

2 Peachtree Street, NW, 15th Floor Atlanta, Georgia 30303-3142

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NOTICE OF ADOPTION OF REGULATIONS

Revisions to Chapter 511-5-13 "Designation of Perinatal Centers"

The Department of Public Health hereby adopts the amendments to Rule 511-5-13, "Designation of Perinatal Centers," as provided in the Notice of Proposed Rulemaking issued on May 12, 2022. This action is taken pursuant to the Department's authority under Georgia Code Sections 31-2A-6 and 31-2A-57.

In accordance with Georgia Code Section 31-5-1, the above-listed amendments will take effect on July 16, 2022.

This 16th day of June, 2022.

Kathleen E. Toomey, M.D., M.P.H.

Commissioner

Georgia Department of Public Health



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RESPONSE TO PUBLIC COMMENTS

Revisions to Chapter 511-5-13 "Designation of Perinatal Centers"

The Georgia Department of Public Health received three written comments to the invitation for public comments included in the Notice of Proposed Rulemaking issued on May 12, 2022. Each comment received was reviewed and considered by Department staff and the Commissioner of Public Health.

The Commissioner elected to adopt the rules as proposed on June 15, 2022, and the new rules will become effective on July 16, 2022.

Although the Department is not required to respond to public comments, a brief discussion of the issues presented is provided below.

Three written comments were received via email prior to the deadline of June 9, 2022, as follows:

- 1. Two commenters expressed support for the revised rules as written.
- 2. One commenter stated concern that the Joint Commission Maternal Levels of Care requirement that the center have an *anesthesiologist* readily available (Level II) and onsite (Levels III and IV) at all times rather than an *anesthesia provider* with the capability to administer labor analgesia and surgical analgesia could be a barrier for small and rural hospitals seeking the designation status. The commenter also expressed an opinion that Certified Registered Nurse Anesthetists (CRNAs) may lawfully perform these services under Georgia law and cited studies indicating CRNA anesthesia is safe for patients. The commenter requested removing the requirement for an anesthesiologist to be readily available and/or onsite at all times.

The Department appreciates the comments received. The Department recognizes that staffing shortages for anesthesiologists are impacting hospitals in Georgia and that CRNAs provide essential anesthesia services in many areas of our state. However, the Joint Commission criteria was developed in collaboration with the American College of Obstetricians and Gynecologists (ACOG) and includes comprehensive uniform definitions, a standardized description of maternity facility capabilities and personnel, and a framework for integrated systems that address maternal health needs. The Department maintains that the adoption of nationally recognized criteria for maternal center designations is an important step in reducing maternal mortality and morbidity.

RULES OF DEPARTMENT OF PUBLIC HEALTH

CHAPTER 511-5 HEALTH PROMOTION

511-5-13 DESIGNATION OF PERINATAL CENTERS

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- 511-5-13-.04 Designation Criteria for Maternal Centers
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Rule 511-5-13-.02 Definitions

- (1) "Designated facility" means a perinatal facility that has been inspected and approved by the Department pursuant to these regulations as meeting its established criteria for a particular maternal or neonatal level of care.
- (2) "Perinatal facility" means a hospital, clinic, or birthing center that provides maternal or neonatal health care services.

Authority: O.C.G.A. § 31-2A-50 through -57.

Rule 511-5-13-.04 Designation Criteria for Maternal Centers

A maternal center must meet all standards applicable to the relevant level of care established by The Joint Commission Maternal Levels of Care Verification Program as amended, restated, supplemented, or otherwise modified from time to time.

Authority: O.C.G.A. § 31-2A-50 through -57.

Rule 511-5-13-.05 Designation Criteria for Neonatal Centers

A neonatal center must meet all standards applicable to the relevant level of care established by the American Academy of Pediatrics Standards for Neonatal Levels of Care as amended, restated, supplemented, or otherwise modified from time to time.

Authority: O.C.G.A. § 31-2A-50 through -57.