To meet CMS Sepsis-1 Requirements for reimbursement for sepsis, accommodations can be made for specific patient types if there is appropriate justification. These justifications are provided below and are intended to be shared with hospital departments that oversee quality improvement.

### Justification for Variance from CMS Sepsis-1 Requirements in Pregnancy

<table>
<thead>
<tr>
<th>Requirement Recommended for Variation by CMQCC</th>
<th>Justification</th>
<th>CMS Statement and Page Numbers in Version 5.5a to Use for Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIRS criteria for screening</td>
<td>SIRS criteria in pregnancy do not accurately predict sepsis. Due to physiological changes of pregnancy, some healthy pregnant women will meet SIRS criteria without infection.</td>
<td>&quot;If SIRS criteria or a sign of organ dysfunction is due to an acute condition that has a non-infectious source/process, it should not be used. The abnormal value should be referenced in the same documentation.&quot; Pg 1-172</td>
</tr>
<tr>
<td>Signs of organ dysfunction (SBP &lt; 90 mm Hg, creatinine &gt; 2mg/dL, lactic acid &gt; 2mmol)</td>
<td>Please see &quot;Justification Discussion for CMQCC Pregnancy Adjustments to Criteria for End Organ Injury&quot; for different thresholds for SBP, creatinine, and lactic acid, Appendix C, pg 43.</td>
<td>&quot;If SIRS criteria or a sign of organ dysfunction is due to an acute condition that has a non-infectious source/process, it should not be used. The abnormal value should be referenced in the same documentation.&quot; Pg 1-172</td>
</tr>
<tr>
<td>Blood cultures should be drawn prior to antibiotic administration</td>
<td>Blood cultures are frequently not drawn prior to administration of antibiotics for chorioamnionitis, and timely administration of intravenous antibiotics is necessary. Per Gabbe S, Obstetrics, &quot;Cultures will be positive in 5% to 10% of patients; however, they will usually not be of value in making clinical decisions...&quot;</td>
<td>&quot;Antibiotics were started in the hospital for an infection within 24 hours before severe sepsis was identified, and a blood culture was drawn sometime after the antibiotic dose was started.&quot; Pg 1-31</td>
</tr>
</tbody>
</table>

The CMS Definitions can be found by clicking on the link provided, scrolling down to Section 1 – Data Dictionary and selecting the “Alphabetical Data Dictionary” link. CMS Data Dictionary Link

CMS = Centers for Medicare and Medicaid Services; CMQCC = California Maternal Quality Care Collaborative; SIRS = systemic inflammatory response syndrome; SBP = systolic blood pressure

### References: