**Section 1110.930 Neonatal Intensive Care – Review Criterion**

a) Staffing – Review Criterion

1) The applicant must document that the personnel possessing proper credentials in the following categories are available to staff the service:

A) Full-time Neonatal Director – a neonatologist as defined in Section 1110.920.

B) Full-time Subspecialty Obstetrical Director – an obstetrician certified by the American Board of Obstetrics and Gynecology in the subspecialty of Maternal and Fetal Medicine or a licensed osteopathic physician with equivalent training and experience and certified by the American Osteopathic Board of Obstetricians and Gynecologists.

C) Other neonatologists and obstetricians sufficient in number to serve the projected number of maternal and neonatal patients to be served by the facility and to ensure adequate back-up to the neonatal and obstetrical directors so that there will be continuity of patient care and consultation.

D) Full-time Nurse-Director of the obstetric-newborn nursing service who is experienced in perinatal nursing, and preferably holds a master's degree.

E) Other nurses adequate in number to serve the projected number of maternal and neonatal patients to be served by the facility.

F) Board-Certified Anesthesiologist with training in maternal, fetal and neonatal anesthesia (24-hour availability).

G) One or more licensed social workers.

H) Respiratory therapists with experience in neonatal care and adequate in number to ensure availability of a minimum of one respiratory therapist for every four patients on mechanical ventilators.

I) Registered dietician with experience in perinatal nutrition.

2) Documentation shall consist of:

A) letters of interest from potential employees;

B) applications filed with the applicant for a position;

C) signed contracts with required staff; or

D) a narrative explanation of how other positions will be filled.

b) Letter of Agreement – Review Criterion. The applicant must document that a letter of agreement with the regional perinatal center for neonatal intensive care services has been signed. Such letter of agreement must fulfill the conditions for such letters found in the Regionalized Perinatal Health Care Code (77 Ill. Adm. Code 640) and be approved by the Department of Human Services. A copy of the letter shall serve as documentation.

c) Need for Additional Beds – Review Criterion

1) The applicant must document that the proposed neonatal intensive care beds are needed. Bed need may be documented by any of the following:

A) no neonatal intensive care services exist within the planning area;

B) that for each of the last two years for which data is available, the yearly occupancy rate for the service at the affiliated perinatal center has exceeded the target occupancy rate;

C) existing providers of the service within the planning area cannot provide care to a patient caseload due to a limitation on funding for care providing; or

D) that for each of the last two years for which data is available, the yearly occupancy rate for the service at the applicant facility has exceeded the target occupancy rate.

d) Obstetric Service – Review Criterion. The applicant must document the availability within the facility of an obstetric service capable of providing care to high-risk mothers. Documentation must include a detailed assessment of obstetric service capability. This requirement does not apply to a facility dedicated to the care of children.

(Source: Amended at 23 Ill. Reg. 2987, effective March 15, 1999)