Responding to a Public Health Concern

In 2010, Texas’ maternal mortality rate – 18.8 percent – already was on the high side among states nationwide. But alarmingly, from 2010-2012, data showed the maternal death rate had doubled. After further in-depth review of the data, the maternal death rate was lowered to 14.6 out of 100,000 cases. While that was good news, the numbers still were disturbingly high.

The public health concern wasn’t specific to Texas, but the sudden increase here quickly got the attention of providers, the public and the Texas Legislature. In 2013, the Legislature went into action, forming a Maternal Mortality Task Force and a Perinatal Advisory Council. These groups were tasked with reviewing maternal morbidity/mortality trends and data; developing criteria for both neonatal and maternal levels of designation; establishing perinatal care regions to encourage regional coordination of care; and recommending best practices to improve outcomes.

Levels of Care Designations Launch

The criteria for neonatal levels of care designation became effective first, and hospitals seeking that designation already have completed their first designation cycle. Quickly on its heels, the state went to work on finalizing maternal care designation rules. Those became effective March 2018.

We’ve had more time to roll out the maternal process, whereas the neonatal process was much tighter. Hospitals have until Aug. 31, 2021, to apply for maternal designation.

What Level 1 Hospitals Need to Know

The maternal levels of care designation rules are outlined in the Texas Administrative Code 133.201-133.210. The state defines a Level 1 Maternal Designated Facility as one that provides care for pregnant and postpartum patients who are generally healthy and don’t present a significant maternal morbidity or mortality risk. The hospital must also follow rules related to having skilled personnel with documented training.

Unlike hospitals seeking higher-level designations, hospitals seeking Level 1 designation are not required to have a third-party survey conducted. Rather, they may submit a self-survey to demonstrate compliance. In addition, Level 1 hospital designation applications to the Department of State Health Services must include a letter of participation from its Perinatal Care Region, and a plan of correction if the facility has potential deficiencies. The application must include a written plan of the maternal program that with details on scope of services, the maternal patient population to be treated, consistent with accepted standards of practice and ensuring the patient’s health and safety.

What Level 2 Hospitals Need to Know

According to the state’s definition, a Level 2 Maternal Designated Facility provides care for pregnant and postpartum patients with low to moderate risk. Unlike Level 1s, Level 2 facilities must be surveyed by an approved third-party organization such as TETAF and evaluated for compliance and non-compliance with the rule. They too must include a detailed plan of care as well as a plan of correction for any potential deficiencies, along with other application requirements.
Meeting the Timelines
To receive Medicaid reimbursement, hospitals must receive maternal care designation from DSHS by Aug. 31, 2021. That is a one-year extension from the state’s original deadline, as a result of the recently passed Senate Bill 749. TETAF was actively involved in legislative discussions on that bill, recognizing the importance of avoiding the burdens that hospitals incurred following the rapidly implemented neonatal levels of care. The good news is the legislation allows hospitals to pursue designation well in advance of the new deadlines.

It’s important to use this time to hospitals’ advantage to refine and improve their programs and be fully prepared to meet the designation rules. The additional time allows a better focus on patient care and improved maternal care delivery for Texas mothers and babies. It also gives hospitals time to complete their surveys – whether self-surveying Level 1s, or third-party Level 2 surveys – to avoid the last-minute crunch of application submissions and processing at DSHS, resulting in potential designation delays, as experienced with the neonatal survey deadlines.

Get Informed, Stay Informed
One of the great benefits of the maternal levels of care designation process is the sharing of knowledge and best practices identified through the survey process. Webinars, user forums and online resources are providing critical value in program development, leading to improved patient outcomes. In coordination with TORCH, we are hosting a two-part webinar series, July 8 and 26, specifically for Level 1 and Level 2 TORCH member facilities. We’ll go into more depth about the specific requirements and process for seeking each of those level designations. Watch your TORCHCast emails for registration details, and visit our website at texasperinatalservices.org for great resources to help guide your hospital through this journey.

About the author: Carla Rider is Director of Perinatal Services for TETAF/Texas Perinatal Services. She has more than 25 years’ experience in women’s and children’s nursing including Level II and III NICUs, maternal care and pediatrics. Contact her at crider@tetaf.org.