



Rep. Robyn Gabel

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10200HB3995ham002

LRB102 14648 CPF 25198 a

1 AMENDMENT TO HOUSE BILL 3995

2 AMENDMENT NO. _____. Amend House Bill 3995 by replacing
3 everything after the enacting clause with the following:

4 "Section 1. Short title. This Act may be cited as the Birth
5 Center Licensing Act.

6 Section 5. Definitions. In this Act:

7 "Birth center" means a designated site, other than a
8 hospital:

9 (1) in which births are planned to occur following a
10 normal, uncomplicated, and low-risk pregnancy;

11 (2) that is not the pregnant person's usual place of
12 residence;

13 (3) that is exclusively dedicated to serving the
14 childbirth-related needs of pregnant persons and their
15 newborns, and has no more than 10 beds;

16 (4) that offers prenatal care and community education

1 services and coordinates these services with other health
2 care services available in the community; and

3 (5) that does not provide general anesthesia or
4 surgery.

5 "Certified nurse midwife" means an advanced practice
6 registered nurse licensed in Illinois under the Nurse Practice
7 Act with full practice authority or who is delegated such
8 authority as part of a written collaborative agreement with a
9 physician who is associated with the birthing center or who
10 has privileges at a nearby birthing hospital.

11 "Department" means the Illinois Department of Public
12 Health.

13 "Hospital" does not include places where pregnant females
14 are received, cared for, or treated during delivery if it is in
15 a licensed birth center, nor include any facility required to
16 be licensed as a birth center.

17 "Physician" means a physician licensed to practice
18 medicine in all its branches in Illinois.

19 Section 10. License required. Except as provided by this
20 Act, no person shall open, manage, conduct, offer, maintain,
21 or advertise as a birth center without a valid license issued
22 by the Department. All birth centers in existence as of the
23 effective date of this Act shall obtain a valid license to
24 operate within 2 years after the adoption of rules by the
25 Department to implement this Act under Section 60.

1 Section 15. Issuance and renewal of license.

2 (a) An applicant for a license under this Act shall submit
3 an application on forms prescribed by the Department. Each
4 application shall be accompanied by a nonrefundable license
5 fee, as established by rule by the Department under Section
6 60.

7 (b) The Department may grant a temporary initial license
8 to an applicant. A temporary initial license expires on the
9 earlier of the date the Department denies the license or the
10 date 6 months after the temporary initial license was issued.

11 (c) The Department shall issue a license under this Act
12 if, after application, inspection, and investigation, it finds
13 the applicant meets the requirements of this Act and the rules
14 and standards adopted pursuant to this Act.

15 (d) A license is renewable every year upon submission of:
16 (i) the renewal application and fee and (ii) a report on a form
17 prescribed by the Department that includes information related
18 to quality of care at a birth center. The report must be in the
19 form and documented by evidence as required by the Department
20 by rule under Section 60.

21 Section 17. Certificate of need; licenses.

22 (a) A birth center shall obtain a certificate of need from
23 the Health Facilities and Services Review Board under the
24 Health Facilities Planning Act before receiving a license by

1 the Department under this Act.

2 (b) If, after obtaining an initial certificate of need
3 under subsection (a), a birth center seeks to increase the bed
4 capacity of the birth center, the birth center must obtain a
5 certificate of need from the Health Facilities and Services
6 Review Board before increasing the bed capacity.

7 (c) A birth center in a medically underserved area, as
8 determined by the U.S. Department of Health and Human
9 Services, shall receive priority in obtaining a certificate of
10 need under this Section.

11 Section 20. Linkages.

12 (a) A birth center shall link and integrate its services
13 with at least one birthing hospital with a minimum of a Level 1
14 perinatal designation.

15 (b) A birth center shall have an established agreement
16 with a nearby receiving birthing hospital with policies and
17 procedures for timely transfer of maternal and neonatal
18 patients. The agreement shall include a determination of
19 maternal and neonatal conditions necessitating consultation
20 and referral. This should include plans for communication with
21 the receiving hospital before and after transfer.

22 Section 25. Staffing.

23 (a) A birth center shall have a clinical director, who may
24 be:

1 (1) a physician who is either certified or eligible
2 for certification by the American College of Obstetricians
3 and Gynecologists or the American Board of Osteopathic
4 Obstetricians and Gynecologists or has hospital
5 obstetrical privileges; or

6 (2) a certified nurse midwife.

7 (b) The clinical director shall be responsible for:

8 (1) the development of policies and procedures for
9 services as provided by Department rules;

10 (2) coordinating the clinical staff and overall
11 provision of patient care;

12 (3) developing and approving policies defining the
13 criteria to determine which pregnancies are accepted as
14 normal, uncomplicated, and low-risk; and

15 (4) developing and approving policing regarding the
16 anesthesia services available at the center.

17 (c) An obstetrician, family practitioner, or certified
18 nurse midwife shall attend each person in labor from the time
19 of admission through birth and throughout the immediate
20 postpartum period. Attendance may be delegated only to another
21 physician or a certified nurse midwife.

22 (d) A second staff person shall be present at each birth
23 who:

24 (1) is licensed or certified in Illinois in a
25 health-related field and under the supervision of a
26 physician or a certified nurse midwife who is in

1 attendance;

2 (2) has specialized training in labor and delivery
3 techniques and care of newborns; and

4 (3) receives planned and ongoing training as needed to
5 perform assigned duties effectively.

6 Section 30. Minimum standards.

7 (a) The Department's rules adopted pursuant to Section 60
8 of this Act shall contain minimum standards to protect the
9 health and safety of a patient of a birth center. In adopting
10 rules for birth centers, the Department shall consider:

11 (1) the Commission for the Accreditation of Birth
12 Centers' Standards for Freestanding Birth Centers;

13 (2) the American Academy of Pediatrics and American
14 College of Obstetricians and Gynecologists Guidelines for
15 Perinatal Care; and

16 (3) the Regionalized Perinatal Health Care Code.

17 Section 35. Quality of care. The Department's rules shall
18 provide for a time period within which each birth center must
19 become accredited by either the Commission for the
20 Accreditation of Freestanding Birth Centers or The Joint
21 Commission.

22 A birth center shall implement a quality improvement
23 program consistent with the requirements of the accrediting
24 body and is encouraged to participate in quality improvement

1 projects implemented by the Department's Administrative
2 Perinatal Centers and other Department-supported perinatal
3 quality improvement projects. Clinicians, or their clinical
4 representative, attending persons in labor at the birth center
5 shall attend morbidity and mortality reviews that occur at the
6 receiving birthing hospital on their patients, when invited,
7 at a mutually agreeable time. This includes, but is not
8 limited to, maternal and neonatal patients transferred to the
9 receiving birthing hospital.

10 Section 40. Reimbursement requirements.

11 (a) A birth center shall seek certification under Titles
12 XVIII and XIX of the federal Social Security Act.

13 (b) Reimbursement rates set by the Department of
14 Healthcare and Family Services should be based on all types of
15 medically necessary covered services provided to both the
16 birthing person and the baby, including:

17 (1) a professional fee for both the birthing person
18 and baby;

19 (2) a facility fee for the birthing person that is no
20 less than 75% of the statewide average facility payment
21 rate made to a hospital for an uncomplicated vaginal
22 birth;

23 (3) a facility fee for the baby that is no less than
24 75% of the statewide average facility payment rate made to
25 a hospital for a normal baby; and

1 (4) additional fees for other services, medications,
2 laboratory tests, and supplies provided.

3 (c) A birth center shall provide charitable care
4 consistent with that provided by comparable health care
5 providers in the geographic area.

6 (d) A birth center may not discriminate against any
7 patient requiring treatment because of the source of payment
8 for services, including Medicare and Medicaid recipients.

9 Section 45. Reporting requirements. The Department shall
10 by rule require each birth center to report information every
11 year that is consistent with the birth center's license
12 renewal schedule, which the Department shall make publicly
13 available and which shall include the following:

14 (1) utilization data involving patient length of stay;

15 (2) admissions and discharges;

16 (3) complications;

17 (4) transfers;

18 (5) deaths;

19 (6) any other publicly reported data required under
20 the Consumer Guide to Health Care; and

21 (7) post-discharge patient status data where patients
22 are followed for 14 days after discharge from the birth
23 center to determine whether the mother or baby developed a
24 complication or infection.

1 Section 50. Training. A birth center shall, in
2 consultation with the clinical director, establish and
3 implement a policy to ensure appropriate training and
4 competency of individuals employed within the birth center.
5 The policy shall, at a minimum, define the acts and practices
6 that are allowed or prohibited for such employees, establish
7 how training will be conducted, and illustrate how initial
8 competency will be established.

9 Section 55. Inspections; special inspections; reports.

10 (a) The Department, whenever it determines necessary, may
11 conduct a special inspection, survey, or evaluation of a birth
12 center to assess compliance with licensure requirements and
13 standards or a plan of correction submitted as a result of
14 deficiencies cited by the Department or an accrediting body.

15 (b) Upon the Department's completion of any special
16 inspection, survey, or evaluation, the appropriate Department
17 personnel who conducted the special inspection, survey, or
18 evaluation shall submit a copy of his or her report to the
19 licensee upon exiting the birth center, and shall submit the
20 actual report to the appropriate regional office.

21 (c) The Department's report and any recommendation for
22 action under this Act shall be sent to the Department's
23 central office together with a plan of correction from the
24 birth center.

25 (d) The plan of correction may contain related comments or

1 documentation provided by the birth center that may refute
2 findings in the report, explain extenuating circumstances that
3 the birth center could not reasonably have prevented, or
4 indicate methods and timetables for correction of deficiencies
5 described in the report.

6 (e) A birth center has 10 days after the date of the
7 Department's special inspection, survey, or evaluation to
8 submit a plan of correction. The Department shall determine
9 whether a birth center is in violation of this Section no later
10 than 60 days after completion of each special inspection,
11 survey, evaluation, or plan of correction.

12 (f) The Department shall maintain all special inspection,
13 survey, or evaluation reports for at least 5 years in a manner
14 accessible to the public.

15 Section 60. Rules.

16 (a) The Department shall adopt rules for the
17 administration and enforcement of this Act.

18 (b) Rules adopted by the Department under this Act shall
19 stipulate:

20 (1) the eligibility criteria for birth center
21 admission that are consistent with accreditation standards
22 and the certified nurse midwife's or physician's scope of
23 practice;

24 (2) the necessary equipment for emergency care
25 according to the Commission for Accreditation of Birth

1 Centers' standards;

2 (3) the minimum elements required in the transfer
3 agreement between a birth center and a receiving birth
4 hospital with at least a Level 1 perinatal designation,
5 including the amount of travel time between facilities in
6 rural and nonrural areas, the staff required to transfer
7 patients, and the mode of emergency transportation between
8 facilities; and

9 (4) the equipment used by the birth center to ensure
10 that it is compatible with the health and safety of the
11 patients.

12 Section 99. Effective date. This Act takes effect upon
13 becoming law."