Birth Registration 101
Overview

- Statutes and Definitions
- Process and Procedures
- Texas Electronic Registrar System
Statutes

- Texas Administrative Code (TAC)
- Texas Family Code (TFC)
- Texas Health and Safety Code (HSC)
What is a live birth?

- Complete expulsion or extraction from its mother
- After separations, breathes or shows any other evidence of life
  - Beating of the heart
  - Pulsation of the umbilical cord
  - Definite movement of voluntary muscles

TAC §181.1(17)
What if the placenta is still attached?

A birth is considered a “live birth” regardless of whether or not the placenta is attached.

TAC §181.1(17)
What if the umbilical cord was cut after delivery?

TAC §181.1(17) applies whether or not the umbilical cord has been cut or the placenta is attached. Neither are relevant in the definition of a live birth.
A person required to file a birth certificate shall file the certificate no later than the fifth day after the date of the birth.

HSC §192.003(d)
The birth certificate should be registered through the Texas Electronic Registration (TER) system.

TAC §181.13
A birth certificate must be filed for all live births regardless of:
• length of gestation; or
• chance of survival.

TAC §181.1(17)
HSC §192.003
What if the parent requests a delay in filing the certificate?

Based on a parent’s religious beliefs, a parent may request that a person required to file a birth certificate delay filing the certificate. However, the delay cannot be more than 15 days after the date of the child’s birth.

HSC §192.003(e)
What if the parent requests a delay in filing the certificate?

The parents are responsible for getting back in touch with the hospital. If they fail to do so, the local registrar should file the record as “infant,” “baby boy,” or “baby girl,” along with the last name and release. Parents will have to amend the birth certificate later.

HSC §192.003(e)
What about... fetal death certificates?
TAC § 181.1 (10) defines fetal death as death prior to the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of pregnancy; the death is indicated by the fact that after such separation, the fetus does not breathe or show any other evidence of life such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles.

25 TAC § 181.1(10)
Fetal Death Certificates

A certificate of fetal death shall be filed for any fetus weighing 350 grams or more, or if the weight is unknown, a fetus aged 20 weeks or more as calculated from the start date of the last normal menstrual period to the date of delivery.

TAC §181.7(a)
If the weight is known, you must use the weight, not the gestational age.

• If the fetus is 350 grams or more, a certificate of fetal death is required
• If the fetus is under 350 grams, a certificate of fetal death is not required.

TAC §181.7(a)
The weight is known?

227 grams is the lowest weight into TER. Contact the TER Help Desk with the correct weight so that it can be done manually.

TAC §181.7(a)
The weight is unknown?

If the weight is unknown, use the gestational age.
• If the age is 20 weeks or more, a certificate of fetal death is required.
• If the age is under 20 weeks, a certificate of fetal death is not required.

TAC §181.7
When to file a Live Birth or Fetal Death Certificate

Did baby show a sign of life?

No

Was fetus 350 grams or more? If weight is unknown, was fetus 20+ weeks from the last menstrual period?

No

A Certificate of Fetal Death is not necessary, but is accepted if filed

Yes

A Certificate of Fetal Death must be filed

Yes

A Certificate of Birth and a Certificate of Death must be filed
Who files the certificate of fetal death in the TER system?

No one. A certificate of fetal death must be filed manually.

• If a funeral home comes for the remains, and will be cremated or buried, the funeral home should file the certificate.

• If the hospital is disposing of the remains, the hospital should file the certificate.
If the parents want a fetal death certificate, then two signatures of approval are needed:

- Doctor
- Funeral director

TAC §181.7
Processes and Procedures
Who files the birth certificate?

- It depends on where the birth occurred.
  - **Licensed institutional birth**: Hospital or birthing center
  - **Non-institutional birth**: occurs outside of a licensed institution
    - Attended
    - Non-attended

TAC §181.1(17)
Licensed Institutional Birth

Responsibilities of Person Registering a Birth

- Obtain information needed to complete the birth certificate from an appropriate source.
  - The child’s mother
  - The mother’s physician
  - The infant’s physician
  - Immediate family
  - Medical records

HSC §192.003
Licensed Institutional Birth

Responsibilities of Person Registering a Birth

- Complete a Certificate of Birth for each live birth that occurs in the hospital or en-route to the hospital
- If the parents are not married to each other, provide the father with an opportunity to complete an Acknowledgment of Paternity (AOP) as well as required oral and written notification of rights and responsibilities.
- Obtain appropriate parents’ signatures on the Verification of Birth Facts.

HSC §192.003
The hospital administrator, birthing center administrator, or designee of the appropriate administrator may register a birth that occurs in a licensed institution in lieu of the physician or midwife in attendance of the birth.

HSC §192.003
What about...

...Non-institutional births?
Non-Institutional Birth

- Attended
- Not attended
Non-Institutional Birth

Responsibilities of Person Registering a Birth—Attended

- Births occurring in a non-licensed institution should be registered by the attendant.
- Registered, certified, or documented health care providers who attended a birth may register the birth after he or she has presented their professional documentation to the local registrar.
Non-Institutional Birth

Responsibilities of Person Registering a Birth—Not Attended

- Births that take place outside of a licensed institution, and that are not attended by a physician, midwife, or person acting as such, must be filed with the local registrar’s office with appropriate documentation.
- The person in attendance at the birth must provide four proofs.
• A mother unexpectedly went into delivery at home.
• When the ambulance arrived she had already given birth.
• She and the baby were brought to the hospital because she had planned on giving birth at the hospital.
• Can the hospital complete the BC?

**NO.**
The birth certificate must be filed with the local registrar, using the four documented proofs.
Non-Institutional Birth

Four Essential Proofs

- Proof of Pregnancy
  - Prenatal Record
  - Statement from physician or health care provider
  - Other evidence acceptable to local registrar
  - Notarized affidavit with a photo identification

TAC §181.26
Non-Institutional Birth

Four Essential Proofs

• Proof that the infant was born alive
  • Statement from physician or health care provider who saw or examined the infant
  • Observation of the infant during a home visit by a public health nurse
  • Other evidence acceptable to local registrar
  • Notarized affidavit with a photo identification

TAC §181.26
Non-Institutional Birth

Four Essential Proofs

- Proof that the birth occurred in the registration district
  - Live birth occurred in the mother’s residence
    - Utility bill
    - Telephone bill
    - Rent receipt
    - Driver’s license
    - Envelope with address
    - Notarized affidavit
  - Live birth occurred outside the mother’s residence
    - Notarized affidavit with photo ID of the person with knowledge of the mother’s presence in the registration district on the date of birth

TAC §181.26
Non-Institutional Birth

Four Essential Proofs

• Proof that the birth occurred on the date stated
  • Medical record
  • Notarized affidavit

TAC §181.26
What about... en-route births?
En-Route Births

• If the mother is en-route to the hospital when the child is born and the hospital is the first place where the child is removed from the conveyance, “en-route” should be indicated.
  • Indicate the name of the city or town where the facility of destination is located on the birth record.
• If the child was not first removed from the conveyance at the hospital, the parents should file the birth record with the local registrar.
  • Indicate the city, town, village, or location where the child was first removed on the birth record.
The local registrar will forward the record and all documentation to the state registrar for determination.

The individuals attempting to file the birth record of a child not born in an institution cannot meet the four essential proofs required?
They can’t.

The birth registrar or the certifier attempt to use special characters, or diacritical marks?
Non-Institutional Birth

Diacritical Marks

- Federal Public Law (FPL) 100-235 requires that all federal databases follow the standards determined by the National Institute of Standards and Technology (NIST) and to use the 26 letters of the alphabet without diacritical marks. (Spaces, hyphens, and apostrophes are acceptable). The Social Security Administration (SSA) is required to follow the above law.

- The Texas Department of State Health Services (DSHS) sends data to SSA in order to enumerate social security numbers for children. In order for their computers to read TDSHS data it has to be compatible.

- HSC §192.002 directs DSHS to prescribe the form and contents of the standard birth certificate filed in the state of Texas. In order for the birth data to be read by SSA computers so children can be issued social security numbers, DSHS states that the contents of the birth certificate will also follow the guidelines set forth by NIST and FPL 100-235.
Non-Institutional Birth

Diacritical Marks

- Examples include:
  - á
  - é
  - ó
  - ý
  - ø
  - ä
  - ñ

- Characters with diacritical marks, i.e. “special characters”, are not permitted in TER and should not be entered.
Suspicious or Fraudulent Documents
Suspicious Documents

- Local registrars must notify the Fraud Prevention program of any suspicious document or records submitted.
- The local registrar will send a cover letter along with the documentation as to why they are not accepting the record.
- The local registrar will give a letter to the parents telling them why they cannot accept the record and why it has been sent to Austin.
- The state registrar will then direct the fraud program to further verify and/or investigate the documentation.
Suspicious Documents

• The Fraud Prevention program will review the documentation and deem it unacceptable or unacceptable.

• If the Fraud Prevention program deems the documentation unacceptable, it will send a letter to the parents referring them to the Texas district court for judicial determination for the birth certificate.

• The Fraud Prevention program will then refer the information to the Office of the Inspector General.
Midwives
Midwives

A History

• French: “Sage femme,” or “wise woman.”
• English translation: “With woman.”
• Books of Exodus and Genesis recount the experiences of two Hebrew midwives who refused to kill male infants in defiance of the King of Egypt.
• In Ancient Greece and Rome, midwives had born children themselves.
• Historians have found the practice of midwifery referred to in ancient Hindu records.
Midwives

Responsibilities

• Midwives must be documented every March.

• Obtain information for completion of Certificate of Birth from appropriate sources.
  • The child’s mother
  • The mother’s physician
  • The infant’s physician
  • Immediate family
  • Medical records

• Complete Certificate of Birth for each live birth attended.
Midwives

Responsibilities

• If the parents are not married to each other, the midwife must provide the father with an opportunity to complete an AOP as well as required oral and written notification of rights and responsibilities.

• Obtain the appropriate parents’ signatures on the Verification of Birth Facts.
Foundlings
Foundlings

History

• Texas was the first state to enact a “Baby Moses Law,” or abandoned baby-type law, in 1999.
• By 2008, all 50 states had a form of this law.
• As of 2013 no one has used the law in Alaska.
Foundlings

- Section 262.302 of the Texas Family Code allows the hospital to take possession of a child who appears to be 60 days old or younger if the child is voluntarily delivered to the hospital by the child’s parent and the parent did not express an intent to return for the child.
- Enacted to give children a chance to be adopted without consequences to the parents.
- Birth certificate is integral to make this statute meaningful and provide the child with a chance for a normal life.
Foundlings

Procedure

• Select “Foundling” under Record Type in TER.
• The birth certificate should be completed by the hospital.
• Since the baby was found, there is no parent to provide prenatal information.
• Enter “Infant Doe” as the baby’s name.
  • The ER physician, chief of medical officer, hospital administrator, or social worker also can provide a name.
Gestational Agreements
Gestational Agreements

Section 160, Subchapter I of the Texas Family Code (TFC) authorizes an agreement between a woman and the intended parents of a child in which the woman relinquishes all her rights as a parent of a child conceived by means of assisted reproduction and that provides the intended parents become the parents of the child.
Gestational Agreements

Definitions

- **Gestational Mother**: The woman carrying the unborn child (or gives birth to a child) conceived under the Gestational agreement.

- **Intended Parents**: individuals who enter into an agreement providing that the individuals will be the parents of a child born to a gestational mother by means of assisted reproduction, regardless of whether either individual has a genetic relationship with the child.
Gestational Agreements

Criteria

- TFC §160.754(b) requires:
  - intended parents to be married to each other; and
  - each intended parent to be a party to the gestational agreement.
- TFC §160.754(c) requires the eggs used in the assisted reproduction procedure be retrieved from an intended parent or a donor.
  - The gestational mother's eggs *may not* be used in the assisted reproduction procedure.
- TFC §160.756(b)(5) states that the prospective gestational mother:
  - Has had at least one previous pregnancy and delivery; and
  - carrying another pregnancy to term and giving birth to another child would not pose an unreasonable risk to the child's health or the physical or mental health of the prospective gestational mother.
Gestational Agreements

- Always have your legal department review the gestational agreement and provide you with approval in writing.
- If your legal department approves the agreement, retain the certified copy of the court order with your records.
Acknowledgment of Paternity
Acknowledgment of Paternity

Definitions

• Paternity simply means “fatherhood.”
• There are three types of fathers:
  • biological;
  • legal; and
  • presumed.
• There are three methods of establishing paternity:
  • marriage;
  • court order; or
  • acknowledgment of paternity (AOP).
• When is an AOP required?
  • Before a child is born;
  • when a child is born;
  • any time after a child is born; or
  • before a support order.
Acknowledgment of Paternity

Procedure

• When the biological father and mother are not married (or the marriage ended within 300 days of the child’s birth), both parents sign an AOP to establish a legal finding of paternity.
• A AOP-certified individual will assist in the AOP process.
• There are three methods of establishing paternity:
  • marriage;
  • court order; or
  • acknowledgment of paternity (AOP).
• When is an AOP required?
  • Before a child is born;
  • when a child is born;
  • any time after a child is born; or
  • before a support order.
The Vital Statistics Unit established a paternity registry for men to voluntarily assert their paternal rights.

Purpose: to “protect the parental rights of fathers who affirmatively assume responsibility for children they have fathered, and expedite adoptions of children whose biological fathers are unwilling to assume responsibility for their children by registering with the registry or otherwise acknowledging their children.”
Acknowledgment of Paternity

Additional Information

- Attend the AOP training on Thursday afternoon.
Birth Registrar Certification

- Established in 2013.
- Required by Section 181.50 of the Texas Administrative Code.
- **Purpose:** to improve birth registration and accurately represent the health of Texans by standardizing data collection and data entry practices of birth registrars.
- Improving birth registration is critical to ensure individuals receive a valid birth certificate.
Birth Registrar Certification

Certification Requirements

- The person required to register the birth of a child in this state must meet the requirements of the birth registrar certification.
- A birth registrar may not complete any aspect of the birth registration process without holding a current certification issued by the Vital Statistics Unit.
- Requires completion of the following:
  - AOP training
  - Texas Electronic Registration (TER) Birth registration online training course
    - Must be a TER user with individual user identification and password
    - Oath of confidentiality and non-disclosure agreement (on file at facility)
    - Completed application for birth registrar certification or recertification
    - Physicians and midwives or persons acting as midwives must provide current licensing information with their respective licensing bodies
Birth Registrar Certification

Re-certification

• The certification renewal period is two years.
• Begins on the first day of the month following issuance of the certification to the birth registrar.
• Birth registrars who actively register births in this state are required to obtain 8 hours of continuing education every two-year renewal period.
• Licensees are responsible for keeping track of the number of hours they have during a certification period.
• The Vital Statistics Unit will not renew the certification of an individual who fails to obtain the continuing education requirements of this section.
Texas Electronic Registrar System
Texas Electronic Registrar

General: Tab 1

- Record Type
  - Born at facility
  - Born en-route to facility
  - Foundling
  - Home birth
- Mother’s Medical Record Number
- Date AOP Sent
- Child’s Place of Birth
  - Name of facility and place of birth
- Child’s Information
  - Time of birth
  - Date of birth
  - Plurality/Plurality-Birth Order
  - Number of Infants Alive
- Mother’s Current Legal Name
- Child’s Current Legal Name
- Mother’s Address (Residence)
Texas Electronic Registrar

Mother: Tab 2

Mother’s Information
- Date of Birth
- Age
- State, Territory, or Foreign Country of Birth
- Mother’s Social Security Number
- Social Security Number for Baby?
- Did the Mother Relinquish Rights to Child?
- Education
- Occupation
- Type of Business (Indstry)
- Mother of Hispanic Origin (check only one)
- Mother’s Race
Texas Electronic Registrar

Mother 2: Tab 3
Mother’s Health Information
- WIC
- Mother’s Height
- Mother’s Weight
- Cigarette Smoking Before and During Pregnancy
- Mother’s Marital Status
- Married Within 300 Days?
- AOP
- Mother’s Name Prior to Her First Marriage (Maiden Name)
Texas Electronic Registrar

Father 1: Tab 4

- Father’s Current Legal Name
- Father’s Date of Birth
- Father’s Birth State, Territory, or Foreign Country
- Father’s Social Security Number
- Father’s Education
- Occupation
- Type of Business
- Father of Hispanic Origin
- Race Check
Texas Electronic Registrar

Father2: Tab 5

- Paternity—Genetic Testing
- Father’s Mailing Address
  - Same As Mother’s Mailing Address
  - Residence Address
- Father’s Birth State, Territory, or Foreign Country
- Presumed Father’s Information
- Presumed Father’s Current Legal Name
- Presumed Father’s Mailing Address
Texas Electronic Registrar

Medical 1: Tab 6
Prenatal Care
• Date of First Visit
• Date of Last Visit
• Total Number of Prenatal Visits for This Pregnancy
• Date of Last Normal Menses Begin
• Source of Paternal Case
• Risk Factors in This Pregnancy
• Infections
• Obstetric Procedures
• Onset of Labor
Texas Electronic Registrar

Medical 1: Tab 6

- Live Births Now Living
  - Enter the number of prior children born alive to this number.
  - The first born is included on the second born child’s birth certificate for plural deliveries.
- Live Births Now Dead
  - Enter the number of prior children born alive to this mother who are no longer living.
- Number of Other Pregnancy Outcomes
  - Include miscarriage, fetal death, ectopic pregnancy, or spontaneous abortions.
  - Enter the number of fetuses that were delivered dead regardless of the length of gestation.
Texas Electronic Registrar

Medical 2: Tab 7

- Characteristics of Labor & Delivery
- Method of Delivery
- Maternal Morbidity
- Child’s Health Information
  - Birth Weight
  - Obstetric Gestation
  - Calculated Gestation
  - APGAR Score
- Was Infant Transferred With 24 Hours of Delivery?
- Abnormal Conditions of the Newborn
- Congenital Anomalies
- ImmTrac Consent
The parents refuse to answer the statistical data-based questions?

- Assure the parents that the statistical data is not a part of the legal birth certificate.
- The statistical information may not be released or made public on subpoena or otherwise.
- The information may only be released for statistical purposes if no person, patient, or facility is identified.  

HSC §192.002(b)
The parents refuse to answer the statistical data-based questions?

- If the parents refuse to answer the information, indicate that on the Mother’s Worksheet.
- Enter “Unknown” for text items and “?” for numerical items.
What about...

...attendance vs. certifiers?
Attendants

- The person that was present at the time of birth and can attest to the facts of birth.
- Can include:
  - Mother
  - Physician
  - Paramedic
  - Midwife
Certifiers

• The individual accepting the responsibility of certifying that the infant was born alive at the place, time, and date stated on the birth certificate.

• Can include:
  • Attending physician
  • Hospital administrator
  • Designee
Texas Electronic Registrar

Certifier: Tab 8

- Attendant/Certifier
- Attendant and Address
- Is Certifier the Same as Attended?
- Certifier and Address
- Principal Source of Payment for This Delivery
- Mother Medicaid/CHIP Name and Number
- Infant Primary Care Physician
- Was Mother Transferred to This Facility for Delivery?
Adding an Attendant/Certifier

1. Click the “New” icon to create a new certifier.
2. Enter the information, tabbing from field to field.
3. Select “Certifier Only” from the rule pull down menu.
4. Select “Facility Administrator or Designee.”
5. Be sure the “Display in Lists?” box is checked.
6. Enter “999” as the license number; enter “TPI” if known.
7. Enter a PIN for the certifier. This is your electronic signature.
8. Click Save.

- Click “Library Maintenance.”
- Select “Attendant/Certifier/Infant Attendant” from the pull down menu.
Texas Electronic Registrar

Remember:

• Review the information for completeness and accuracy before certifying.
• The individual certifying the birth cannot be the same individual who entered the record in TER.
• The TER User Agreement states that all births must be certified by an individual approved by the Texas Department of State Health Services to certify births.
• All records will require electronic certification in order to be legally released from the facility.
• Remember to print the Verification of Births and have it signed by parents.
Texas Electronic Registrar

Remember:

• The birth record is filed with the state.
• An electronic record is sent to the local registrar for filing.
• Parents can then request a copy.
• Parents have to request a certified copy of their child’s birth certificate from the local registrar or the state registrar’s office.
Resources

• **TER Help Desk**
  – 512-776-3490
  – 888-963-7111 Ext 3490
  – help-TER@dshs.state.tx.us

• **TER Online Training**

• **VSU**
  – [http://texasvsu.org](http://texasvsu.org)