

ASSEMBLY, No. 5636

STATE OF NEW JERSEY 220th LEGISLATURE

INTRODUCED JUNE 20, 2023

Sponsored by:

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District 15 (Hunterdon and Mercer)

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SYNOPSIS

Requires DOH to establish levels of maternity care at maternity care facilities.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/20/2023)

1 AN ACT concerning maternity care and supplementing Title 26 of
2 the Revised Statutes.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

6

7 1. As used in this act:

8 “Antepartum” means the time period before childbirth.

9 “Intrapartum” means the time period spanning childbirth, from
10 the onset of labor through delivery of the placenta.

11 “Maternity care facility” means a hospital that provides inpatient
12 maternity services or a birthing center licensed in the State pursuant
13 to P.L.1971, c.136 (C.26:2H-1 et seq.)

14 “Postpartum” means the time period following childbirth, up to
15 one year after childbirth.

16

17 2. a. The Department of Health shall develop a formal,
18 regionalized maternity care classification system that defines the
19 collaborative roles of, and relationships between, all maternity care
20 facilities in the State based on the level of maternity care provided
21 to the patients of such facilities. The purpose of the classification
22 system shall be to ensure the provision of care to pregnant,
23 antepartum, intrapartum, and postpartum patients in the State along
24 an integrated continuum of clinical and social risk-informed care
25 with the goal of reducing the number of adverse maternity care
26 experiences and outcomes and addressing obstetric inequities as a
27 result of preventable safety and quality violations.

28 b. The levels of maternity care classification system developed
29 pursuant to this section shall be based on the guidelines established
30 pursuant to the American College of Obstetricians and
31 Gynecologists 2023 Obstetric Care Consensus on Levels of
32 Maternity Care and the specific needs and priorities of pregnant,
33 antepartum, intrapartum, and postpartum patients in accordance
34 with the following criteria:

35 (1) A maternity care facility classified as an accredited birthing
36 center shall be authorized to provide basic maternity care services
37 to patients having a normal to low-risk pregnancy who are expected
38 to have an uncomplicated birth.

39 (2) A maternity care facility classified as a Level I basic
40 maternity care hospital shall be authorized to provide basic
41 maternity care services to patients having a low to moderate-risk
42 pregnancy which care may include, but not be limited to, the
43 detection, stabilization, and management of unanticipated maternal-
44 fetal or neonatal conditions that occur during the antepartum,
45 intrapartum, or postpartum period until the patient can be
46 transferred to a specialty maternity care hospital or birthing center.

47 (3) A maternity care facility classified as a Level II specialty
48 maternity care hospital shall be authorized to provide Level I basic

1 maternity care as outlined in paragraph (2) of this subsection and
2 specialty maternity care services to patients who have been assessed
3 as meeting criteria for moderate to high-risk antepartum,
4 intrapartum, or postpartum care.

5 (4) A maternity care facility classified as a Level III subspecialty
6 maternity care hospital shall be authorized to provide Level II
7 specialty care as outlined in paragraph (3) of this subsection and
8 subspecialty maternity care to patients having more complex
9 maternal medical conditions, obstetric complications, and fetal
10 disorders that occur during the antepartum, intrapartum, or
11 postpartum period.

12 (5) A maternity care facility classified as a Level IV regional
13 perinatal health care center shall be authorized to provide Level III
14 subspecialty maternity care as outlined in paragraph (4) of this
15 subsection, perinatal care, and on-site medical and surgical care of
16 the most complex maternal conditions, of critically ill pregnant
17 patients, and of critically ill newborns during the antepartum,
18 intrapartum, or postpartum period.

19 c. Under the maternity care classification system developed
20 pursuant to this section, the physical facility requirements of, and
21 the standards for the hiring, credentialing, and training of
22 professional staff at:

23 (1) accredited birthing centers shall comply with the standards
24 for accreditation set forth by the American Association of Birth
25 Centers Standards for Birth Centers; and

26 (2) maternity care hospitals classified as Level I basic, Level II
27 specialty, and Level III subspecialty maternity care hospitals, and
28 Level IV regional perinatal health care centers shall comply with
29 the guidelines established pursuant to the American College of
30 Obstetricians and Gynecologists 2023 Obstetric Care Consensus on
31 Levels of Maternity Care.

32 d. In developing the levels of maternity care classification
33 system pursuant to this section, the department shall:

34 (1) introduce uniform designations for levels of maternity care
35 that are complimentary but distinct from the levels of neonatal care;

36 (2) designate and delineate any county, zip code, or group of zip
37 codes in the State as a prospective service region for a maternity
38 care hospital classified as a regional perinatal health care center
39 pursuant to paragraph (5) of subsection b. of this section;

40 (3) establish uniform criteria for the designation of maternity
41 care facilities that are integrated with existing State, county, and
42 local emergency response systems to help ensure that the
43 appropriate personnel, physical space, equipment, training,
44 technology, and resources are available to achieve optimal
45 outcomes and equitable experiences when providing clinical and
46 social risk-informed maternity care;

47 (4) require that maternity care facilities maintain pregnant,
48 antepartum, intrapartum, and postpartum patient transfer criteria,

1 transfer agreements, and admission protocols, which criteria,
2 agreements, and protocols shall provide for the effective and
3 efficient transfer and admission of such patients between maternity
4 care facilities classified as accredited birthing centers, Level I basic,
5 Level II specialty, and Level III subspecialty maternity care
6 hospitals, and Level IV regional perinatal health care centers;

7 (5) require maternity care facilities classified as accredited
8 birthing centers and maternity care hospitals classified as Level I
9 basic, Level II specialty, and Level III subspecialty maternity care
10 hospitals, and Level IV regional perinatal health care centers to
11 enter into a written agreement with the department to participate in
12 the Maternal Data Center pursuant to section 14 of P.L.2019, c.75
13 (C.26:6C-14) in order for the department to:

14 (a) analyze the data collected from the Maternal Data Center to
15 assess the efficacy of the levels of maternity care classification
16 system in reducing the rates of maternal morbidity and mortality
17 and maternal health inequities; and

18 (b) achieve continuous quality improvement in patient safety
19 achieved through, and the quality of care provided under, the levels
20 of maternity care classification system;

21 (6) establish a multi-disciplinary, multigenerational, multiracial,
22 and multicultural team with expertise in clinical and social risk-
23 informed maternity care to study actions that can be undertaken by
24 the department to adopt the classification system for levels of
25 maternity care at all maternity care facilities; and

26 (7) establish a public awareness campaign, in collaboration with
27 community-based organizations that provide services to
28 communities most unfairly and disproportionately impacted by
29 maternal morbidity, maternal mortality, and maternal health
30 inequities, to inform the general public about the levels of maternity
31 care classification system and the importance of the system in
32 improving prenatal care and maternal health throughout the State.

33

34 3. a. The Department of Health shall designate maternity care
35 facilities that meet the criteria set forth in subsection b. of section 1
36 of this act as accredited birthing centers, Level I basic, Level II
37 specialty, Level III subspecialty, or Level IV regional perinatal
38 health care centers.

39 b. Each maternity care facility shall apply to the department, on
40 a form and in a manner approved by the department, for designation
41 under the levels of maternity care classification system developed
42 pursuant to section 2 of this act and shall demonstrate the ability to
43 consistently provide the level of care associated with the facility's
44 designation under the classification system. A maternity care
45 facility, may, at any time, apply to the department for re-
46 designation at a different classification level, which application
47 shall be approved if the maternity care facility meets the
48 requirements for classification at the new classification level.

1 c. The department shall designate as many maternity care
2 facilities as accredited birthing centers, Level I basic, Level II
3 specialty, Level III subspecialty, and Level IV regional perinatal
4 health care centers as apply pursuant to subsection b. of this section
5 and as meet the requirements for that classification.

6 d. The department may suspend or revoke a maternal care
7 facility's designation as an accredited birthing center, Level I basic,
8 Level II specialty, Level III subspecialty, or Level IV regional
9 perinatal health care center, after notice and hearing, if the
10 department determines that the facility is not in compliance with the
11 requirements of this act.

12 e. The department shall prepare, maintain, and make available
13 on the department's website a list of maternity care facilities
14 designated accredited birthing centers, Level I basic, Level II
15 specialty, Level III subspecialty, or Level IV regional perinatal
16 health care centers. The department shall update the list whenever
17 the department newly designates a maternity care facility as an
18 accredited birthing center, Level I basic, Level II specialty, Level
19 III subspecialty, or Level IV regional perinatal health care center, as
20 well as whenever the department approves a change in classification
21 to a maternity care facility's classification level.

22
23 4. The Department of Health shall adopt rules and regulations,
24 pursuant to the "Administrative Procedure Act," P.L.1968, c.410
25 (C.52:14B-1 et seq.), as may be necessary to implement the
26 provisions of this act.

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28 5. This act shall take effect on the first day of the sixth month
29 next following the date of enactment, except that the Commissioner
30 of Health may take any anticipatory administrative action in
31 advance as shall be necessary for the implementation of this act.

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STATEMENT

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36 This bill requires the Department of Health (DOH) to develop a
37 formal, regionalized classification system that defines the roles of
38 all State maternity care facilities based on the level of maternity
39 care provided to the patients of such facilities, to ensure the
40 provision of care to pregnant, antepartum, intrapartum, and
41 postpartum patients in the State along an integrated continuum of
42 care, and to reduce the number of adverse maternity care
43 experiences and outcomes and address obstetric inequities. The
44 system, based on the specific needs and priorities of pregnant,
45 antepartum, intrapartum, and postpartum patients, would designate
46 maternity care facilities as accredited birthing centers, Level I basic,
47 Level II specialty, Level III subspecialty, or Level IV regional

1 perinatal health care centers in accordance with criteria outlined in
2 the bill.

3 In developing the classification system, the DOH is to: (1)
4 introduce uniform designations for levels of maternity care
5 complimentary to, but distinct from, the levels of neonatal care; (2)
6 designate a prospective service region for a regional perinatal health
7 care center; (3) establish uniform criteria for the designation of
8 maternity care facilities integrated with emergency response
9 systems; (4) require that accredited birthing centers, Level I basic,
10 Level II specialty, Level III subspecialty maternity care hospitals,
11 and Level IV regional perinatal care centers maintain patient and
12 newborn transfer criteria, transfer agreements, and admission
13 protocols governing transfers between such birthing centers and
14 hospitals; (5) require accredited birthing centers, Level I basic,
15 Level II specialty, Level III subspecialty, and Level IV regional
16 perinatal health care centers to participate in the Maternal Data
17 Center; (6) establish an multi-disciplinary team to study actions that
18 the DOH may take to adopt the levels of maternity care at all
19 maternity care facilities; (7) establish a public awareness campaign
20 to inform the public about the classification system; and (8) develop
21 policies and procedures allowing patients receiving services at
22 accredited birthing centers, Level I basic, Level II specialty, Level
23 III subspecialty, and Level IV regional perinatal health care centers
24 to pursue legal recourse against such birthing centers and hospitals
25 based on acts of obstetric violence or obstetric racism.

26 The DOH is to designate as many maternity care facilities as
27 accredited birthing centers, Level I basic, Level II specialty, Level
28 III subspecialty, and Level IV regional perinatal health care centers
29 as apply for designation and demonstrate the ability to provide the
30 level of care associated with the designation, and may revoke or
31 suspend such designation if the requirements of the bill are not met.
32 The DOH is also required to prepare, maintain, make available on
33 its website, and update as necessary, a list of accredited birthing
34 centers, Level I basic, Level II specialty, Level III subspecialty, and
35 Level IV regional perinatal health care centers.