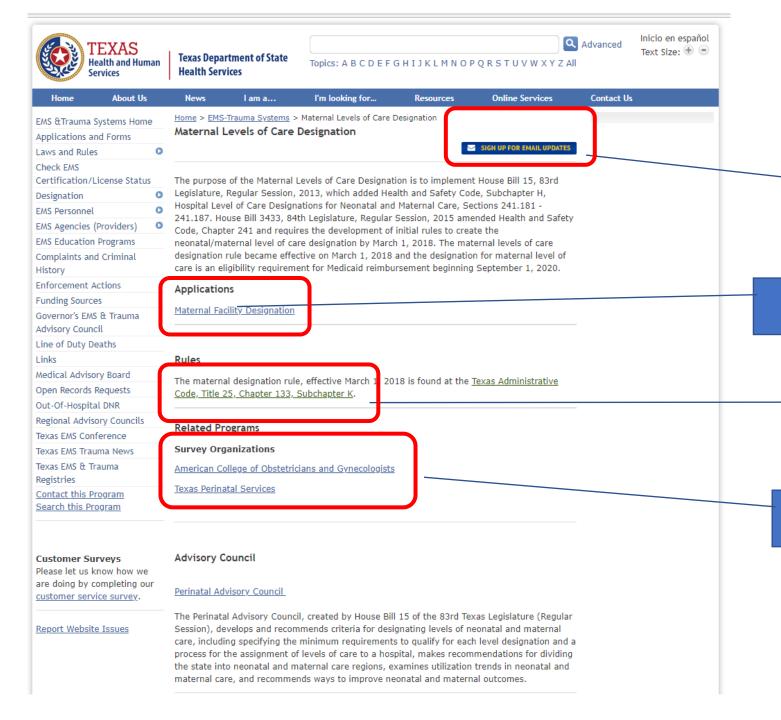
Legislation signed into law in 2013 and 2015:

Each hospital that provides neonatal and/or maternity care will need to undergo state designation process to receive Medicaid funds

- Neonatal designation: by September 1, 2018
- Maternal designation: by September 1, 2020

More Information on the Texas state website:

https://www.dshs.texas.gov/emstraumasystems/maternal.aspx



State Website

Sign up for email updates

Print out application to the State

Texas Admin Code for Maternal Designation

Survey Organizations

Maternal Levels of Care Designation

Resource Documents

These tools may be used to evaluate your facilities compliance with the Maternal Level of Care that you will be applying for.

The complete self-assessment tool for Level I facilities with the specific documents to be submitted in the application packet will be posted on **June 1, 2018** with the application for designation.

Level I Maternal – Self-Assessment Level II Maternal – Self-Assessment Level III Maternal – Self-Assessment Level IV Maternal – Self-Assessment Obstetric Care Consensus

Provider training webmars. Introduction and review of the new requirements. Recordings of the training are listed below. Each link will take you to a page where you must enter your name and email address to access the video. **Webinar recordings:**

Level I Designation – March 22, 2018 Level II Designation – March 27, 2018 Level III Designation – March 28, 2018 Level IV Designation – March 29, 2018

PowerPoint presentations from webinars:

Level I PowerPoint presentation
Level II PowerPoint presentation
Level III PowerPoint presentation
Level IV PowerPoint presentation

Print out Self Assessment Forms & ACOG Obstetric Consensus Document

Watch State Webinars & PowerPoints and take notes

Contact Us

Email: DSHS.EMS-TRAUMA@dshs.texas.gov

Staff Contacts

For technical assistance, call or email the Perinatal Program Specialist:

Shyriece Norris- (512) 231-5748 Shyriece.Norris@dshs.texas.gov

For process or rule clarification, please contact the following:

Designation Program Manager

Elizabeth Stevenson, RN - (512) 834-6794 elizabeth.stevenson@dshs.texas.gov Texas DSHS Contact Info: Email if questions

Format of Site Visit

- Schedule through survey organization
- Generally takes about 3-4 months of preparation time
- DAY 1:
 - Introductions
 - Chart Audit, review policies, review credentials, documentation
 - Meet hospital leaders (dinner or breakfast meeting)
- DAY 2:
 - Interviews with various department and hospital leaders and staff
 - Tour of facility
 - Debrief

Remember: This is Verification

- Verification means that the hospital must provide documentation or evidence of compliance with rules
- It is not the "job" of the surveyors to have to dig through and find compliance, but the hospital's job to provide evidence (Jane Guerrero & Elizabeth Stevenson)
- How do surveyors verify?
 - Chart Audit
 - Documentation (meeting minutes, roster sign-in's, files)
 - Interviews with staff (not leaders)
 - Tour by direct visualization

The Chart Audit

- Have one computer station for each surveyor and at least one navigator per station
 - Make sure your navigators KNOW how to maneuver around chart, and what type of documentation is desired (what doctors want AND what nurses want)

- Have ancillary documentation handy
 - Policies and Guidelines
 - Quality Meetings relevant to patient
 - Changes in policy based on that patient event
 - Fetal heart rate tracing



Your Providers and Staff

- Be prepared to show your that your physicians, nurses, and other personnel meet qualifications
 - Scope of services (critical care for Level III, IV)
- All leaders have qualifications
 - Mat Medical Director, Mat Program Manager
 - Dir of Anesthesia
 - Level III/IV others (MFM Dir, Critical Care Team Dir, Transport Dir)
- Physicians have continuing education in OB including complex situations
- Staff competencies
- Team training: sign-in's and logs?



Coordination

- Make sure the other services in your hospital aware of your goals
- Coordination of care
- How do medical & nursing services from other areas coordinate with OB physician/nurses?
- Collaboration (especially in ICU)
- Are policies "maternal specific"?
 - Example: disaster response, resuscitation

COORDINATION



Questions?

