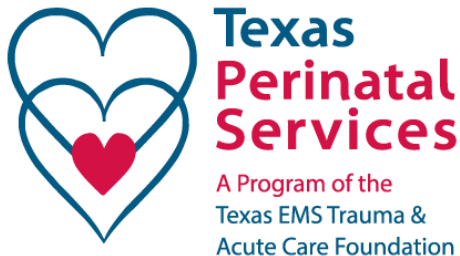


Choosing your Designation Level

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Texas Administrative Code

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





Texas Administrative Code – Rule § 133.203

Determine the level of care





LEVEL I

Basic Care

The Level I maternal designated facility will:

(A) provide care for pregnant and postpartum patients who are ***generally healthy***, and ***do not*** have medical, surgical, or obstetrical conditions that ***present a significant risk*** of maternal morbidity or mortality; and





LEVEL II

Specialty Care

The Level II maternal designated facility will:

(A) provide care for pregnant and postpartum patients with medical, surgical, and/or obstetrical conditions that present a ***low to moderate*** risk of maternal morbidity or mortality; and





LEVEL III

Subspecialty Care

The Level III maternal designated facility will:

(A) provide care for pregnant and postpartum patients with ***low risk conditions to significant complex*** medical, surgical and/or obstetrical conditions that present ***a high risk*** of maternal morbidity or mortality;

And, additional criteria outlined in Rule § 133.203





LEVEL IV

Comprehensive Care

The Level IV maternal designated facility will:

(A) provide comprehensive care for pregnant and postpartum patients with ***low risk conditions to the most complex*** medical, surgical and/or obstetrical conditions and their fetuses, that present a ***high risk*** of maternal morbidity or mortality;

And, additional criteria outlined in Rule § 133.203



Frequently Asked Questions to Texas DSHS

Level of Maternal Care



Texas Perinatal Services

EDUCATION : INFORMATION : SURVEYS

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HOSPITALS ASK:

Does the state office have a list of diagnosis for specific levels of care for the maternal patient population? Or an exclusion or inclusion list of maternal patients/diagnosis by level of facility available to use as a guide?




DSHS ANSWERS:

The facility may refer to the Consensus of Care document from ACOG for a general description of patient types.



HOSPITALS ASK:

In the neonatal rules, there were definitive patients, such as surgical and gestation, that helped to define where patients were to be cared for. In the maternal rules, there is room for interpretation. For example: Will all hypertensive patients be required to be cared for in Level II and above facilities due to this being ‘medical, surgical, or obstetrical conditions that present a significant risk of maternal morbidity or mortality’?




DSHS ANSWERS:

The determination of what patients will be treated at a hospital will be made by the practicing physician which is a medical decision. Our office does not regulate medical practice.



HOSPITALS ASK:

What will be the expectations for the written protocol addressing when each level should stabilize and transfer (#13; Rule 133.206, #15; Rule 133.207, #21; Rule 133.208)?
And, what is the recommendation from the state office on how facilities can define the appropriate place for patients to receive pregnancy related care?



DSHS ANSWERS:

The facility and the physicians providing maternal care will define what patient population they are capable of providing care for.

The American College of Obstetrics and Gynecologists
Women's Health Care Physicians
Society for Maternal Fetal Medicine

OBSTETRIC CARE CONSENSUS

Number 2 • February 2015

Levels of Maternal Care

This document was developed jointly by the American College of Obstetricians and Gynecologists and the Society for Maternal-Fetal Medicine with the assistance of M. Kathryn Menard, MD, MPH; Sarah Kilpatrick, MD, PhD; George Saade, MD; Lisa M. Hollier, MD, MPH; Gerald F. Joseph Jr, MD; Wanda Barfield MD; William

Abstract: In the 1970s, studies demonstrated that timely access to risk-appropriate neonatal and obstetric care could reduce perinatal mortality. Since the publication of the *Toward Improving the Outcome of Pregnancy* report, more than three decades ago, the conceptual framework of regionalization of care of the woman and the newborn has been gradually separated with recent focus almost entirely on the newborn. In this current document, maternal care refers to all aspects of antepartum, intrapartum, and postpartum care of the pregnant woman. The proposed classification system for levels of maternal care pertains to birth centers, basic care (level I), specialty care (level II), subspecialty care (level III), and regional perinatal health care centers (level IV). The goal of regionalized maternal care is for pregnant women at high risk to receive care in facilities that are prepared to provide the required level of specialized care, thereby reducing maternal morbidity and mortality in the United States.



Examples of Appropriate Patients

(not requirements)

Birth Center – Term, singleton, vertex presentation

Level 1 (Basic Care) – Any patient appropriate for a birth center, plus capable of managing higher-risk conditions such as

- term twin gestation
- trial of labor after cesarean delivery
- uncomplicated cesarean delivery
- preeclampsia without severe features at term



Examples of Appropriate Patients

(not requirements)

Level II (Specialty Care)

Any patient appropriate for level 1 care, plus higher-risk conditions such as:

- severe preeclampsia
- placenta previa with no prior uterine surgery



Examples of Appropriate Patients

(not requirements)

Level III (Subspecialty Care)

Any patient appropriate for level II care, plus higher-risk conditions such as:

- suspected placenta accreta or placenta previa with prior uterine surgery
- suspected placenta percreta
- adult respiratory syndrome
- expectant management of early severe preeclampsia at less than 34 weeks of gestation



Examples of Appropriate Patients

(not requirements)

Level IV (Comprehensive Care)

Any patient appropriate for level III care, plus higher-risk conditions such as:

- severe maternal cardiac conditions
- severe pulmonary hypertension or liver failure
- pregnant women requiring neurosurgery or cardiac surgery
- pregnant women in unstable conditions and in need of an organ transplant



TETAF has launched Maternal Care Survey Services!

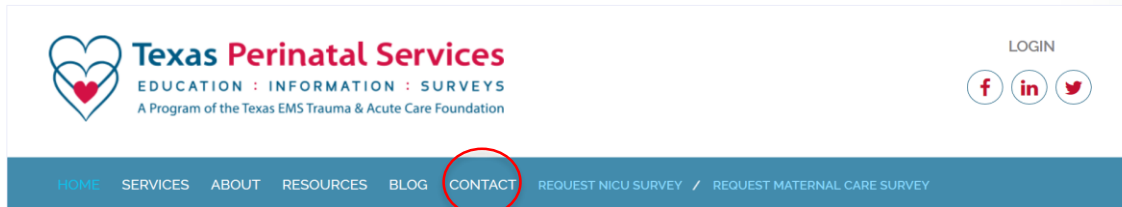
To request a survey or for information go to
<http://texasperinatalervices.org/>



Ask us a question!

Use the Texas Perinatal Services website to contact us for verification survey services or to ask a question about program development.

texasperinatalservices.org



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