

DSHS Perinatal Designation Application Submission Dates Calendar Years 2026 - 2028

2026 Expiration Dates

Designation Expiration Date	90th day prior to expiration	Ideal Survey Window (7-8 months prior to expiration date)
1/1/2026	10/3/2025	5/2025 - 6/2025
2/1/2026	11/3/2025	6/2025 - 7/2025
3/1/2026	12/1/2025	7/2025 - 8/2025
4/1/2026	1/1/2026	8/2025 - 9/2025
5/1/2026	1/31/2026	9/2025 - 10/2025
6/1/2026	3/3/2026	10/2025 - 11/2025
7/1/2026	4/2/2026	11/2025 - 12/2025
8/1/2026	5/3/2026	12/2025 - 1/2026
9/1/2026	6/3/2026	1/2026 - 2/2026
10/1/2026	7/3/2026	2/2026 - 3/2026
11/1/2026	8/3/2026	3/2026 - 4/2026
12/1/2026	9/2/2026	4/2026 - 5/2026

Due dates which fall on a weekend or holiday will be extended to the following business date.

Hospital Level of Care Designations for Neonatal Care -
TAC §133.184 Designation Process - [Home - Rules & Meetings](#)

Hospital Level of Care Designations for Maternal Care -
TAC §133.204 Designation Process - [Home - Rules & Meetings](#)

DSHS Perinatal Designation Application Submission Dates Calendar Years 2026 - 2028

2027 Expiration Dates

Designation Expiration Date	90th day prior to expiration	Ideal Survey Window (7-8 months prior to expiration date)
1/1/2027	10/3/2026	5/2026 - 6/2026
2/1/2027	11/3/2026	6/2026 - 7/2026
3/1/2027	12/1/2026	7/2026 - 8/2026
4/1/2027	1/1/2027	8/2026 - 9/2026
5/1/2027	1/31/2027	9/2026 - 10/2026
6/1/2027	3/3/2027	10/2026 - 11/2026
7/1/2027	4/2/2027	11/2026 - 12/2026
8/1/2027	5/3/2027	12/2026 - 1/2027
9/1/2027	6/3/2027	1/2027 - 2/2027
10/1/2027	7/3/2027	2/2027 - 3/2027
11/1/2027	8/3/2027	3/2027 - 4/2027
12/1/2027	9/2/2027	4/2027 - 5/2027

Due dates which fall on a weekend or holiday will be extended to the following business date.

Hospital Level of Care Designations for Neonatal Care -
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Hospital Level of Care Designations for Maternal Care -
TAC §133.204 Designation Process - [Home - Rules & Meetings](#)

DSHS Perinatal Designation Application Submission Dates Calendar Years 2026 - 2028

2028 Expiration Dates

Designation Expiration Date	90th day prior to expiration	Ideal Survey Window (7-8 months prior to expiration date)
1/1/2028	10/3/2027	5/2027 - 6/2027
2/1/2028	11/3/2027	6/2027 - 7/2027
3/1/2028	12/2/2027	7/2027 - 8/2027
4/1/2028	1/2/2028	8/2027 - 9/2027
5/1/2028	2/1/2028	9/2027 - 10/2027
6/1/2028	3/3/2028	10/2027 - 11/2027
7/1/2028	4/2/2028	11/2027 - 12/2027
8/1/2028	5/3/2028	12/2027 - 1/2028
9/1/2028	6/3/2028	1/2028 - 2/2028
10/1/2028	7/3/2028	2/2028 - 3/2028
11/1/2028	8/3/2028	3/2028 - 4/2028
12/1/2028	9/2/2028	4/2028 - 5/2028

Due dates which fall on a weekend or holiday will be extended to the following business date.

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Hospital Level of Care Designations for Maternal Care -
TAC §133.204 Designation Process - [Home - Rules & Meetings](#)