

LEVELS I TO IV MATERNAL CARE FACILITIES

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House Bill 5172 (H-1) as reported from committee

Sponsor: Rep. Carol Glanville

Committee: Health Policy

Complete to 6-26-24

Analysis available at
<http://www.legislature.mi.gov>

SUMMARY:

House Bill 5172 would amend the Public Health Code to require the Department of Health and Human Services (DHHS), upon appropriation, to implement a program to register the confirmed verification of a hospital that provides maternal care (called a perinatal facility in the bill) as a Level I, II, III, or IV maternal care facility. Level I would provide basic maternal care, and Level IV would provide the most advanced care involving the most complex maternal conditions. DHHS would have to establish criteria for a hospital to report to its confirmed verification as a Level I, II, III, or IV maternal care facility.

Under the program, a hospital could register its confirmed verification as a Level I, II, III, or IV maternal care facility with DHHS in manner required by DHHS, and DHHS would have to register the hospital if it demonstrates that it meets the verification program criteria. DHHS would have to publish on its website and annually update a list of each hospital's confirmed maternal level of care. The level of care of a hospital would not be listed on the website registry if DHHS does not receive the verification required by the program. Hospitals would not have to register under the program, but only hospitals with a verified maternal level of care could describe themselves as holding a verification as a Level I, II, III, or IV maternal care facility or as providing Level I, II, III, or IV maternal care.

In developing criteria for the program, DHHS would have to consult with recognized entities involved in providing hospital maternal care services, including at least the following:

- Michigan Perinatal Quality Collaborative.
- Michigan Health and Hospital Association.
- Michigan Council for Maternal and Child Health
- American College of Obstetricians and Gynecologists.
- American College of Nurse Midwives.

In establishing criteria for recognition as a Level I, II, III, or IV maternal care facility, DHHS would have to enter into a partnership with both of the following:

- The maternal levels of care verification program established by the Joint Commission.¹
- The maternal care obstetric care consensus established by the American College of Obstetricians and Gynecologists.²

¹ <https://www.jointcommission.org/what-we-offer/verification/maternal-levels-of-care-verification/>

² <https://www.acog.org/clinical/clinical-guidance/obstetric-care-consensus/articles/2019/08/levels-of-maternal-care>

In addition, subject to appropriation, DHHS could provide an incentive payment to a hospital for achievement of a maternal level of care verification. The criteria for an incentive payment could include any of the following:

- A tool and self-assessment DHHS determines appropriate to report the confirmed facility's maternal level of care.
- Data collection and reporting.
- Patient volume.
- Practice guidelines.
- Coordination with and the referral of a patient between facilities.
- Implementing safety bundles.

Finally, DHHS could provide on-site technical assistance to a perinatal facility.

Proposed MCL 333.9129

FISCAL IMPACT:

House Bill 5172 would increase state expenditures to the Department of Health and Human Services by an indeterminate amount. The fiscal impact would be dependent on the cost of the creation, implementation, and management of criteria to register a facility's confirmed verification as a level I, II, III, or IV maternal care facility, as well as the amount of incentive payments awarded to hospitals that achieve verification. The fiscal impact on local units of government would be dependent on whether the facility seeking to register as a level I, II, III, or IV maternal care facility is county operated. Increased expenditures may be the result of the cost of adopting required criteria.

POSITIONS:

Representatives of the following entities testified in support of the bill (10-19-23):

- American College of Obstetricians and Gynecologists
- Michigan Council for Maternal and Child Health

The following entities indicated support for the bill (11-2-23):

- Michigan Organization on Adolescent Sexual Health
- Nurse Family Partnership
- American College of Nurse-Midwives, Michigan Affiliate
- Michigan Health and Hospital Association

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.