SECOND REGULAR SESSION HOUSE BILL NO. 1363

97TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES BAHR (Sponsor) AND SPENCER (Co-sponsor).

4838L.01I

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To repeal sections 191.331, 193.085, 334.010, 334.120, and 334.260, RSMo, and to enact in lieu thereof fourteen new sections relating to midwifery, with a penalty provision.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 191.331, 193.085, 334.010, 334.120, and 334.260, RSMo, are repealed and fourteen new sections enacted in lieu thereof, to be known as sections 191.331, 193.085, 324.1400, 324.1403, 324.1406, 324.1409, 324.1412, 324.1415, 324.1418, 324.1421, 324.1424, 324.1427, 334.010, and 334.120, to read as follows:

191.331. 1. Every infant who is born in this state shall be tested for phenylketonuria and such other metabolic or genetic diseases as are prescribed by the department. The test used by the department shall be dictated by accepted medical practice and such tests shall be of the types approved by the department. All newborn screening tests required by the department shall be performed by the department of health and senior services laboratories. The attending physician, **professional midwife**, certified nurse midwife, public health facility, ambulatory surgical center or hospital shall assure that appropriate specimens are collected and submitted to the department of health and senior services laboratories.

9 2. All physicians, **professional midwives**, certified nurse midwives, public health nurses 10 and administrators of ambulatory surgical centers or hospitals shall report to the department all 11 diagnosed cases of phenylketonuria and other metabolic or genetic diseases as designated by the 12 department. The department shall prescribe and furnish all necessary reporting forms.

3. The department shall develop and institute educational programs concerning
phenylk etonuria and other metabolic and genetic diseases and assist parents, physicians, hospitals
and public health nurses in the management and basic treatment of these diseases.

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

16 4. The provisions of this section shall not apply if the parents of such child object to the 17 tests or examinations provided in this section on the grounds that such tests or examinations 18 conflict with their religious tenets and practices.

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5. As provided in subsection 4 of this section, the parents of any child who fail to have 20 such test or examination administered after notice of the requirement for such test or examination shall be required to document in writing such refusal. All physicians, professional midwives, 21 22 certified nurse midwives, public health nurses and administrators of ambulatory surgical centers 23 or hospitals shall provide to the parents or guardians a written packet of educational information 24 developed and supplied by the department of health and senior services describing the type of 25 specimen, how it is obtained, the nature of diseases being screened, and the consequences of 26 treatment and nontreatment. The attending physician, professional midwife, certified nurse 27 midwife, public health facility, ambulatory surgical center or hospital shall obtain the written 28 refusal and make such refusal part of the medical record of the infant.

29 6. Notwithstanding the provisions of section 192.015 to the contrary, the department 30 may, by rule, annually determine and impose a reasonable fee for each newborn screening test 31 made in any of its laboratories. The department may collect the fee from any entity or individual 32 described in subsection 1 of this section in a form and manner established by the department. 33 Such fee shall be considered as a cost payable to such entity by a health care third-party payer, 34 including, but not limited to, a health insurer operating pursuant to chapter 376, a domestic 35 health services corporation or health maintenance organization operating pursuant to chapter 354, 36 and a governmental or entitlement program operating pursuant to state law. Such fee shall not 37 be considered as part of the internal laboratory costs of the persons and entities described in 38 subsection 1 of this section by such health care third-party payers. No individual shall be denied 39 screening because of inability to pay. Such fees shall be deposited in a separate account in the 40 public health services fund created in section 192.900, and funds in such account shall be used 41 for the support of the newborn screening program and activities related to the screening, 42 diagnosis, and treatment, including special dietary products, of persons with metabolic and 43 genetic diseases; and follow-up activities that ensure that diagnostic evaluation, treatment and 44 management is available and accessible once an at-risk family is identified through initial 45 screening; and for no other purpose. These programs may include education in these areas and 46 the development of new programs related to these diseases.

47 7. Subject to appropriations provided for formula for the treatment of inherited diseases 48 of amino acids and organic acids, the department shall provide such formula to persons with 49 inherited diseases of amino acids and organic acids subject to the conditions described in this 50 subsection. State assistance pursuant to this subsection shall be available to an applicant only 51 after the applicant has shown that the applicant has exhausted all benefits from third-party

52 payers, including, but not limited to, health insurers, domestic health services corporations, 53 health maintenance organizations, Medicare, Medicaid and other government assistance 54 programs.

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8. Assistance under subsection 7 of this section shall be provided to the following:

56 (1) Applicants ages birth to five years old meeting the qualifications under subsection 57 7 of this section;

58 (2) Applicants between the ages of six to eighteen meeting the qualifications under 59 subsection 7 of this section and whose family income is below three hundred percent of the 60 federal poverty level;

61 (3) Applicants between the ages of six to eighteen meeting the qualifications under 62 subsection 7 of this section and whose family income is at three hundred percent of the federal 63 poverty level or above. For these applicants, the department shall establish a sliding scale of fees 64 and monthly premiums to be paid in order to receive assistance under subsection 7 of this 65 section; and

(4) Applicants age nineteen and above meeting the qualifications under subsection 7 of
this section and who are eligible under an income-based means test established by the department
to determine eligibility for the assistance under subsection 7 of this section.

9. The department shall have authority over the use, retention, and disposal of biological specimens and all related information collected in connection with newborn screening tests conducted under subsection 1 of this section. The use of such specimens and related information shall only be made for public health purposes and shall comply with all applicable provisions of federal law. The department may charge a reasonable fee for the use of such specimens for public health research and preparing and supplying specimens for research proposals approved by the department.

193.085. 1. A certificate of birth for each live birth which occurs in this state shall be filed with the local registrar, or as otherwise directed by the state registrar, within five days after such birth and shall be registered if such certificate has been completed and filed pursuant to the provisions of this section.

5 2. When a birth occurs in an institution or en route to an institution, the person in charge 6 of the institution or such person's designated representative shall obtain the personal data, 7 prepare the certificate, certify that the child was born alive at the place and time and on the date 8 stated either by signature or an electronic process approved by the department, and file the 9 certificate pursuant to this section or as otherwise directed by the state registrar within the 10 required five days. The physician, professional midwife, or other person in attendance shall 11 provide the medical information required by the certificate and certify to the facts of birth within five days after the birth. If the physician, professional midwife, or other person in attendance 12

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13 does not certify to the facts of birth within the five-day period, the person in charge of the 14 institution shall complete the certificate.

15 3. When a birth occurs outside an institution, the certificate shall be prepared and filed 16 by one of the following in the indicated order of priority:

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(1) The physician in attendance at or immediately after the birth;

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(2) The professional midwife in attendance at or immediately after the birth;

(3) Any other person in attendance at or immediately after the birth;

20 [(3)] (4) The father, the mother, or, in the absence of the father and the inability of the 21 mother, the person in charge of the premises where the birth occurred.

22 4. Certificates of birth filed by a professional midwife who signs as the certifier of the certificate of birth shall not require signatures of a notary or any other witnesses. The 23 24 certified title section on the birth certificate application shall include a checkbox for 25 "Certified Professional Midwife" or "C.P.M.".

26 5. When a birth occurs on a moving conveyance within the United States and the child 27 is first removed from the conveyance in this state, the birth shall be registered in this state and 28 such place shall be considered the place of birth. When a birth occurs on a moving conveyance 29 while in international waters or air space or in a foreign country or its air space and the child is 30 first removed from the conveyance in this state, the birth shall be registered in this state but the 31 certificate shall show the actual place of birth insofar as can be determined.

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[5.] 6. If the mother was married at the time of either conception or birth, or between 33 conception and birth, the name of the husband shall be entered on the certificate as the father of 34 the child, unless:

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(1) Paternity has been determined otherwise by a court of competent jurisdiction; or

36 (2) The mother executes an affidavit attesting that the husband is not the father and the 37 putative father is the father, and the putative father executes an affidavit attesting that he is the 38 father, and the husband executes an affidavit attesting that he is not the father. If such affidavits 39 are executed, the putative father shall be shown as the father on the birth certificate and the 40 signed acknowledgment of paternity shall be considered a legal finding of paternity. The 41 affidavits shall be as provided for in section 193.215.

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[6.] 7. In any case in which paternity of a child is determined by a court of competent jurisdiction, the name of the father and surname of the child shall be entered on the certificate 43 44 of birth pursuant to the finding and order of the court.

45 [7.] 8. Notwithstanding any other law to the contrary, if a child is born to unmarried 46 parents, the name of the father and other required information shall be entered on the certificate 47 of birth only if an acknowledgment of paternity pursuant to section 193.215 is completed, or if

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48 paternity is determined by a court of competent jurisdiction or by an administrative order of the 49 family support division.

50 [8.] **9.** If the father is not named on the certificate of birth, no other information about 51 the father shall be entered on the certificate.

52 [9.] **10.** The birth certificate of a child born to a married woman as a result of artificial 53 insemination, with consent of her husband, shall be completed pursuant to the provisions of 54 subsection [5] **6** of this section.

55 [10.] **11.** Either of the parents of the child, or other informant, shall attest to the accuracy 56 of the personal data entered on the certificate in time to permit the filing of the certificate within 57 the required five days.

324.1400. As used in sections 324.1400 to 324.1427, the following terms shall mean:

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(2) "Board", the board of professional midwives;

(1) "Antepartum", before birth;

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(3) "Client", a person who retains the services of a professional midwife;

5 (4) "Professional midwife", any person who is certified by the North American 6 Registry of Midwives (NARM) as a certified professional midwife (CPM) and provides for 7 compensation those skills relevant to the care of women and infants in the antepartum, 8 intrapartum, and postpartum period;

9 (5) "Division", the division of professional registration within the department of 10 insurance, financial institutions and professional registration;

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(6) "Intrapartum", during birth;

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(7) "Postpartum", after birth;

(8) "Practice of professional midwifery", the science and art of examination, 13 14 evaluation, assessment, counseling and treatment of women and infants in the antepartum, 15 intrapartum and postpartum period by those methods commonly taught in any midwifery 16 school, or midwifery program in a university or college, which has been accredited by the Midwifery Education Accreditation Council, its successor entity, or approved by the board, 17 18 including identifying and referring women who require obstetrical or other professional 19 care. The practice of professional midwifery shall not include the use of operative surgery 20 nor the prescribing of drugs. The practice of professional midwifery, as defined in this 21 subdivision, is declared:

(a) Not to be the practice of medicine or osteopathy within the meaning of chapter
334 and not subject to the provisions of chapter 334; and

(b) Not to be the practice of nurse-midwifery or nursing within the meaning of chapter 335 and not subject to the provisions of chapter 335.

324.1403. 1. There is hereby created and established within the division of 2 professional registration the "Board of Professional Midwives" which consists of six members appointed by the governor with the advice and consent of the senate. Each 3 4 member shall be a United States citizen and resident of this state for at least one year immediately preceding their appointment. Of the six members, one member shall be a 5 6 public member and five members shall be licensed professional midwives who attend births in homes or other out-of-hospital settings; provided that, the initial midwife members 7 8 appointed need not be licensed at the time of appointment if they are certified professional 9 midwives currently certified by the North American Registry of Midwives.

2. The initial appointments to the board shall be two members for a term of one year, two members for a term of two years, and two members for a term of three years. After the initial terms, each member shall serve a three-year term. No member of the board shall serve more than two consecutive three-year terms. All successor members shall be appointed for three-year terms. All members shall serve until their successors have been appointed and qualified. Vacancies occurring in the membership of the board for any reason shall be filled by appointment by the governor for the unexpired term.

3. The public member shall not derive a financial benefit from or be a member of any profession regulated by chapter 334 or 335, or under sections 324.1400 to 324.1427, or be the spouse or immediate family member of such person. The public member is subject to the provisions of section 324.028.

4. The board may sue and be sued in its own name and its members need not be named parties. Members of the board shall not be personally liable, either jointly or severally, for any act or omission which constitutes willful or wanton conduct or the failure to exercise ordinary care in the performance of their official duties as board members. No board member shall be personally liable for any court costs which accrue in any action by or against the board.

5. Notwithstanding any other provision of law to the contrary, any appointed member of the board shall receive as compensation an amount established by the director of the division of professional registration not to exceed fifty dollars per day for board business plus actual and necessary expenses.

6. The board shall hold an annual meeting at which time it shall elect from its membership a chairperson and vice chairperson. The board may hold such additional meetings as may be required in the performance of its duties. A quorum of the board shall consist of a majority of its members.

35 7. In accordance with section 324.016, sections 324.1400 to 324.1427 shall not 36 become effective and shall not be enforced unless and until such expenditures and

personnel are specifically appropriated and appointed sufficient to conduct the business
 required thereunder and the initial rules filed, if appropriate, have become effective.

324.1406. 1. Applications for licensure as a professional midwife shall be in writing and submitted to the board on forms prescribed by the board and furnished to the applicant. Each application shall contain a statement that it is made under oath or affirmation and that the information contained therein is true and correct to the best knowledge and belief of the applicant, subject to the penalties provided for the making of a false affidavit or declaration. Each application shall be accompanied by the fees required by the board.

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2. Each applicant for licensure shall:

9 (1) Present evidence of current certification by the North American Registry of 10 Midwives (NARM) as a certified professional midwife (CPM);

(2) Present evidence of current certification in basic life support (BLS) for health
 care providers and neonatal resuscitation;

13 (3) Comply with the written disclosure requirement under subsection 1 of section
14 324.1415.

15 3. (1) The division shall mail a renewal notice to the last known address of each 16 licensee prior to the renewal date. Failure to provide the board with the information 17 required for renewal or to pay the renewal fee after such notice shall result in the license 18 expiring. The license shall be reinstated if, within two years of the renewal date, the 19 applicant submits the required documentation and pays the applicable fees as approved 20 by the board.

(2) Each license issued under this section shall expire three years after the date of
 its issuance. Each applicant for renewal shall submit:

(a) Evidence of attendance at a minimum of ten hours per year of continuing
 education in midwifery or related fields;

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(b) Evidence of attendance at a minimum of three hours per year of peer review;

26 (c) Evidence of current certification in basic life support (BLS) for health care 27 providers and neonatal resuscitation; and

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(d) The renewal fee set by the board.

(3) The board may refuse to issue or renew any certificate of registration or authority, permit, or license required under this chapter for one or any combination of causes stated in subsection 4 of this section. The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of the applicant's right to file a complaint with the administrative hearing commission as provided by chapter 621. As an alternative to a refusal to issue or renew any certificate, registration, or authority, the

35 board may, at its discretion, issue a license which is subject to probation, restriction, or 36 limitation to an applicant for licensure for any one or any combination of causes stated in 37 subsection 4 of this section. The board's order of probation, limitation, or restriction shall 38 contain a statement of the discipline imposed, the basis therefore, the date such action shall 39 become effective, and a statement that the applicant has thirty days to request in writing 40 a hearing before the administrative hearing commission. If the board issues a 41 probationary, limited, or restricted license to an applicant for licensure, either party may 42 file a written petition with the administrative hearing commission within thirty days of the 43 effective date of the probationary, limited, or restricted license seeking review of the 44 board's determination. If no written request for a hearing is received by the administrative 45 hearing commission within the thirty-day period, the right to seek review of the board's 46 decision shall be considered as waived.

47 (4) The board may cause a complaint to be filed with the administrative hearing 48 commission as provided by chapter 621 against any holder of any certificate of registration 49 or authority, permit, or license required by this chapter or any person who has failed to 50 renew or has surrendered the person's certificate of registration or authority, permit, or 51 license for any one or any combination of the following causes:

52 (a) Has an unpaid judgment resulting from providing professional midwifery 53 services;

(b) Procuring or attempting to procure a license under sections 324.1400 to 324.1427 by making a false statement, submitting false information, refusing to provide complete information in response to a question in an application for licensure, or through any form of fraud or misrepresentation;

(c) Failing to meet the minimum qualifications for licensure or renewal established
by sections 324.1400 to 324.1427;

60 (d) Paying money or other valuable consideration, other than as provided for by 61 sections 324.1400 to 324.1427, to any member or employee of the board to procure a license 62 under sections 324.1400 to 324.1427;

(e) Incompetency, misconduct, negligence, dishonesty, fraud, or misrepresentation
 in the performance of the functions or duties of any profession licensed or regulated by
 sections 324.1400 to 324.1427;

66 (f) Violating, assisting, or enabling any person to willfully disregard any of the 67 provisions of sections 324.1400 to 324.1427 or the rules of the board for the administration 68 and enforcement of the provisions of sections 324.1400 to 324.1427;

69 (g) Violating any term or condition of a license issued by the board under the 70 authority of sections 324.1400 to 324.1427;

71 Obtaining or attempting to obtain any fee, charge, tuition, or other **(h)** 72 compensation by fraud, deception, or misrepresentation;

73 (i) Use of any advertisement or solicitation which is false, misleading, or deceptive 74 to the general public or persons to whom the advertisement or solicitation is primarily 75 directed.

76 (5) After the filing of such complaint before the administrative hearing commission, 77 the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon 78 a finding by the administrative hearing commission that the grounds provided in 79 subsection 4 of this section for disciplinary action are met, the board may, singly or in 80 combination:

81 (a) Warn, censure, or place the person named in the complaint on probation on 82 such terms and conditions as the board deems appropriate for a period not to exceed ten 83 vears;

84 (b) Suspend the person's license, certificate, or permit for a period not to exceed 85 three years;

86 (c) Restrict or limit the person's license, certificate, or permit for an indefinite 87 period of time;

88 (d) Revoke the person's license, certificate, or permit;

89 (e) Administer a public or private reprimand;

90 (f) Deny the person's application for a license;

91 (g) Permanently withhold issuance of a license;

92 (h) Require the person to submit to the care, counseling, or treatment of physicians 93 designated by the board at the expense of the individual to be examined;

94 (i) Require the person to attend such continuing educational courses and pass such 95 examinations as the board may direct.

96 (6) The division may promulgate rules necessary to implement the administration 97 of sections 324.1400 to 324.1427. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become 98 99 effective only if it complies with and is subject to all of the provisions of chapter 536 and, 100 if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of 101 the powers vested with the general assembly pursuant to chapter 536 to review, to delay 102 the effective date, or to disapprove and annul a rule are subsequently held 103 unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted 104 after August 28, 2014, shall be invalid and void.

324.1409. 1. The board shall have the following powers and duties and may adopt 2 rules in accordance with the provisions of chapter 536 to establish:

3 An application processes and administrative procedures for processing (1) 4 applications and issuing professional midwife licenses and for conducting disciplinary 5 proceedings under sections 324.1400 to 324.1427;

6 (2) A process for ensuring individual professional midwife practice guidelines remain consistent with standards regarding the practice of midwifery established by the 7 North American Registry of Midwives and the National Association of Certified 8 9 Professional Midwives, or successor organizations whose essential documents include 10 without limitation subject matter concerning scope of practice, standards of practice, 11 informed consent including grievance mechanism, appropriate consultation, collaboration 12 or referral, including the development of collaborative relationships with other health care 13 practitioners who can provide care outside the scope of midwifery practice when necessary 14 including emergent and nonemergent care;

15 (3) Reasonable rules as deemed necessary or desirable by the board to carry out 16 and enforce the provisions of sections 324.1400 to 324.1427.

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18 (1) Investigate to verify such applicant's qualifications. If the results of the 19 investigation are satisfactory to the board and the applicant is otherwise qualified, the 20 board shall issue to the applicant a license authorizing the applicant to act as a professional 21 midwife in Missouri;

22 (2) Set the amount of fees authorized by sections 324.1400 to 324.1427 and required by rules promulgated under chapter 536. The fees shall be set at a level to produce revenue 23 24 that does not substantially exceed the cost and expense of administering sections 324.1400

25 to 324.1427; and

2. The board shall:

26 (3) Perform such other functions and duties as may be necessary to carry out the provisions of sections 324.1400 to 324.1427. 27

28 3. Any rule or portion of a rule, as that term is defined in section 536.010, that is 29 created under the authority delegated in this section shall become effective only if it 30 complies with and is subject to all of the provisions of chapter 536 and, if applicable, 31 section 536.028. This section and chapter 536 are nonseverable and if any of the powers 32 vested with the general assembly pursuant to chapter 536 to review, to delay the effective 33 date, or to disapprove and annul a rule are subsequently held unconstitutional, then the 34 grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void. 35

324.1412. 1. There is hereby created in the state treasury the "Board of 2 Professional Midwives Fund", which shall consist of money collected under sections 3 324.1400 to 324.1427. The state treasurer shall be custodian of the fund. In accordance

shall be a dedicated fund and, upon appropriation, money in the fund shall be used solely
for the administration of sections 324.1400 to 324.1427.
2. Notwithstanding the provisions of section 33.080, to the contrary, any moneys
remaining in the fund at the end of the biennium shall not revert to the credit of the
general revenue fund until the amount in the fund at the end of the biennium exceeds three
times the amount of the appropriation from the fund for the preceding fiscal year.

4 with sections 30.170 and 30.180, the state treasurer may approve disbursements. The fund

3. The state treasurer shall invest moneys in the fund in the same manner as other
 funds are invested. Any interest and moneys earned on such investments shall be credited
 to the fund.

324.1415. 1. Every licensed professional midwife shall present a written disclosure statement to each client which shall be signed by the client and kept with the client's records, and shall include but not be limited to the following:

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(1) A description of professional midwifery education and related training;

5 (2) Licensure as a professional midwife, including the effective dates of the 6 licensure;

7 (3) The benefits and risks associated with childbirth in the setting selected by the 8 client;

9 (4) A statement concerning the licensed professional midwife's arrangement with 10 other health care professionals, including licensed physicians;

(5) A statement concerning the licensed professional midwife's malpractice or
 liability insurance coverage; and

13 (6) A written plan specific to the client for obtaining medical care when necessary,
14 which shall include the name and phone number of the hospital or other health care facility
15 to which the midwife intends to transfer in an emergency.

Licensed professional midwives shall carry medical malpractice insurance under
 the same conditions described for physicians in section 383.500.

3. Notwithstanding any other provision of the law, a licensed professional midwife providing a service of professional midwifery shall not be deemed to be engaged in the practice of medicine, nursing, nurse-midwifery, or any other medical or healing practice.

- 4. Nothing in sections 324.1400 to 324.1427 shall be construed to apply to a person who provides information and support in preparation for labor and delivery and assists in the delivery of an infant if such person does not do the following:
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(1) Advertise as a midwife or as a provider of midwife services;

25 (2) Accept compensation for midwife services; and

26 (3) Use any words, letters, signs, or figures to indicate that the person is a midwife.

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5. A person who is a member of a recognized religious sect or division, as defined in 26 U.S.C. Section 1402(g), by reason of which they are conscientiously opposed to acceptance of benefits of any public or private insurance which makes payments in the event of death, disability, old age, or retirement, or makes payments toward the cost of or provides services for medical bills, including benefits of any insurance system established under the federal Social Security Act, 42 U.S.C. Section 301, et seq., shall not be subject to the provisions of sections 324.1400 to 324.1427.

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6. Nothing in sections 324.1400 to 324.1472 shall be construed to:

(1) Prohibit the attendance at birth of the mother's choice of family, friends,
 uncompensated labor support attendants, or professional doulas; or

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(2) Prevent a student who is enrolled or participating in a midwifery education
program or who is enrolled or participating in a program of supervised clinical training
from engaging in the practice of midwifery in this state as part of his or her course of
study, provided:

41 (a) Such services are performed under the supervision of a person authorized in
42 this state to perform services under state law; and

43 (b) The client is informed of the student's status and consents to receiving services44 from the student.

45 7. The provisions of sections 324.1400 to 324.1427 shall be remedial and curative
46 in nature.

8. No physician, nurse, emergency medical technician, hospital, or agents thereof, providing medical care or treatment for a woman or infant arising during childbirth as a consequence of the care received by a licensed professional midwife shall be liable for any civil damages for any act or omission resulting from the rendering of such services unless such act or omission was the result of negligence or willful misconduct on the part of the physician, nurse, emergency medical technician, hospital, or agents thereof.

53 9. No physician, nurse, emergency medical technician, hospital, other licensed 54 professional midwife, or agents thereof, providing medical care or treatment for a woman 55 or infant arising during childbirth as a consequence of the care received by a licensed 56 professional midwife shall be liable for any civil damages for any act or omission resulting 57 from the rendering of such care unless such act or omission was the result of negligence or 58 willful misconduct or the failure to exercise ordinary care on the part of the physician, 59 nurse, emergency medical technician, hospital, other licensed professional midwife, or 60 agents thereof.

61 **10.** A licensed health care provider or facility shall not be subject to discipline for 62 assisting, enabling, aiding, procuring, advising or encouraging any person licensed to

practice professional midwifery if such person is practicing within the confines of sections
 324.1400 to 324.1427.

11. Licensed professional midwives shall be reimbursed for professional midwifery services under the MO HealthNet program at the same compensation rate as physicians. An additional amount equal to half of the hospital fee for uncomplicated vaginal birth and routine newborn care shall be paid to the midwife as a home birth fee.

12. No person shall be denied coverage by any private or public insurance program
 solely on the basis that the person is planning or has had a home birth.

71 13. A licensed professional midwife shall be entitled to practice any profession or 72 professions to which such midwife is licensed to practice. Conflicts shall be resolved 73 consistent with this section.

14. A licensed professional midwife may serve as administrator, and attend and be
responsible for antepartum, intrapartum and postpartum clients in a birth center licensed
under chapter 197.

324.1418. The department of health and senior services shall maintain and publish on its website prospective statistics tracking all birth outcomes for all physicians, professional midwives, certified nurse midwives, and public health nurses, which shall include:

5 (1) Mortality statistics for: 6 (a) Maternal deaths from pregnancy to the first one-year postpartum; and 7 (b) Fetal/neonatal: 8 a. Deaths after twenty weeks gestation; 9 b. Intrapartum deaths; and 10 c. Deaths from birth to thirty days; and 11 (2) Maternal incidence of: 12 (a) Gestational diabetes requiring insulin; (b) Rh isoimmunization: 13 14 (c) Induction of labor; 15 (d) Preeclampsia requiring magnesium sulfate or induction of labor; 16 (e) Preeclamptic seizures; 17 (f) Cesarean section, classical incision; 18 (g) Cesarean section, low-transverse incision; 19 (h) Episiotomy; 20 (i) Perineal trauma requiring suturing and degree; 21 (i) Manual extraction of the placenta; 22 (k) Emergency hysterectomy;

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23	(I) Postpartum hemorrhage requiring transfusion; and	
24	(m) Postpartum infection requiring antibiotics; and	
25	(3) Neonatal statistics for:	
26	(a) Prematurity;	
27	(b) Cord prolapse;	
28	(c) Resuscitation;	
29	(d) APGAR scores;	
30	(e) Low-birth weight;	
31	(f) Admittance to neonatal intensive care unit;	
32	(g) Birth injuries;	
33	(h) Anemia;	
34	(i) Jaundice requiring phototherapy;	
35	(j) Breastfeeding rate at birth and at six weeks; and	
36	(k) Infection requiring antibiotics.	
_	324.1421. No licensed professional midwife shall be permitted to:	
2	(1) Prescribe drugs;	0
3	(2) Perform medical inductions or cesarean sections during the deliv	ery of an
4	infant;	
5	 (3) Use forceps during the delivery of an infant; (4) Parform vacuum delivery of an infant; or 	
6 7	 (4) Perform vacuum delivery of an infant; or (5) Perform an abortion, as defined in abortor 189 	
/	(5) Perform an abortion, as defined in chapter 188.324.1424. A licensed professional midwife shall not administer prescript	ion drugs
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2	(1) Neonatal use of prophylactic ophthalmic medications, vitamin K and	ł oxygen:
4	(2) Maternal use of Rho (D) immune globulin, oxygen, local anest	•••
5	oxytocin, misoprostol and methylerogonovine maleate as postpartum antihem	
6	and	8.00)
7	(3) Any prescription drug legally prescribed to the client by a licensed h	ealth care
8	provider with prescriptive privileges.	
	324.1427. Any person who violates the provisions of sections 324.1400 to 324.1427,	
2	or any rule promulgated or order made under sections 324.1400 to 324.1427 is	guilty of a
3	class A misdemeanor.	
	334.010. 1. It shall be unlawful for any person not now a registered physician	within the
2	meaning of the law to practice medicine or surgery in any of its departments, to eng	gage in the
3	practice of medicine across state lines or to profess to cure and attempt to treat the	sick and

4 others afflicted with bodily or mental infirmities, [or engage in the practice of midwifery in this 5 state,] except as herein provided.

6 2. For the purposes of this chapter, the "practice of medicine across state lines" shall 7 mean:

8 (1) The rendering of a written or otherwise documented medical opinion concerning the 9 diagnosis or treatment of a patient within this state by a physician located outside this state as 10 a result of transmission of individual patient data by electronic or other means from within this 11 state to such physician or physician's agent; or

12 (2) The rendering of treatment to a patient within this state by a physician located outside 13 this state as a result of transmission of individual patient data by electronic or other means from 14 within this state to such physician or physician's agent.

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3. A physician located outside of this state shall not be required to obtain a license when:(1) In consultation with a physician licensed to practice medicine in this state; and

17 (2) The physician licensed in this state retains ultimate authority and responsibility for 18 the diagnosis or diagnoses and treatment in the care of the patient located within this state; or

(3) Evaluating a patient or rendering an oral, written or otherwise documented medical
opinion, or when providing testimony or records for the purpose of any civil or criminal action
before any judicial or administrative proceeding of this state or other forum in this state; or

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(4) Participating in a utilization review pursuant to section 376.1350.

334.120. 1. There is hereby created and established a board to be known as "The State Board of Registration for the Healing Arts" for the purpose of registering, licensing and 2 supervising all physicians and surgeons[, and midwives] in this state. The board shall consist 3 4 of nine members, including one voting public member, to be appointed by the governor by and with the advice and consent of the senate, at least five of whom shall be graduates of professional 5 6 schools accredited by the Liaison Committee on Medical Education or recognized by the Educational Commission for Foreign Medical Graduates, and at least two of whom shall be 7 8 graduates of professional schools approved and accredited as reputable by the American 9 Osteopathic Association, and all of whom, except the public member, shall be duly licensed and 10 registered as physicians and surgeons pursuant to the laws of this state. Each member must be 11 a citizen of the United States and must have been a resident of this state for a period of at least 12 one year next preceding his or her appointment and shall have been actively engaged in the 13 lawful and ethical practice of the profession of physician and surgeon for at least five years next 14 preceding his or her appointment. Not more than four members shall be affiliated with the same 15 political party. All members shall be appointed for a term of four years. Each member of the 16 board shall receive as compensation an amount set by the board not to exceed fifty dollars for each day devoted to the affairs of the board, and shall be entitled to reimbursement of his or her 17

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18 expenses necessarily incurred in the discharge of his or her official duties. The president of the 19 Missouri State Medical Association, for all medical physician appointments, or the president of 20 the Missouri Association of Osteopathic Physicians and Surgeons, for all osteopathic physician 21 appointments, in office at the time shall, at least ninety days prior to the expiration of the term 22 of the respective board member, other than the public member, or as soon as feasible after the 23 appropriate vacancy on the board otherwise occurs, submit to the director of the division of 24 professional registration a list of five physicians and surgeons qualified and willing to fill the 25 vacancy in question, with the request and recommendation that the governor appoint one of the 26 five persons so listed, and with the list so submitted, the president of the Missouri State Medical 27 Association or the Missouri Association of Osteopathic Physicians and Surgeons, as appropriate, 28 shall include in his or her letter of transmittal a description of the method by which the names 29 were chosen by that association.

30 2. The public member shall be at the time of his or her appointment a citizen of the 31 United States; a resident of this state for a period of one year and a registered voter; a person who 32 is not and never was a member of any profession licensed or regulated pursuant to this chapter 33 or the spouse of such person; and a person who does not have and never has had a material, 34 financial interest in either the providing of the professional services regulated by this chapter, 35 or an activity or organization directly related to any profession licensed or regulated pursuant to 36 this chapter. All members, including public members, shall be chosen from lists submitted by 37 the director of the division of professional registration. The list of medical physicians or 38 osteopathic physicians submitted to the governor shall include the names submitted to the 39 director of the division of professional registration by the president of the Missouri State Medical 40 Association or the Missouri Association of Osteopathic Physicians and Surgeons, respectively. 41 This list shall be a public record available for inspection and copying under chapter 610. The duties of the public member shall not include the determination of the technical requirements to 42 43 be met for licensure or whether any person meets such technical requirements or of the technical 44 competence or technical judgment of a licensee or a candidate for licensure.

[334.260. On August 29, 1959, all persons licensed under the provisions of chapter 334, RSMo 1949, as midwives shall be deemed to be licensed as midwives under this chapter and subject to all the provisions of this chapter.]