

HCS HB 974 -- MIDWIFERY

SPONSOR: Phillips (Davis)

COMMITTEE ACTION: Voted "do pass" by the Committee on Children and Families by a vote of 10 to 0 with 1 present.

This substitute specifies that it is the intent of the General Assembly to recognize the right of a woman to give birth in the setting and with the caregiver of her choice. A caregiver includes a person who provides midwifery services; however, this service does not include the practice of medicine, nursing, nurse-midwifery, or any other medical or healing practice.

Every midwife is required to provide a written disclosure statement informing each client of his or her current certified professional midwife credentials, completion of at least 10 hours per year of continuing education and three hours of peer review, and an affidavit stating that he or she has attended a minimum of 40 births in the home setting. The disclosure must also state the number of years of experience, number of deliveries as a midwife, possible benefits and risks, certification in CPR and either infant CPR or neonatal resuscitation, malpractice or liability insurance coverage, and a contingency plan in the event of an emergency.

A midwife does not have to provide a current certified professional midwife credential, as long as the individual is at least 21 years of age, is a resident of this state, has passed the North American Registry of Midwives Skills Assessment, and provides an affidavit that he or she has provided the service of midwifery for at least 15 of the last 20 years prior to August 28, 2006. Only the midwife who provided care to the client will be held liable for negligent, willful, or wanton acts or omissions.

FISCAL NOTE: No impact on state funds in FY 2007, FY 2008, and FY 2009.

PROPONENTS: Supporters say that scientific data published in medical journals, such as the British Medical Journal, show home births and midwifery care to be a safe and viable option. Home birth is the safest way to give birth for a healthy woman and a healthy baby. A properly planned birth at home can lead to fewer problems and allows the patient to be surrounded by family and friends. Home birth families have the right to make an informed health care choice with a highly skilled midwife. A certified midwife will spend about \$25,000 to attend a three-year educational program.

Testifying for the bill were Representative Davis; Missouri Midwives Association; Lisa Thomas; Elizabeth Allemann; Christine Skinner; Brenda Abercrombie; Heather James; Mary Ueland; and Laurel Smith.

OPPONENTS: Those who oppose the bill say that complications can occur in even the most routine of deliveries. A hospital setting is the safest environment to deal with complications and emergencies where there are trained staff, nurses, and doctors. Midwives do not have transfer agreements in the event of an emergency; therefore, the attending physician will not have any information on the patient's history or even documentation of the patient's blood type. Physicians are regulated by national and state boards; however, the bill will not provide any state level regulatory oversight for midwives.

Testifying against the bill were Missouri State Medical Association; American College of Obstetricians and Gynecologists - Missouri Section; Missouri Academy of Family Physicians; Missouri Nurses Association; and Missouri Association of Osteopathic Physicians and Surgeons.

Dominic Lackey, Legislative Analyst