

## LEVEL I TO IV MATERNAL CARE FACILITIES

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**House Bill 5172 (H-2) as passed by the House**  
**Sponsor: Rep. Carol Glanville**  
**Committee: Health Policy**  
**Complete to 6-27-24**

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 establish and implement a program to register a hospital that provides maternal care (called in the bill a *perinatal facility*) as a Level I, II, III, or IV maternal care facility if the hospital demonstrates that it holds a verification at the applicable level from the Joint Commission<sup>1</sup> or an equivalent organization, as determined by DHHS. (Level I would provide basic maternal care, and Level IV would provide the most advanced care involving the most complex maternal conditions.)

Under the program, a hospital could report its verification as a Level I, II, III, or IV maternal care facility to DHHS once every three years. DHHS would have to establish procedures for a hospital to report its verification, publish on its website a list of each hospital it has registered, and update the list within 30 days after registering a hospital. The list would have to include the hospital's name and its confirmed level of maternal care. It could not include hospitals not registered under the program.

In developing procedures for reporting a verification, DHHS would have to consult with recognized entities involved in 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.

DHHS would have to enter into a partnership with the following for purposes of the program:

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

In addition, subject to appropriation, DHHS could provide an incentive payment to a hospital that registers under the program. DHHS would have to consider all of the following criteria for the award of an incentive payment:

- The hospital's data collection and reporting.
- The hospital's patient volume.
- The hospital's practice guidelines.

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

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

- The hospital's coordination with, and referral of a patient to and from, other facilities.
- The hospital's implementing safety bundles.

Finally, DHHS could provide on-site technical assistance to a hospital seeking a verification or to register as described above.

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 a program 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 register with DHHS. 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):

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

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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.