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April 27, 2023

The Honorable Lois Kolkhorst
Texas Senate
P.O. Box 12068
Austin, Texas 78711-2068

Dear Senator Kolkhorst:

Your support to fund a statewide database that will include granular, patient-centric, clinical data to improve outcomes for mothers and newborns in Texas is critically needed. As you are aware, the Texas EMS, Trauma & Acute Care Foundation (TETAF) is a nonprofit organization approved by the Texas Department of State Health Services (DSHS) to conduct on-site hospital surveys to verify compliance with state standards in trauma, stroke, neonatal, and maternal levels of care. The TETAF Board of Directors consists of experts in these specialties, including Dr. David Weisoly, a neonatologist in Houston. Dr. Weisoly is recognized as a national leader in collaborative quality improvement. Dr. Weisoly chairs the neonatal committee for the Texas Collaborative for Healthy Mothers and Babies (TCHMB) and is the chair for the Regional Advisory Council-Perinatal Care Regions (RAC-PCR) Alliance.

We believe the focus on maternal health this session is an acknowledgement of the ongoing problem facing our state with its high maternal mortality rate and a desire to improve the health and safety of 400,000 babies born in Texas every year. Texas was given a preterm birth grade of D- by the March of Dimes in 2022. It is the hope of leading caregivers in the state to not only study the deaths but improve outcomes to prevent future deaths. In 2022, a maternal mortality report was filed by the Texas Department of State Health Services (DSHS) reporting Texas' maternal mortality rate of 20.2 per 100,000 live births. Unfortunately, this report includes data that is, at its most recent, five years old. This data is not granular and patient-level but includes only administrative, or coding, data. We need patient-level data to make true improvement, and we need it in a timely manner. The care of mothers and babies are intertwined, and we can improve both in a measurable and fiscally responsible manner with a granular, patient-level perinatal database, as outlined in the TCHMB white paper.

While it is believed that the neonatal and maternal levels of care designation rules established in 2015 have advanced the quality of care in Texas, there is not granular, clinical data to prove this. Texas has an infant mortality rate (before 1st birthday) of 5.2 per 1,000 live births and the preterm birth rate is 11.4% (and rising), according to the March of Dimes. A comprehensive perinatal data system would include neonatal data to improve outcomes for newborns and mothers.

A statewide perinatal database would help the state learn from any negative maternal and neonatal outcomes and get the state closer to its goal of more positive outcomes for mothers and babies in Texas. Key quality indicators and performance indicators for improving maternal and neonatal care are well known and would be collected in a perinatal granular patient-level database. The proposed database has the support of hospital systems, providers of neonatal and maternal care, and organizations across Texas.

I hope you will consider the importance of helping mothers and newborns by funding a statewide perinatal database currently proposed at \$5 million in Article XI of the House version of House Bill (HB) 1 during your budget decisions. Perinatal experts across the state are unified that such a database will improve outcomes for moms and babies across Texas.

Regards,



Dinah Welsh
TETAF/Texas Perinatal Services
President and CEO



Dr. David Weisoly
TETAF Board of Directors and
Neonatologist