

BIRTHING CENTERS

Exemption from Certificate of Need which requires approval from the West Virginia Health Care Authority.

Birthing centers, which meet the following criteria, will not be required to address the standards below.

West Virginia Code § 16-2D-11(b)(2) states:

- (A) A birthing center established by a nonprofit primary care center that has a community board and provides primary care services to people in their community without regard to ability to pay; or
- (B) A birthing center established by a nonprofit hospital with less than one hundred licensed acute care beds.
 - (i) To qualify for this exemption, an applicant shall be located in an area that is underserved with respect to low-risk obstetrical services; and
 - (ii) Provide a proposed health service area.

Those meeting the requirements of § 16-2D-11(c)(2) will be eligible for a special exemption from Certificate of Need (CON), which requires approval from the West Virginia Health Care Authority (Authority). An exemption application must be submitted in accordance with W. Va. C.S.R. § 65-29.

The exemption application is available on the Authority's webpage at: www.hca.wv.gov.

The following standard will apply to all birthing centers not exempted from review by W. Va. Code § 16-2D-11(b)(2), that are defined and licensed by the Office of Health Facility Licensure pursuant to 64 CFR 31 et seq. (1984). These standards shall not apply to any other obstetrical services except birthing centers.

All applications submitted to the Authority for CON approval for birthing centers not exempt from review shall be in compliance with the following standards.

I. DEFINITION

- A. Birthing Center: A birthing facility which provides professional care to

childbearing women during pregnancy, birth and immediately following childbirth, and, where low-risk deliveries are planned to occur away from the mother's usual residence following normal, uncomplicated pregnancy, with sufficient space to accommodate participating family members and support people of the women's choice: Provided, that a birthing facility shall not be considered a birthing center for purposes of these standards unless its policies and practices plan for the discharge of the mother and infant within 24 hours after birth. Provided further, that a facility that owns or operates on the premises medical equipment with a value in excess of the statutory threshold for major medical equipment for ambulatory care centers or performs surgical procedures other than those performed during a normal, uncomplicated childbirth and neonatal periods shall not be considered a birthing center within the meaning of this standard and shall be regulated by the agency in accordance with other applicable standards.

B. **Maternity Care Target Area (MCTA):** MCTAs are geographic areas within health professional shortage areas (HPSAs) that have a shortage of maternity care health professionals, for the purpose of providing maternity health care assistance to such health professional shortage areas.

C. **Underserved Service Area:** This definition applies to the need for maternity care. A geographic area which meets the WV Department of Health and Human Resources, Division of Primary Care in conjunction with a MCTA. A composite score of 25 among the six criteria indicates the greatest need:

- (1) Ratio of females ages 15-44-to-full time equivalent maternity care health professional ratio;
- (2) percentage of females 15-44 with income at or below 200 percent of the federal poverty level (FPL);
- (3) travel time and distance to the nearest provider trained and licensed to provide the necessary care;
- (4) fertility rate;
- (5) the Social Vulnerability Index (SVI); and
- (6) Maternal Health Index which contains the following six indicators: Pre-pregnancy obesity, pre-pregnancy diabetes, pre-pregnancy hypertension, prenatal care initiation in the first trimester, cigarette smoking, and the behavioral health factor. Each of these six criteria will be assigned a relative weight based on the significance of the criterion relative to all the others. definition of an area that is underserved with respect to low risk obstetrical services.

D. **Service Area:** Service areas of birthing centers shall be the areas of service approved by the WV Department of Health and Human Resources, Division of Primary Care and/or the WV Office of Rural Health.

II. CURRENT INVENTORY

The Authority shall provide the applicant with a current inventory of birthing centers.

III. NEED METHODOLOGY

A. Underserved Service Areas: Birthing centers applying for certificates of need shall have already satisfied the need requirement if the application establishes that the service area is located within a federally designated maternity care target area (MCTA). The agency shall not deny certificates of need to such centers based on need.

B. Non-underserved Service Areas: Birthing centers applying for certificates of need in non-underserved areas shall satisfy the need requirement if they demonstrate with specificity that there is sufficient need in the area for birthing center services to allow the proposed birthing center to maintain its financial viability over time. And that existing obstetrical units of hospitals in the service area must be utilized at an occupancy rate of 65% of licensed obstetrical beds for the preceding 12 months before new birthing centers will be allowed. New birthing centers approved in non-underserved areas shall not affect the financial viability of any existing birthing centers.

IV. QUALITY

A. Birthing centers applying for certificates of need shall document plans for the development of its organizational structure, identifying the governing body which has authority and responsibility for fiscal management and policy decisions in operation of the center in keeping with the stated purposes of the organization and the regulations under which it is licensed and/or certified.

B. Birthing centers applying for CONs shall submit a detailed description of how the birthing center shall comply with the quality of care requirements of the appropriate licensing agency.

C. All birthing centers applying for certificates of need shall document the development of written protocols, procedures and transfer agreements for appropriate transfer of patients to a nearby acute care hospital with obstetrical services.

V. CONTINUUM OF CARE

Birthing centers applying for CONs shall submit a detailed description of how the birthing center shall comply with the continuum of care requirements of the appropriate licensing agency.

VI. COSTS

A. Birthing centers applying for certificates of need shall provide evidence of protocols that demonstrate that funds are to be budgeted and expended in accordance with applicable procedures as promulgated by the center's governing body, shall demonstrate financial viability by providing estimates of revenues and expenses, and shall develop a policy regarding the care of indigent patients. The policy must address the issues of sliding fee schedules and/or free care to the extent such free care is financially feasible for the organization.

VII. ACCESSIBILITY

A. Birthing centers applying for certificates of need shall submit a detailed description of how the birthing center shall comply with the accessibility requirements of the appropriate licensing agency.