

HOUSE BILL 9

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5lr0492

(PRE-FILED)

By: **Delegate Kelly**

Requested: October 13, 2014

Introduced and read first time: January 14, 2015

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Home Birth Safety Act**

3 FOR the purpose of establishing a licensing and regulatory system for the practice of
4 direct-entry midwifery under the State Board of Nursing; establishing the
5 Direct-Entry Midwifery Advisory Committee within the Board; providing for the
6 composition, qualifications, chair, term, quorum, meeting requirements,
7 compensation, reimbursement, and removal of members of the Committee; providing
8 for the duties of the Committee; including certain midwives under the jurisdiction of
9 a certain rehabilitation committee; requiring the Board to give certain persons a
10 hearing before taking certain actions; requiring certain midwives to notify certain
11 providers of certain births, transfer certain records, make certain recommendations,
12 develop certain plans for certain patients, obtain certain informed consent
13 agreements that acknowledge certain items from certain patients, comply with
14 certain data collection and reporting requirements, and display a certain notice
15 under certain circumstances; requiring certain midwives to consult with certain
16 health care providers under certain circumstances, arrange for emergency transfer
17 under certain circumstances, and refer and transfer care of certain patients under
18 certain circumstances; requiring the Committee to review and approve certain plans;
19 requiring certain plans to be provided to certain hospitals; requiring the Board, in
20 consultation with certain parties, to develop a certain form for use during certain
21 transfers; prohibiting certain midwives from offering a certain service except under
22 certain circumstances; specifying the qualifications for a license to practice
23 direct-entry midwifery; specifying the procedure for applying for a license to practice
24 direct-entry midwifery; requiring the Board to set certain fees for the issuance and
25 renewal of certain licenses and services; requiring the Board to pay certain fees to
26 the Comptroller of the State; requiring the fees to be used for a certain purpose;
27 authorizing the Board to waive certain education and training requirements under
28 certain circumstances; requiring the Board to issue certain licenses and to include a
29 certain designation on each license; requiring the Board to consider certain factors
30 on receipt of certain criminal history record information in making certain

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 determinations; specifying the scope of a license issued under this Act; providing for
2 the expiration and renewal of a license to practice direct-entry midwifery; requiring
3 the Board to send to the licensee a certain renewal notice at a certain time and in a
4 certain manner; requiring certain continuing education, peer review, and data
5 submission as a condition of license renewal; requiring the Board to place certain
6 licensees on inactive status and to reactivate and reinstate certain licenses under
7 certain circumstances; prohibiting the Board from reinstating certain licenses under
8 certain circumstances; requiring certain licensees to submit to additional criminal
9 history records checks at specified intervals; prohibiting certain midwives from
10 surrendering certain licenses except under certain circumstances; prohibiting
11 certain licenses from lapsing by operation of law under certain circumstances;
12 authorizing the Board to set certain conditions to accept the surrender of certain
13 licenses; authorizing the Board to deny certain licenses, reprimand or place on
14 probation certain licensees, or suspend or revoke certain licenses under certain
15 circumstances, subject to certain hearing provisions; authorizing the Board to
16 impose a certain penalty; prohibiting certain individuals from making certain
17 representations or using certain abbreviations or designations unless authorized to
18 practice direct-entry midwifery in the State; prohibiting certain licensees from
19 advertising in a certain manner; providing for the scope of this Act; providing certain
20 health care providers with certain immunity from civil liability under certain
21 circumstances; providing certain penalties for the violation of certain provisions of
22 this Act; providing a short title for certain provisions of this Act; subjecting certain
23 provisions of this Act to the Maryland Program Evaluation Act and a certain full
24 evaluation under certain circumstances; specifying the terms of the initial members
25 of the Committee; requiring the Board to report to certain committees of the General
26 Assembly on or before a certain date regarding the practice of direct-entry midwifery
27 in the State; defining certain terms; altering a certain definition; requiring the
28 Committee, with the approval of the Board, to convene a certain workgroup;
29 providing for the composition and duties of the workgroup; requiring the Board to
30 adopt certain regulations on or before a certain date; providing for the termination
31 of certain provisions of this Act under certain circumstances; and generally relating
32 to the licensure and regulation of direct-entry midwives by the State Board of
33 Nursing.

34 BY repealing and reenacting, without amendments,

35 Article – Health – General

36 Section 19–301(f)

37 Annotated Code of Maryland

38 (2009 Replacement Volume and 2014 Supplement)

39 BY repealing and reenacting, with amendments,

40 Article – Health Occupations

41 Section 8–208 and 8–317(a)

42 Annotated Code of Maryland

43 (2014 Replacement Volume)

44 BY adding to

1 Article – Health Occupations
 2 Section 8–6C–01, 8–6C–02, 8–6C–02.1, 8–6C–02.2, and 8–6C–03 through 8–6C–26
 3 to be under the new subtitle “Subtitle 6C. Direct–Entry Midwives”; and
 4 8–701(e–1)
 5 Annotated Code of Maryland
 6 (2014 Replacement Volume)

7 BY repealing and reenacting, with amendments,
 8 Article – State Government
 9 Section 8–405(b)(3)
 10 Annotated Code of Maryland
 11 (2014 Replacement Volume)

12 Preamble

13 WHEREAS, A parent has the responsibility and right to give birth where and with
 14 whom the parent chooses; and

15 WHEREAS, For personal and economic reasons, some Maryland residents will
 16 choose to have home births; and

17 WHEREAS, Reproductive health care decisions are best made by individuals and via
 18 informed consent processes; and

19 WHEREAS, It is understood that childbirth is a culmination of pregnancy and is a
 20 natural process rather than an illness; and

21 WHEREAS, There is a public interest in preserving the rights of women to deliver
 22 children at home, to remove obstacles to safe out–of–hospital deliveries, and to assure
 23 quality health care during the birthing of a child at home; and

24 WHEREAS, The practice of midwifery has been a part of the culture and tradition
 25 of Maryland since the colonial days, and it is in the public interest to remove impediments
 26 to the practice of midwifery; and

27 WHEREAS, The services of a direct–entry midwife are a reasonable alternative for
 28 healthy pregnant women; now, therefore,

29 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
 30 That the Laws of Maryland read as follows:

31 **Article – Health – General**

32 19–301.

33 (f) “Hospital” means an institution that:

1 (1) Has a group of at least 5 physicians who are organized as a medical
2 staff for the institution;

3 (2) Maintains facilities to provide, under the supervision of the medical
4 staff, diagnostic and treatment services for 2 or more unrelated individuals; and

5 (3) Admits or retains the individuals for overnight care.

6 Article – Health Occupations

7 8–208.

8 (a) (1) In this section the following words have the meanings indicated.

9 (2) “Applicant” means an individual who has submitted an application to
10 the Board to be licensed as a registered nurse, licensed practical nurse, [or] electrologist,
11 **OR CERTIFIED DIRECT-ENTRY MIDWIFE** or to be certified as a nursing assistant or
12 medication technician in this State.

13 (3) “Program” means the rehabilitation program.

14 (b) (1) There is a Rehabilitation Committee in the Board.

15 (2) The Board may create 1 or more rehabilitation committees.

16 (c) (1) The Committee shall consist of 6 members.

17 (2) Of the 6 Committee members:

18 (i) 3 shall be licensed registered nurses, who have demonstrated
19 expertise in the field of chemical dependency or psychiatric nursing;

20 (ii) 1 shall be a registered nurse, who has demonstrated expertise in
21 the area of pain management;

22 (iii) 1 shall be a licensed practical nurse; and

23 (iv) 1 shall be a consumer member, who is knowledgeable in the field
24 of chemical dependency.

25 (d) (1) The Board shall determine the term of a member of the Committee.

26 (2) At the end of a term, a member continues to serve until a successor is
27 appointed and qualifies.

28 (3) A Committee member who is appointed after a term has begun serves
29 only for the rest of the term and until a successor is appointed and qualifies.

1 (4) The Board may remove a Committee member for incompetence or
2 misconduct.

3 (e) (1) The Committee shall elect a chairperson and a vice-chairperson.

4 (2) The manner of election of officers shall be as the Committee determines.

5 (f) A majority of the members then serving on the Committee Board is a quorum.

6 (g) The Committee shall determine the times and places of its meetings.

7 (h) Each member of the Committee is entitled to:

8 (1) Compensation in accordance with the State budget; and

9 (2) Reimbursement for expenses under the Standard State Travel
10 Regulations, as provided in the State budget.

11 (i) The Board may employ a staff to carry out the activities of the Committee in
12 accordance with the State budget.

13 (j) In addition to the powers set forth elsewhere in this subtitle, the Committee
14 may:

15 (1) Evaluate those nurses, nursing assistants, medication technicians,
16 electrologists, **DIRECT-ENTRY MIDWIVES**, or applicants who request participation in the
17 program according to the guidelines prescribed by the Board and consider the
18 recommendations for admission into the program;

19 (2) Review and designate those treatment facilities and services to which
20 nurses, nursing assistants, medication technicians, electrologists, **DIRECT-ENTRY**
21 **MIDWIVES**, or applicants in the program may be referred;

22 (3) Receive and review information concerning a nurse, nursing assistant,
23 medication technician, electrologist, **DIRECT-ENTRY MIDWIFE**, or applicant participating
24 in the program;

25 (4) Consider in the case of each nurse, nursing assistant, medication
26 technician, electrologist, **DIRECT-ENTRY MIDWIFE**, or applicant participating in a
27 program whether the nurse, nursing assistant, medication technician, electrologist,
28 **DIRECT-ENTRY MIDWIFE**, or applicant may with safety continue or resume the practice
29 of nursing or delegated nursing functions [or], electrology, **OR DIRECT-ENTRY**
30 **MIDWIFERY**; and

1 (5) Have meetings as necessary to consider the requests of nurses, nursing
2 assistants, medication technicians, electrologists, **DIRECT-ENTRY MIDWIVES**, or
3 applicants to participate in the program, and consider reports regarding nurses, nursing
4 assistants, medication technicians, electrologists, **DIRECT-ENTRY MIDWIVES**, or
5 applicants participating in the program.

6 (k) In addition to the duties set forth elsewhere in this subtitle, the Committee
7 shall:

8 (1) Prepare reports to be submitted to the Board; and

9 (2) Set forth in writing for each nurse, nursing assistant, medication
10 technician, electrologist, **DIRECT-ENTRY MIDWIFE**, or applicant participating in the
11 program a rehabilitation program established for that nurse, nursing assistant, medication
12 technician, electrologist, **DIRECT-ENTRY MIDWIFE**, or applicant, including the
13 requirements for supervision and surveillance.

14 (l) The Committee shall inform each nurse, nursing assistant, medication
15 technician, electrologist, **DIRECT-ENTRY MIDWIFE**, or applicant who requests
16 participation in the program of:

17 (1) The procedures followed in the program;

18 (2) The rights and responsibilities of the nurse, nursing assistant,
19 medication technician, electrologist, **DIRECT-ENTRY MIDWIFE**, or applicant in the
20 program; and

21 (3) The possible results of noncompliance with the program.

22 (m) (1) Each nurse, nursing assistant, medication technician, electrologist,
23 **DIRECT-ENTRY MIDWIFE**, or applicant who requests to participate in the program shall
24 agree to cooperate with the individual rehabilitation program designed by the Committee.

25 (2) Any failure to comply with the provisions of a rehabilitation program
26 may result in termination of the nurse's, nursing assistant's, medication technician's,
27 electrologist's, **DIRECT-ENTRY MIDWIFE'S**, or applicant's participation in the program.

28 (3) The Committee shall report the name and license number of a nurse
29 **[or]**, electrologist, **OR DIRECT-ENTRY MIDWIFE**, the name and certificate number of a
30 nursing assistant or medication technician, or the name of an applicant who is expelled
31 from the program for failure to comply with the conditions of the program.

32 (4) (i) The program shall transfer to the Board all the records of any
33 nurse, nursing assistant, medication technician, electrologist, **DIRECT-ENTRY MIDWIFE**,
34 or applicant expelled from the program.

1 (ii) The Board may initiate disciplinary action based on the failure
2 of the nurse, nursing assistant, medication technician, electrologist, **DIRECT-ENTRY**
3 **MIDWIFE**, or applicant to comply with the conditions of the program in accordance with the
4 provisions of §§ 8-316 and 8-317 [or], §§ 8-6B-18 and 8-6B-19, **OR 8-6C-20** of this title.

5 (n) After the Committee has determined that a nurse, nursing assistant,
6 medication technician, electrologist, **DIRECT-ENTRY MIDWIFE**, or applicant has been
7 rehabilitated, the Committee shall purge and destroy all records concerning a nurse's,
8 nursing assistant's, medication technician's, electrologist's, **DIRECT-ENTRY MIDWIFE'S**,
9 or applicant's participation in the program.

10 (o) All Board and Committee records of a proceeding concerning the
11 rehabilitation of a nurse, nursing assistant, medication technician, electrologist,
12 **DIRECT-ENTRY MIDWIFE**, or applicant in the program are confidential and are not subject
13 to discovery or subpoena in any civil or criminal action.

14 (p) The Board shall provide for the representation of any person making reports
15 to the Committee or the Board under this section in any action for defamation directly
16 resulting from reports or information given to the Committee or the Board regarding a
17 nurse's, nursing assistant's, medication technician's, electrologist's, **DIRECT-ENTRY**
18 **MIDWIFE'S**, or applicant's participation in the program.

19 (q) Beginning July 1, 1990, and on a regular basis thereafter, the Board shall
20 require reports from the Committee. The reports shall include:

21 (1) Information concerning the number of cases accepted, denied, or
22 terminated with compliance or noncompliance; and

23 (2) A cost analysis of the program.

24 8-317.

25 (a) Except as otherwise provided in the Administrative Procedure Act and in
26 subsection (g) of this section, before the Board takes any action under § 8-312 or § 8-316
27 of this subtitle or § 8-404 **OR § 8-6C-20** of this title, it shall give the person against whom
28 the action is contemplated an opportunity for a hearing before the Board.

29 **SUBTITLE 6C. DIRECT-ENTRY MIDWIVES.**

30 **8-6C-01.**

31 **(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS**
32 **INDICATED.**

1 (B) "ACME" MEANS THE ACCREDITATION COMMISSION FOR MIDWIFERY
2 EDUCATION, OR A SUCCESSOR ORGANIZATION THAT IS AN ACCREDITING AGENCY
3 FOR NURSE-MIDWIFERY AND DIRECT-ENTRY MIDWIFERY EDUCATION PROGRAMS
4 AND IS APPROVED BY THE UNITED STATES DEPARTMENT OF EDUCATION.

5 (C) "AIMM" MEANS THE ASSOCIATION OF INDEPENDENT MIDWIVES OF
6 MARYLAND OR A SUCCESSOR ORGANIZATION THAT IS A PROFESSIONAL
7 ORGANIZATION REPRESENTING INDEPENDENT MIDWIVES IN THE STATE.

8 (D) "BOARD" MEANS THE STATE BOARD OF NURSING.

9 (E) (1) "CERTIFIED DIRECT-ENTRY MIDWIFE" MEANS AN INDIVIDUAL
10 WHO HAS BEEN GRANTED A LICENSE UNDER THIS SUBTITLE TO PRACTICE
11 DIRECT-ENTRY MIDWIFERY.

12 (2) "CERTIFIED DIRECT-ENTRY MIDWIFE" DOES NOT INCLUDE A
13 LICENSED NURSE CERTIFIED AS A NURSE-MIDWIFE UNDER THIS TITLE.

14 (F) "COMMITTEE" MEANS THE DIRECT-ENTRY MIDWIFERY ADVISORY
15 COMMITTEE ESTABLISHED UNDER § 8-6C-10 OF THIS SUBTITLE.

16 (G) "HEALTH CARE PRACTITIONER" MEANS:

17 (1) AN INDIVIDUAL CERTIFIED AS A NURSE-MIDWIFE OR A NURSE
18 PRACTITIONER UNDER THIS TITLE;

19 (2) A PHYSICIAN LICENSED UNDER TITLE 14 OF THIS ARTICLE; OR

20 (3) A PHYSICIAN ASSISTANT LICENSED UNDER TITLE 15 OF THIS
21 ARTICLE.

22 (H) (1) "HEALTH CARE PROVIDER" MEANS A HEALTH CARE
23 PRACTITIONER OR A HOSPITAL.

24 (2) "HEALTH CARE PROVIDER" INCLUDES AGENTS OR EMPLOYEES OF
25 A HEALTH CARE PRACTITIONER OR A HOSPITAL.

26 (I) "HOSPITAL" HAS THE MEANING STATED IN § 19-301 OF THE HEALTH -
27 GENERAL ARTICLE.

28 (J) "LICENSE" MEANS, UNLESS THE CONTEXT REQUIRES OTHERWISE, A
29 LICENSE ISSUED BY THE BOARD TO PRACTICE DIRECT-ENTRY MIDWIFERY.

1 (K) "LOW-RISK PREGNANCY" MEANS A PREGNANCY, LABOR, AND DELIVERY
2 AND POSTPARTUM, NEWBORN, AND INTERCONCEPTUAL CARE THAT DOES NOT
3 INCLUDE A CONDITION THAT REQUIRES A MANDATORY TRANSFER UNDER
4 REGULATIONS ADOPTED BY THE BOARD.

5 (L) "MANA" MEANS THE MIDWIVES ALLIANCE OF NORTH AMERICA, OR A
6 SUCCESSOR ORGANIZATION THAT IS A PROFESSIONAL MEMBERSHIP ORGANIZATION
7 THAT PROMOTES EXCELLENCE IN MIDWIFERY PRACTICE.

8 (M) "MANA STATS" MEANS THE WEB-BASED PROSPECTIVE STATISTICS
9 REPORTING SYSTEM HOUSED BY MANA, OR A SUCCESSOR NATIONAL,
10 HIGH-QUALITY STATISTICS REPORTING SYSTEM SPECIFIED BY THE BOARD.

11 (N) "MEAC" MEANS THE MIDWIFERY EDUCATION AND ACCREDITATION
12 COUNCIL, OR A SUCCESSOR ORGANIZATION THAT IS A NATIONAL ACCREDITATION
13 AGENCY FOR MIDWIFERY EDUCATION APPROVED BY THE UNITED STATES
14 DEPARTMENT OF EDUCATION.

15 (O) "NARM" MEANS THE NORTH AMERICAN REGISTRY OF MIDWIVES, OR
16 A SUCCESSOR ORGANIZATION THAT IS AN INTERNATIONAL CERTIFICATION AGENCY
17 THAT ESTABLISHES AND ADMINISTERS CERTIFICATION FOR THE CERTIFIED
18 PROFESSIONAL MIDWIFE CREDENTIAL.

19 (P) (1) "PATIENT" MEANS A WOMAN FOR WHOM A CERTIFIED
20 DIRECT-ENTRY MIDWIFE PERFORMS SERVICES.

21 (2) "PATIENT" INCLUDES A WOMAN'S NEWBORN FOR THE PURPOSE
22 OF PERINATAL OR POSTPARTUM CARE.

23 (Q) "POSTPARTUM PERIOD" MEANS THE FIRST 6 WEEKS AFTER DELIVERY.

24 (R) (1) "PRACTICE DIRECT-ENTRY MIDWIFERY" MEANS:

25 (I) PROVIDING PRIMARY MATERNITY CARE THAT IS
26 CONSISTENT WITH A MIDWIFE'S TRAINING, EDUCATION, AND EXPERIENCE TO
27 PATIENTS THROUGHOUT THE CHILDBEARING CYCLE; AND

28 (II) IDENTIFYING AND REFERRING PATIENTS WHO REQUIRE
29 MEDICAL CARE TO AN APPROPRIATE HEALTH CARE PROVIDER.

30 (2) "PRACTICE DIRECT-ENTRY MIDWIFERY" INCLUDES THE
31 ACTIVITIES DESCRIBED IN § 8-6C-02 OF THIS SUBTITLE.

1 **8-6C-02.**

2 **(A) THE PRACTICE OF DIRECT-ENTRY MIDWIFERY INCLUDES:**

3 **(1) PROVIDING THE NECESSARY SUPERVISION, CARE, AND ADVICE TO**
4 **A PATIENT DURING A LOW-RISK PREGNANCY, LABOR, DELIVERY, AND POSTPARTUM**
5 **PERIOD; AND**

6 **(2) NEWBORN CARE DESCRIBED UNDER § 8-6C-06 OF THIS**
7 **SUBTITLE, THAT IS PROVIDED IN A MANNER THAT IS:**

8 **(I) CONSISTENT WITH NATIONAL DIRECT-ENTRY MIDWIFERY**
9 **STANDARDS; AND**

10 **(II) BASED ON THE ACQUISITION OF CLINICAL SKILLS**
11 **NECESSARY FOR THE CARE OF PREGNANT WOMEN AND NEWBORNS, INCLUDING**
12 **ANTEPARTUM, INTRAPARTUM, AND POSTPARTUM CARE.**

13 **(B) THE PRACTICE OF DIRECT-ENTRY MIDWIFERY ALSO INCLUDES:**

14 **(1) OBTAINING INFORMED CONSENT TO PROVIDE SERVICES TO THE**
15 **PATIENT;**

16 **(2) OBTAINING A HEALTH HISTORY OF THE PATIENT, INCLUDING A**
17 **PHYSICAL EXAMINATION;**

18 **(3) DEVELOPING A WRITTEN PLAN OF CARE SPECIFIC TO THE**
19 **PATIENT, TO ENSURE CONTINUITY OF CARE THROUGHOUT THE ANTEPARTUM,**
20 **INTRAPARTUM, AND POSTPARTUM PERIODS, THAT INCLUDES:**

21 **(I) ANY GENERAL RISK FACTORS ASSOCIATED WITH THE**
22 **SERVICES TO BE PROVIDED;**

23 **(II) ANY SPECIFIC RISK FACTORS PERTAINING TO THE**
24 **INDIVIDUAL HEALTH AND CIRCUMSTANCES OF THE INDIVIDUAL PATIENT;**

25 **(III) THE CONDITIONS UNDER WHICH CONSULTATION,**
26 **TRANSFER OF CARE, OR TRANSPORT OF THE PATIENT MAY BE IMPLEMENTED; AND**

27 **(IV) A PLAN TO BE FOLLOWED IN THE EVENT OF AN EMERGENCY,**
28 **INCLUDING A PLAN FOR TRANSPORTATION;**

29 **(4) EVALUATING THE RESULTS OF PATIENT CARE;**

1 **(5) CONSULTING AND COLLABORATING WITH, AND REFERRING AND**
2 **TRANSFERRING CARE TO, A HEALTH CARE PROVIDER, AS REQUIRED;**

3 **(6) REFERRAL OF ALL PATIENTS, PRIOR TO DELIVERY, TO A**
4 **PEDIATRIC CARE PROVIDER FOR CARE OF THE NEWBORN;**

5 **(7) AS RECOMMENDED BY THE COMMITTEE AND APPROVED BY THE**
6 **BOARD:**

7 **(I) OBTAINING AND ADMINISTERING MEDICATIONS; AND**

8 **(II) OBTAINING AND USING EQUIPMENT AND DEVICES;**

9 **(8) OBTAINING APPROPRIATE SCREENING AND TESTING, INCLUDING**
10 **LABORATORY TESTS, URINALYSIS, AND ULTRASOUND;**

11 **(9) PROVIDING PRENATAL CARE DURING THE ANTEPARTUM PERIOD,**
12 **WITH CONSULTATION OR REFERRAL AS REQUIRED;**

13 **(10) PROVIDING CARE DURING THE INTRAPARTUM PERIOD,**
14 **INCLUDING:**

15 **(I) MONITORING AND EVALUATING THE CONDITION OF THE**
16 **PATIENT AND FETUS;**

17 **(II) PERFORMING EMERGENCY PROCEDURES, INCLUDING:**

18 1. **ADMINISTERING APPROVED MEDICATIONS;**

19 2. **ADMINISTERING INTRAVENOUS FLUIDS FOR**
20 **STABILIZATION;**

21 3. **PERFORMING AN EMERGENCY EPISIOTOMY; AND**

22 4. **PROVIDING CARE WHILE ON THE WAY TO A HOSPITAL;**
23 **AND**

24 **(III) DELIVERING IN AN OUT-OF-HOSPITAL SETTING;**

25 **(11) PARTICIPATING IN PEER REVIEW AS REQUIRED UNDER §**
26 **8-6C-18(E)(1)(II) OF THIS SUBTITLE;**

1 **(12) PROVIDING CARE DURING THE POSTPARTUM PERIOD,**
2 **INCLUDING:**

3 **(I) WITH THE ADMINISTRATION OF A LOCAL ANESTHETIC:**

4 1. **SUTURING OF FIRST AND SECOND DEGREE PERINEAL**
5 **OR LABIAL LACERATIONS; AND**

6 2. **PERFORMING AN EPISIOTOMY; AND**

7 **(II) MAKING FURTHER CONTACT WITH THE PATIENT WITHIN 48**
8 **HOURS, WITHIN 2 WEEKS, AND AT 6 WEEKS AFTER THE DELIVERY TO ASSESS FOR**
9 **HEMORRHAGE, PREECLAMPSIA, THROMBO-EMBOLISM, INFECTION, AND**
10 **EMOTIONAL WELL-BEING;**

11 **(13) PROVIDING ROUTINE CARE FOR THE NEWBORN FOR UP TO 72**
12 **HOURS AFTER DELIVERY, EXCLUSIVE OF ADMINISTERING IMMUNIZATIONS,**
13 **INCLUDING:**

14 **(I) IMMEDIATE CARE AT BIRTH, INCLUDING RESUSCITATING AS**
15 **NEEDED, PERFORMING A NEWBORN EXAMINATION, AND ADMINISTERING**
16 **INTRAMUSCULAR VITAMIN K AND EYE OINTMENT FOR PREVENTION OF**
17 **OPHTHALMIA NEONATORUM; AND**

18 **(II) 1. SUBJECT TO ITEM 2 OF THIS ITEM, PERFORMING**
19 **CRITICAL CONGENITAL HEART DISEASE SCREENING, IN ACCORDANCE WITH**
20 **REGULATIONS ADOPTED BY THE BOARD, ON A NEWBORN BETWEEN 24 HOURS AND**
21 **48 HOURS AFTER DELIVERY; OR**

22 2. **IF UNABLE TO PERFORM THE SCREENING UNDER**
23 **ITEM 1 OF THIS ITEM, REFERRING THE NEWBORN TO A HEALTH CARE PROVIDER TO**
24 **PERFORM THE SCREENING BETWEEN 24 HOURS AND 48 HOURS AFTER DELIVERY;**

25 **(14) WITHIN 24 HOURS AFTER DELIVERY:**

26 **(I) NOTIFYING A PEDIATRIC CARE PROVIDER OF THE**
27 **DELIVERY;**

28 **(II) TRANSFERRING HEALTH RECORDS TO THE PEDIATRIC**
29 **CARE PROVIDER; AND**

30 **(III) RECOMMENDING TO THE PATIENT THAT THE NEWBORN BE**
31 **SEEN BY A PEDIATRIC CARE PROVIDER WITHIN 24 HOURS AFTER DELIVERY;**

1 **(15) PROVIDING THE FOLLOWING CARE OF THE NEWBORN AFTER THE**
2 **FIRST 72 HOURS AFTER DELIVERY:**

3 **(I) WEIGHT CHECKS AND GENERAL OBSERVATION OF THE**
4 **NEWBORN'S ACTIVITY, WITH ABNORMAL FINDINGS COMMUNICATED TO THE**
5 **NEWBORN'S PEDIATRIC CARE PROVIDER;**

6 **(II) REFERRAL FOR METABOLIC SCREENING, CRITICAL**
7 **CONGENITAL HEART DISEASE SCREENING, AND HEARING SCREENING; AND**

8 **(III) BREASTFEEDING SUPPORT AND COUNSELING; AND**

9 **(16) PROVIDING LIMITED SERVICES TO THE PATIENT AFTER THE**
10 **POSTPARTUM PERIOD, INCLUDING:**

11 **(I) BREASTFEEDING SUPPORT AND COUNSELING; AND**

12 **(II) COUNSELING AND REFERRAL AS NECESSARY FOR ALL**
13 **FAMILY PLANNING METHODS, INCLUDING:**

14 1. **STERILIZATION; AND**

15 2. **LONG-ACTING REVERSIBLE CONTRACEPTIVES.**

16 **(C) THE PRACTICE OF DIRECT-ENTRY MIDWIFERY DOES NOT INCLUDE:**

17 **(1) PHARMACOLOGICAL INDUCTION OR AUGMENTATION OF LABOR;**

18 **(2) SURGICAL DELIVERY OR ANY SURGERY EXCEPT AN EMERGENCY**
19 **EPISIOTOMY;**

20 **(3) USE OF FORCEPS OR VACUUM EXTRACTOR;**

21 **(4) EXCEPT FOR THE ADMINISTRATION OF A LOCAL ANESTHETIC,**
22 **ADMINISTRATION OF AN ANESTHETIC;**

23 **(5) ADMINISTRATION OF ANY KIND OF NARCOTIC ANALGESIC; OR**

24 **(6) ADMINISTRATION OF ANY PRESCRIPTION MEDICATION IN A**
25 **MANNER THAT VIOLATES THIS SUBTITLE.**

1 **AT THE TIME OF DELIVERY, A CERTIFIED DIRECT-ENTRY MIDWIFE SHALL BE**
2 **ASSISTED BY A SECOND INDIVIDUAL WHO:**

3 **(1) HAS COMPLETED THE AMERICAN ACADEMY OF**
4 **PEDIATRICS/AMERICAN HEART ASSOCIATION NEONATAL RESUSCITATION**
5 **PROGRAM (NRP) WITHIN THE PREVIOUS 2 YEARS; AND**

6 **(2) HAS THE SKILLS AND EQUIPMENT NECESSARY TO PERFORM A**
7 **FULL RESUSCITATION OF THE NEWBORN IN ACCORDANCE WITH THE PRINCIPLES OF**
8 **NRP.**

9 **8-6C-04.**

10 **(A) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, AN INDIVIDUAL**
11 **SHALL BE LICENSED BY THE BOARD BEFORE THE INDIVIDUAL MAY PRACTICE**
12 **DIRECT-ENTRY MIDWIFERY IN THE STATE.**

13 **(B) THIS SECTION DOES NOT APPLY TO:**

14 **(1) AN INDIVIDUAL WHO ASSISTS AT A BIRTH IN AN EMERGENCY;**

15 **(2) AN INDIVIDUAL WHO IS LICENSED AS A HEALTH CARE**
16 **PRACTITIONER AND WHOSE SCOPE OF PRACTICE AUTHORIZES THE PRACTICE OF**
17 **DIRECT-ENTRY MIDWIFERY; OR**

18 **(3) A STUDENT WHO IS PRACTICING DIRECT-ENTRY MIDWIFERY**
19 **WHILE ENGAGED IN AN APPROVED CLINICAL MIDWIFE EDUCATIONAL EXPERIENCE**
20 **UNDER THE SUPERVISION OF A CERTIFIED DIRECT-ENTRY MIDWIFE.**

21 **8-6C-05.**

22 **(A) IF A PATIENT CHOOSES TO GIVE BIRTH AT HOME IN A SITUATION**
23 **PROHIBITED BY THIS SUBTITLE OR IN WHICH A CERTIFIED DIRECT-ENTRY MIDWIFE**
24 **RECOMMENDS TRANSFER, THE CERTIFIED DIRECT-ENTRY MIDWIFE SHALL:**

25 **(1) TRANSFER THE PATIENT AND THE PATIENT'S FAMILY TO AN**
26 **ALTERNATIVE CARE PROVIDER; AND**

27 **(2) CEASE TO TAKE RESPONSIBILITY FOR THE PATIENT'S**
28 **PREGNANCY CARE WITHIN 1 WEEK AFTER PROVIDING THE REFERRAL.**

1 **(B) IF BIRTH IS IMMINENT AND THE PATIENT REFUSES TO BE TRANSFERRED**
2 **AFTER THE CERTIFIED DIRECT-ENTRY MIDWIFE DETERMINES THAT A TRANSFER IS**
3 **NECESSARY, THE CERTIFIED DIRECT-ENTRY MIDWIFE SHALL CALL 9-1-1 AND**
4 **REMAIN WITH THE PATIENT UNTIL EMERGENCY SERVICES PERSONNEL ARRIVE.**

5 **8-6C-06.**

6 **(A) A CERTIFIED DIRECT-ENTRY MIDWIFE SHALL DEVELOP A GENERAL**
7 **WRITTEN PLAN FOR:**

8 **(1) EMERGENCY TRANSFER OF A PATIENT, NEWBORN, OR BOTH;**

9 **(2) TRANSPORT OF A NEWBORN TO A NEWBORN NURSERY OR**
10 **NEONATAL INTENSIVE CARE NURSERY; AND**

11 **(3) TRANSPORT OF A PATIENT TO AN APPROPRIATE HOSPITAL WITH**
12 **A LABOR AND DELIVERY UNIT.**

13 **(B) THE COMMITTEE SHALL REVIEW AND APPROVE THE PLAN REQUIRED**
14 **UNDER SUBSECTION (A) OF THIS SECTION.**

15 **(C) THE PLAN REQUIRED UNDER SUBSECTION (A) OF THIS SECTION SHALL**
16 **BE PROVIDED TO ANY HOSPITAL IDENTIFIED IN THE PLAN.**

17 **(D) IN ADDITION TO THE GENERAL WRITTEN PLAN REQUIRED UNDER**
18 **SUBSECTION (A) OF THIS SECTION, A CERTIFIED DIRECT-ENTRY MIDWIFE SHALL**
19 **PREPARE A PLAN THAT IS SPECIFIC TO EACH PATIENT AND SHARE THE PLAN WITH**
20 **THE PATIENT.**

21 **(E) (1) THE BOARD, IN CONSULTATION WITH STAKEHOLDERS, SHALL**
22 **DEVELOP A SINGLE UNIFORM FORM FOR USE IN ALL CASES IN WHICH A TRANSFER**
23 **OCCURS DURING LABOR.**

24 **(2) THE FORM SHALL INCLUDE THE MEDICAL INFORMATION NEEDED**
25 **BY THE HOSPITAL-BASED HEALTH CARE PROVIDER RECEIVING THE PATIENT.**

26 **(F) (1) UNLESS EMERGENCY SERVICES PERSONNEL IS BEING USED FOR**
27 **THE TRANSPORT, AFTER A DECISION TO TRANSPORT A PATIENT HAS BEEN MADE,**
28 **THE CERTIFIED DIRECT-ENTRY MIDWIFE SHALL CALL THE RECEIVING**
29 **HOSPITAL-BASED HEALTH CARE PROVIDER AND INFORM THE HEALTH CARE**
30 **PROVIDER OF THE INCOMING PATIENT.**

1 **(2) ON ARRIVAL AT THE HOSPITAL, THE CERTIFIED DIRECT-ENTRY**
2 **MIDWIFE SHALL PROVIDE TO THE STAFF OF THE HOSPITAL:**

3 **(I) THE STANDARD FORM DEVELOPED UNDER SUBSECTION (E)**
4 **OF THIS SECTION; AND**

5 **(II) THE COMPLETE MEDICAL RECORDS OF THE PATIENT.**

6 **8-6C-07.**

7 **(A) BEFORE INITIATING CARE, A CERTIFIED DIRECT-ENTRY MIDWIFE**
8 **SHALL OBTAIN A SIGNED COPY OF THE STANDARDIZED INFORMED CONSENT**
9 **AGREEMENT DEVELOPED BY THE COMMITTEE UNDER § 8-6C-11(A)(3) OF THIS**
10 **SUBTITLE.**

11 **(B) AN ADDITIONAL INFORMED CONSENT AGREEMENT SHALL INCLUDE**
12 **ACKNOWLEDGMENT BY THE PATIENT OF RECEIPT, AT A MINIMUM, OF THE**
13 **FOLLOWING:**

14 **(1) THE CERTIFIED DIRECT-ENTRY MIDWIFE'S TRAINING AND**
15 **EXPERIENCE;**

16 **(2) INSTRUCTIONS FOR OBTAINING A COPY OF THE REGULATIONS**
17 **ADOPTED BY THE BOARD UNDER THIS SUBTITLE;**

18 **(3) INSTRUCTIONS FOR OBTAINING A COPY OF THE NARM**
19 **CERTIFICATION REQUIREMENTS;**

20 **(4) INSTRUCTIONS FOR FILING A COMPLAINT WITH THE BOARD;**

21 **(5) NOTICE OF WHETHER THE CERTIFIED DIRECT-ENTRY MIDWIFE**
22 **HAS PROFESSIONAL LIABILITY INSURANCE COVERAGE;**

23 **(6) A DESCRIPTION OF THE PROCEDURES, BENEFITS, AND RISKS OF**
24 **HOME BIRTHS, INCLUDING THOSE CONDITIONS THAT MAY ARISE DURING DELIVERY;**
25 **AND**

26 **(7) ANY OTHER INFORMATION THAT THE BOARD REQUIRES.**

27 **8-6C-08.**

28 **A CERTIFIED DIRECT-ENTRY MIDWIFE MAY NOT OFFER A TRIAL OF LABOR TO**
29 **A PATIENT WHO HAS HAD A DELIVERY BY A CESAREAN SECTION, UNLESS:**

1 (1) **THE PATIENT HAD A LOW TRANSVERSE INCISION;**

2 (2) **AT THE ONSET OF LABOR, AT LEAST 18 MONTHS WILL HAVE**
3 **ELAPSED SINCE THE CESAREAN SECTION;**

4 (3) **THE CERTIFIED DIRECT-ENTRY MIDWIFE HAS RECOMMENDED**
5 **THAT THE PATIENT CONSULT WITH A HEALTH CARE PRACTITIONER TO REVIEW THE**
6 **PATIENT'S OPERATIVE REPORT AND DISCUSS THE PATIENT'S INDIVIDUAL LEVEL OF**
7 **RISK; AND**

8 (4) **THE CERTIFIED DIRECT-ENTRY MIDWIFE HAS OBTAINED**
9 **WRITTEN INFORMED CONSENT, IN ADDITION TO THE DOCUMENTS REQUIRED UNDER**
10 **§ 8-6C-07 OF THIS SUBTITLE, THAT SPECIFIES THE RISKS OF A VAGINAL BIRTH**
11 **AFTER CESAREAN SECTION WHEN PERFORMED IN AN OUT-OF-HOSPITAL SETTING.**

12 **8-6C-09.**

13 **(A) A CERTIFIED DIRECT-ENTRY MIDWIFE SHALL:**

14 (1) **SUBJECT TO THE CONSENT OF THE PATIENT, COLLECT DATA**
15 **UNDER MANA STATS FOR EACH PATIENT WHO INITIATES CARE;**

16 (2) **SUBMIT A COPY OF INDIVIDUAL MANA STATS ANNUALLY TO THE**
17 **COMMITTEE; AND**

18 (3) **NOTIFY THE COMMITTEE ANNUALLY OF THE NUMBER OF**
19 **PATIENTS WHO DECLINE CONSENT TO PARTICIPATE IN THE MANA STATS DATA**
20 **COLLECTION SYSTEM ON A FORM PRESCRIBED BY THE COMMITTEE.**

21 **(B) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, A CERTIFIED**
22 **DIRECT-ENTRY MIDWIFE SHALL BE SUBJECT TO THE SAME REPORTING**
23 **REQUIREMENTS AS OTHER HEALTH CARE PROVIDERS WHO PROVIDE CARE TO**
24 **INDIVIDUALS IN ACCORDANCE WITH THIS TITLE.**

25 **8-6C-10.**

26 **(A) THERE IS A DIRECT-ENTRY MIDWIFERY ADVISORY COMMITTEE**
27 **WITHIN THE BOARD.**

28 **(B) (1) THE COMMITTEE CONSISTS OF SEVEN MEMBERS APPOINTED BY**
29 **THE BOARD.**

1 **(2) OF THE SEVEN MEMBERS:**

2 **(I) SUBJECT TO PARAGRAPH (4) OF THIS SUBSECTION AND**
3 **SUBSECTION (D) OF THIS SECTION, THREE SHALL BE CERTIFIED DIRECT-ENTRY**
4 **MIDWIVES;**

5 **(II) SUBJECT TO PARAGRAPH (3) OF THIS SUBSECTION, TWO**
6 **SHALL BE LICENSED NURSES CERTIFIED AS NURSE-MIDWIVES WHO:**

7 **1. CURRENTLY PRACTICE IN AN OUT-OF-HOSPITAL**
8 **SETTING, INCLUDING A FREESTANDING BIRTH CENTER OR HOME BIRTH PRACTICE;**
9 **OR**

10 **2. HAVE A MINIMUM OF 2 YEARS OF CLINICAL**
11 **EXPERIENCE IN AN OUT-OF-HOSPITAL SETTING, INCLUDING A FREESTANDING**
12 **BIRTH CENTER OR HOME BIRTH PRACTICE;**

13 **(III) ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND**
14 **HOSPITAL ASSOCIATION; AND**

15 **(IV) ONE SHALL BE A CONSUMER MEMBER.**

16 **(3) IF A LICENSED NURSE CERTIFIED AS A NURSE-MIDWIFE WHO**
17 **MEETS THE REQUIREMENTS OF PARAGRAPH (2)(II) OF THIS SUBSECTION IS NOT**
18 **AVAILABLE, THE BOARD MAY WAIVE THE REQUIREMENTS OF PARAGRAPH (2)(II) OF**
19 **THIS SUBSECTION AND APPOINT ANY LICENSED NURSE CERTIFIED AS A**
20 **NURSE-MIDWIFE TO THE COMMITTEE.**

21 **(4) (I) THE BOARD SHALL APPOINT THE CERTIFIED**
22 **DIRECT-ENTRY MIDWIFE MEMBERS OF THE COMMITTEE FROM A LIST OF QUALIFIED**
23 **INDIVIDUALS SUBMITTED TO THE BOARD BY AIMM.**

24 **(II) THE BOARD MAY REQUEST AN ADDITIONAL LIST OF**
25 **QUALIFIED INDIVIDUALS FROM AIMM IF THE INITIAL LIST IS DETERMINED TO BE**
26 **INADEQUATE.**

27 **(C) EACH MEMBER OF THE COMMITTEE SHALL BE A CITIZEN OF THE**
28 **UNITED STATES AND A RESIDENT OF THE STATE.**

29 **(D) (1) EACH CERTIFIED DIRECT-ENTRY MIDWIFE MEMBER OF THE**
30 **COMMITTEE APPOINTED ON OR BEFORE SEPTEMBER 30, 2021:**

1 **(I) SHALL HAVE HELD A CERTIFIED PROFESSIONAL MIDWIFE**
2 **CREDENTIAL FROM NARM FOR AT LEAST 2 YEARS IMMEDIATELY BEFORE**
3 **APPOINTMENT;**

4 **(II) SHALL MEET THE LICENSURE REQUIREMENTS OF THIS**
5 **SUBTITLE; AND**

6 **(III) MAY NOT BE A LICENSED NURSE WHO IS CERTIFIED AS A**
7 **NURSE-MIDWIFE.**

8 **(2) EACH CERTIFIED DIRECT-ENTRY MIDWIFE MEMBER OF THE**
9 **COMMITTEE APPOINTED ON OR AFTER OCTOBER 1, 2021:**

10 **(I) SHALL HAVE BEEN CERTIFIED BY NARM FOR AT LEAST 5**
11 **YEARS IMMEDIATELY BEFORE APPOINTMENT; AND**

12 **(II) MAY NOT BE A LICENSED NURSE WHO IS CERTIFIED AS A**
13 **NURSE-MIDWIFE.**

14 **(E) THE CONSUMER MEMBER OF THE COMMITTEE:**

15 **(1) SHALL BE A MEMBER OF THE GENERAL PUBLIC;**

16 **(2) MAY NOT BE OR EVER HAVE BEEN:**

17 **(I) A CERTIFIED DIRECT-ENTRY MIDWIFE;**

18 **(II) A LICENSED NURSE CERTIFIED AS A MIDWIFE;**

19 **(III) A HEALTH CARE PROVIDER WHO IS DIRECTLY INVOLVED**
20 **WITH PREGNANCY OR LABOR; OR**

21 **(IV) IN TRAINING TO BE A CERTIFIED DIRECT-ENTRY MIDWIFE,**
22 **A LICENSED NURSE CERTIFIED AS A MIDWIFE, OR A HEALTH CARE PRACTITIONER**
23 **WHO IS DIRECTLY INVOLVED WITH PREGNANCY OR LABOR;**

24 **(3) MAY NOT HAVE A HOUSEHOLD MEMBER WHO IS:**

25 **(I) A CERTIFIED DIRECT-ENTRY MIDWIFE, A LICENSED NURSE**
26 **WHO IS CERTIFIED AS A NURSE-MIDWIFE, A HEALTH CARE PRACTITIONER WHO IS**
27 **DIRECTLY INVOLVED WITH PREGNANCY OR LABOR; OR**

1 **(II) IN TRAINING TO BE A CERTIFIED DIRECT-ENTRY MIDWIFE,**
2 **A LICENSED NURSE WHO IS CERTIFIED AS A NURSE-MIDWIFE, OR A HEALTH CARE**
3 **PRACTITIONER WHO IS DIRECTLY INVOLVED WITH PREGNANCY OR LABOR;**

4 **(4) MAY NOT:**

5 **(I) PARTICIPATE OR EVER HAVE PARTICIPATED IN A**
6 **COMMERCIAL OR PROFESSIONAL FIELD RELATED TO THE PRACTICE OF**
7 **DIRECT-ENTRY MIDWIFERY;**

8 **(II) HAVE A HOUSEHOLD MEMBER WHO PARTICIPATES IN A**
9 **COMMERCIAL OR PROFESSIONAL FIELD RELATED TO THE PRACTICE OF**
10 **DIRECT-ENTRY MIDWIFERY; OR**

11 **(III) HAVE, OR HAVE HAD WITHIN 2 YEARS BEFORE**
12 **APPOINTMENT, A SUBSTANTIAL FINANCIAL INTEREST IN A PERSON WHO IS**
13 **REGULATED BY THE BOARD.**

14 **(F) THE COMMITTEE SHALL ELECT A CHAIR FROM AMONG ITS MEMBERS TO**
15 **A 2-YEAR TERM.**

16 **(G) (1) THE TERM OF A MEMBER IS 3 YEARS.**

17 **(2) THE TERMS OF THE MEMBERS ARE STAGGERED AS REQUIRED BY**
18 **THE TERMS PROVIDED FOR MEMBERS OF THE COMMITTEE ON OCTOBER 1, 2015.**

19 **(3) AT THE END OF A TERM, A MEMBER CONTINUES TO SERVE UNTIL**
20 **A SUCCESSOR IS APPOINTED AND QUALIFIES.**

21 **(4) A MEMBER WHO IS APPOINTED AFTER A TERM HAS BEGUN SERVES**
22 **ONLY FOR THE REST OF THE TERM AND UNTIL A SUCCESSOR IS APPOINTED AND**
23 **QUALIFIES.**

24 **(5) A MEMBER MAY NOT SERVE MORE THAN TWO CONSECUTIVE FULL**
25 **TERMS.**

26 **(6) TO THE EXTENT PRACTICABLE, THE BOARD SHALL FILL ANY**
27 **VACANCY ON THE COMMITTEE WITHIN 60 DAYS OF THE DATE OF THE VACANCY.**

28 **(H) A MAJORITY OF THE FULL AUTHORIZED MEMBERSHIP OF THE**
29 **COMMITTEE IS A QUORUM.**

1 **(I) IN ADDITION TO ANY OTHER MEETING REQUIREMENTS OF THIS TITLE,**
2 **THE COMMITTEE SHALL MEET:**

3 **(1) AT THE REQUEST OF THE EXECUTIVE DIRECTOR OF THE BOARD;**
4 **AND**

5 **(2) AS NECESSARY TO CONDUCT BOARD OR COMMITTEE BUSINESS.**

6 **(J) IN ACCORDANCE WITH THE STATE BUDGET, EACH MEMBER OF THE**
7 **COMMITTEE IS ENTITLED TO:**

8 **(1) COMPENSATION, AT A RATE DETERMINED BY THE BOARD, FOR**
9 **EACH DAY, OR PART OF A DAY, ON WHICH THE MEMBER IS ENGAGED IN THE DUTIES**
10 **OF THE COMMITTEE; AND**

11 **(2) REIMBURSEMENT FOR EXPENSES UNDER THE STANDARD STATE**
12 **TRAVEL REGULATIONS.**

13 **(K) (1) THE BOARD MAY REMOVE A MEMBER FOR INCOMPETENCE OR**
14 **MISCONDUCT.**

15 **(2) THE BOARD MAY REMOVE A MEMBER WHO IS ABSENT FROM TWO**
16 **SUCCESSIVE COMMITTEE MEETINGS WITHOUT ADEQUATE REASON.**

17 **8-6C-11.**

18 **(A) IN ADDITION TO THE DUTIES SET FORTH ELSEWHERE IN THIS SUBTITLE,**
19 **THE COMMITTEE SHALL:**

20 **(1) REVIEW APPLICATIONS FOR LICENSURE AS A CERTIFIED**
21 **DIRECT-ENTRY MIDWIFE AND MAKE RECOMMENDATIONS TO THE BOARD**
22 **REGARDING APPLICANTS;**

23 **(2) MAINTAIN A LIST OF ALL CERTIFIED DIRECT-ENTRY MIDWIVES;**

24 **(3) CREATE A STANDARDIZED INFORMED CONSENT DOCUMENT**
25 **OUTLINING THE PROCEDURES, RISKS, AND BENEFITS OF OUT-OF-HOSPITAL BIRTH**
26 **TO BE USED BY ALL CERTIFIED DIRECT-ENTRY MIDWIVES;**

27 **(4) MAKE RECOMMENDATIONS TO THE BOARD REGARDING**
28 **CONTINUING EDUCATION REQUIREMENTS FOR CERTIFIED DIRECT-ENTRY**
29 **MIDWIVES;**

1 **(5) REVIEW ADVERTISING BY CERTIFIED DIRECT-ENTRY MIDWIVES**
2 **AND BY INSTITUTIONS THAT OFFER A DIRECT-ENTRY MIDWIFE PROGRAM AND MAKE**
3 **RECOMMENDATIONS TO THE BOARD, AS NECESSARY;**

4 **(6) ADVISE THE BOARD ON MATTERS RELATING TO THE PRACTICE OF**
5 **DIRECT-ENTRY MIDWIFERY;**

6 **(7) COLLECT MANA STATS ANNUAL SUMMARY REPORTS FROM EACH**
7 **CERTIFIED DIRECT-ENTRY MIDWIFE;**

8 **(8) MAKE RECOMMENDATIONS TO THE BOARD REGARDING**
9 **REGULATIONS RELATING TO THE PRACTICE OF DIRECT-ENTRY MIDWIFERY THAT**
10 **ARE NECESSARY TO CARRY OUT THE PROVISIONS OF THE SUBTITLE, INCLUDING**
11 **REGULATIONS THAT:**

12 **(i) DEFINE SPECIFIC CONDITIONS REQUIRING TRANSFER OF**
13 **CARE OR CONSULTATION, INCLUDING:**

14 1. **PREEXISTING CONDITIONS;**

15 2. **PREGNANCY COMPLICATIONS;**

16 3. **PREGNANCY-RELATED COMPLICATIONS;**

17 4. **COMPLICATIONS ARISING DURING LABOR, DELIVERY,**
18 **OR THE IMMEDIATE POSTPARTUM PERIOD; AND**

19 5. **CONDITIONS ARISING DURING THE POSTPARTUM**
20 **PERIOD;**

21 **(ii) INCLUDE SPECIFIC CONDITIONS FOR WHICH THE**
22 **CERTIFIED DIRECT-ENTRY MIDWIFE MAY NOT UNDERTAKE THE CARE OF A PATIENT,**
23 **OR SHALL IMMEDIATELY REFER AND TRANSFER THE CARE OF THE PATIENT TO A**
24 **HEALTH CARE PROVIDER, INCLUDING:**

25 1. **KNOWN NONCEPHALIC PRESENTATION AFTER 38**
26 **WEEKS; AND**

27 2. **KNOWN MULTIPLE GESTATION;**

28 **(iii) INCLUDE SPECIFIC CONDITIONS FOR WHICH THE**
29 **CERTIFIED DIRECT-ENTRY MIDWIFE SHALL:**

1 1. CONSULT WITH A HEALTH CARE PROVIDER; AND

2 2. PROVIDE FOR DOCUMENTATION OF THE
3 CONSULTATION AND COMMUNICATION OF THE CONSULTATION TO THE PATIENT;
4 AND

5 (IV) 1. INCLUDE SPECIFIC CONDITIONS THAT MAY ARISE
6 DURING LABOR OR THE POSTPARTUM PERIOD THAT REQUIRE IMMEDIATE
7 TRANSFER OF THE PATIENT OR THE NEWBORN TO A HOSPITAL; OR

8 2. IF TRANSFER IS NOT POSSIBLE BECAUSE OF
9 IMMINENT DELIVERY, INCLUDE A REQUIREMENT THAT THE CERTIFIED
10 DIRECT-ENTRY MIDWIFE CONSULT WITH A HOSPITAL-BASED HEALTH CARE
11 PRACTITIONER FOR GUIDANCE ON FURTHER MANAGEMENT AND TO DETERMINE
12 WHEN TRANSFER MAY BE SAFELY ARRANGED, IF REQUIRED;

13 (9) AT THE REQUEST OF THE BOARD, INVESTIGATE COMPLAINTS
14 AGAINST CERTIFIED DIRECT-ENTRY MIDWIVES;

15 (10) KEEP A RECORD OF THE COMMITTEE'S PROCEEDINGS; AND

16 (11) SUBMIT AN ANNUAL REPORT TO THE BOARD, INCLUDING:

17 (i) THE NUMBER OF CERTIFIED DIRECT-ENTRY MIDWIVES
18 LICENSED IN THE STATE;

19 (ii) THE TOTAL NUMBER OF PLANNED HOME BIRTHS IN THE
20 STATE; AND

21 (iii) THE NUMBER AND CIRCUMSTANCES OF ALL:

22 1. HEALTHY BIRTH OUTCOMES ATTENDED BY
23 CERTIFIED DIRECT-ENTRY MIDWIVES;

24 2. ADVERSE BIRTH OUTCOMES ATTENDED BY
25 CERTIFIED DIRECT-ENTRY MIDWIVES; AND

26 3. BIRTHS IN WHICH A TRANSFER OR TRANSPORT WAS
27 MADE TO A HOSPITAL OR TO THE CARE OF ANOTHER HEALTH CARE PROVIDER.

1 (A) IN ADDITION TO THE EDUCATION AND TRAINING REQUIREMENTS
2 UNDER SUBSECTION (B) OF THIS SECTION, TO QUALIFY FOR A LICENSE, AN
3 APPLICANT SHALL:

4 (1) SUBMIT TO A CRIMINAL HISTORY RECORDS CHECK IN
5 ACCORDANCE WITH § 8-303 OF THIS TITLE;

6 (2) BE OF GOOD MORAL CHARACTER;

7 (3) BE A HIGH SCHOOL GRADUATE OR HAVE COMPLETED
8 EQUIVALENT EDUCATION;

9 (4) BE AT LEAST 21 YEARS OLD;

10 (5) HOLD A CURRENT CARDIOPULMONARY RESUSCITATION (CPR)
11 CERTIFICATION ISSUED BY THE AMERICAN RED CROSS OR THE AMERICAN HEART
12 ASSOCIATION; AND

13 (6) HOLD A CURRENT NEONATAL RESUSCITATION (NRP)
14 CERTIFICATION ISSUED BY THE AMERICAN ACADEMY OF PEDIATRICS.

15 (B) AN APPLICANT:

16 (1) SHALL HOLD A CURRENT VALID CERTIFIED PROFESSIONAL
17 MIDWIFE CREDENTIAL GRANTED BY NARM; AND

18 (2) (I) SHALL HAVE COMPLETED A MIDWIFERY EDUCATION
19 PROGRAM THAT IS ACCREDITED BY MEAC OR ACME; OR

20 (II) IF THE APPLICANT WAS CERTIFIED AS A CERTIFIED
21 PROFESSIONAL MIDWIFE ON OR BEFORE JANUARY 15, 2017, THROUGH A
22 NON-MEAC ACCREDITED PROGRAM, BUT OTHERWISE QUALIFIES FOR LICENSURE,
23 SHALL PROVIDE:

24 1. VERIFICATION OF COMPLETION OF
25 NARM-APPROVED CLINICAL REQUIREMENTS; AND

26 2. EVIDENCE OF COMPLETION, IN THE PAST 5 YEARS, OF
27 AN ADDITIONAL 40 HOURS OF ACCREDITED AND BOARD-APPROVED CONTINUING
28 EDUCATION UNITS, INCLUDING A MINIMUM OF 8 HOURS OF PHARMACOLOGY AND 14
29 HOURS OF OBSTETRIC EMERGENCY SKILLS TRAINING.

30 8-6C-13.

1 **TO APPLY FOR A LICENSE, AN APPLICANT SHALL:**

2 **(1) SUBMIT TO A CRIMINAL HISTORY RECORDS CHECK IN**
3 **ACCORDANCE WITH § 8-303 OF THIS TITLE;**

4 **(2) SUBMIT TO THE BOARD:**

5 **(I) AN APPLICATION ON THE FORM THAT THE BOARD**
6 **REQUIRES; AND**

7 **(II) WRITTEN, VERIFIED EVIDENCE THAT THE REQUIREMENT**
8 **OF ITEM (1) OF THIS SUBSECTION IS BEING MET; AND**

9 **(3) PAY TO THE BOARD A FEE SET BY THE BOARD.**

10 **8-6C-14.**

11 **(A) (1) THE BOARD SHALL SET REASONABLE FEES FOR THE ISSUANCE**
12 **AND RENEWAL OF LICENSES AND OTHER SERVICES IT PROVIDES TO CERTIFIED**
13 **DIRECT-ENTRY MIDWIVES.**

14 **(2) THE FEES CHARGED SHALL BE SET SO AS TO PRODUCE FUNDS TO**
15 **APPROXIMATE THE COST OF MAINTAINING THE LICENSURE AND OTHER SERVICES**
16 **PROVIDED TO CERTIFIED DIRECT-ENTRY MIDWIVES.**

17 **(B) (1) THE BOARD SHALL PAY ALL FEES COLLECTED UNDER THIS**
18 **SUBTITLE TO THE COMPTROLLER.**

19 **(2) THE COMPTROLLER SHALL DISTRIBUTE ALL FEES TO THE**
20 **BOARD.**

21 **(C) THE FEES COLLECTED UNDER THIS SECTION SHALL BE USED TO COVER**
22 **THE ACTUAL DOCUMENTED DIRECT AND INDIRECT COSTS OF FULFILLING THE**
23 **STATUTORY AND REGULATORY DUTIES OF THE BOARD AS PROVIDED BY THE**
24 **PROVISIONS OF THIS SUBTITLE.**

25 **8-6C-15.**

26 **(A) SUBJECT TO THE PROVISIONS OF THIS SECTION, THE BOARD MAY ISSUE**
27 **A LICENSE BY ENDORSEMENT AND WAIVE THE EDUCATION AND TRAINING**
28 **REQUIREMENTS UNDER § 8-6C-12 OF THIS SUBTITLE FOR AN INDIVIDUAL WHO IS**
29 **LICENSED TO PRACTICE DIRECT-ENTRY MIDWIFERY IN ANOTHER STATE.**

1 **(B) THE BOARD MAY ISSUE A LICENSE BY ENDORSEMENT UNDER THIS**
2 **SECTION ONLY IF THE APPLICANT:**

3 **(1) PAYS THE FEE REQUIRED BY THE BOARD; AND**

4 **(2) PROVIDES ADEQUATE EVIDENCE THAT THE APPLICANT:**

5 **(I) MEETS THE QUALIFICATIONS OTHERWISE REQUIRED BY**
6 **THIS SUBTITLE; AND**

7 **(II) BECAME LICENSED IN THE OTHER STATE AFTER MEETING**
8 **REQUIREMENTS THAT ARE SUBSTANTIALLY EQUIVALENT TO THE REQUIREMENTS**
9 **OF THIS SUBTITLE.**

10 **8-6C-16.**

11 **(A) SUBJECT TO SUBSECTION (C) OF THIS SECTION, THE BOARD SHALL**
12 **ISSUE A LICENSE TO AN APPLICANT WHO:**

13 **(1) MEETS THE REQUIREMENTS OF THIS SUBTITLE; AND**

14 **(2) PAYS A FEE SET BY THE BOARD.**

15 **(B) THE BOARD SHALL INCLUDE ON EACH LICENSE THAT THE BOARD**
16 **ISSUES A DESIGNATION OF CERTIFIED DIRECT-ENTRY MIDWIFE.**

17 **(C) (1) ON RECEIPT OF THE CRIMINAL HISTORY RECORD INFORMATION**
18 **OF AN APPLICANT FOR LICENSURE FORWARDED TO THE BOARD IN ACCORDANCE**
19 **WITH § 8-303 OF THIS TITLE, IN DETERMINING WHETHER TO GRANT A LICENSE, THE**
20 **BOARD SHALL CONSIDER:**

21 **(I) THE AGE AT WHICH THE CRIME WAS COMMITTED;**

22 **(II) THE CIRCUMSTANCES SURROUNDING THE CRIME;**

23 **(III) THE LENGTH OF TIME THAT HAS PASSED SINCE THE CRIME;**

24 **(IV) SUBSEQUENT WORK HISTORY;**

25 **(V) EMPLOYMENT AND CHARACTER REFERENCES; AND**

1 **(VI) OTHER EVIDENCE THAT DEMONSTRATES WHETHER THE**
2 **APPLICANT POSES A THREAT TO THE PUBLIC HEALTH OR SAFETY.**

3 **(2) THE BOARD MAY NOT ISSUE A LICENSE IF THE CRIMINAL HISTORY**
4 **RECORD INFORMATION REQUIRED UNDER § 8-303 OF THIS TITLE HAS NOT BEEN**
5 **RECEIVED.**

6 **8-6C-17.**

7 **A LICENSE ISSUED UNDER THIS SUBTITLE AUTHORIZES THE LICENSEE TO**
8 **PRACTICE DIRECT-ENTRY MIDWIFERY WHILE THE LICENSE IS EFFECTIVE.**

9 **8-6C-18.**

10 **(A) A LICENSE EXPIRES ON A DATE SET BY THE BOARD, UNLESS THE**
11 **LICENSE IS RENEWED FOR AN ADDITIONAL TERM AS PROVIDED IN THIS SECTION.**

12 **(B) A LICENSE MAY NOT BE RENEWED FOR A TERM LONGER THAN 2 YEARS.**

13 **(C) (1) AT LEAST 3 MONTHS BEFORE A LICENSE EXPIRES, THE BOARD**
14 **SHALL SEND TO THE LICENSEE A RENEWAL NOTICE BY:**

15 **(I) FIRST-CLASS MAIL TO THE LAST KNOWN MAILING ADDRESS**
16 **OF THE LICENSEE; OR**

17 **(II) ELECTRONIC MEANS TO THE LAST KNOWN ELECTRONIC**
18 **ADDRESS OF THE LICENSEE.**

19 **(2) A RENEWAL NOTICE SHALL STATE:**

20 **(I) THE DATE ON WHICH THE CURRENT LICENSE EXPIRES;**

21 **(II) THE DATE BY WHICH THE RENEWAL APPLICATION MUST BE**
22 **RECEIVED BY THE BOARD FOR THE RENEWAL TO BE ISSUED AND MAILED BEFORE**
23 **THE LICENSE EXPIRES; AND**

24 **(III) THE AMOUNT OF THE RENEWAL FEE.**

25 **(D) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, BEFORE A**
26 **LICENSE EXPIRES, THE LICENSEE PERIODICALLY MAY RENEW IT FOR AN**
27 **ADDITIONAL TERM IF THE LICENSEE:**

28 **(1) OTHERWISE IS ENTITLED TO BE LICENSED;**

1 **(2) PAYS TO THE BOARD A RENEWAL FEE SET BY THE BOARD; AND**

2 **(3) SUBMITS TO THE BOARD:**

3 **(I) A RENEWAL APPLICATION ON THE FORM THAT THE BOARD**
4 **REQUIRES; AND**

5 **(II) SATISFACTORY EVIDENCE OF COMPLIANCE WITH ANY**
6 **CONTINUING EDUCATION OR OTHER COMPETENCY REQUIREMENTS SET UNDER THIS**
7 **SUBTITLE FOR LICENSE RENEWAL.**

8 **(E) IN ADDITION TO ANY OTHER QUALIFICATIONS AND REQUIREMENTS**
9 **ESTABLISHED BY THE BOARD FOR LICENSE RENEWAL, THE BOARD SHALL REQUIRE:**

10 **(1) 20 ACCREDITED AND BOARD-APPROVED CONTINUING**
11 **EDUCATION UNITS TO BE COMPLETED EVERY 2 YEARS;**

12 **(2) 4 HOURS OF PEER REVIEW IN ACCORDANCE WITH NARM**
13 **STANDARDS FOR OFFICIAL PEER REVIEW TO BE COMPLETED EVERY 2 YEARS; AND**

14 **(3) SUBMISSION OF DATA ON EVERY PATIENT WHO CONSENTS TO**
15 **PARTICIPATE IN MANA STATS ON ANY FORM PRESCRIBED BY MANA AND IN**
16 **ACCORDANCE WITH THE POLICIES AND PROCEDURES OF MANA.**

17 **(F) SUBJECT TO SUBSECTION (L) OF THIS SECTION, THE BOARD SHALL**
18 **RENEW THE LICENSE OF EACH LICENSEE WHO MEETS THE REQUIREMENTS OF THIS**
19 **SECTION.**

20 **(G) IF A LICENSEE FAILS TO PROVIDE SATISFACTORY EVIDENCE OF**
21 **COMPLIANCE WITH ANY CONTINUING EDUCATION REQUIREMENTS SET UNDER THIS**
22 **SUBTITLE FOR LICENSE RENEWAL, OR COMPLIES WITH SUBSECTION (H) OF THIS**
23 **SECTION, THE BOARD SHALL PLACE THE LICENSEE ON INACTIVE STATUS.**

24 **(H) THE BOARD SHALL PLACE A LICENSEE ON INACTIVE STATUS IF THE**
25 **LICENSEE SUBMITS TO THE BOARD:**

26 **(1) AN APPLICATION FOR INACTIVE STATUS ON THE FORM REQUIRED**
27 **BY THE BOARD; AND**

28 **(2) THE INACTIVE STATUS FEE SET BY THE BOARD.**

1 **(I) THE BOARD SHALL REACTIVATE THE LICENSE OF AN INDIVIDUAL WHO**
2 **IS ON INACTIVE STATUS IF THE INDIVIDUAL:**

3 **(1) COMPLIES WITH ANY CONTINUING EDUCATION REQUIREMENT**
4 **ESTABLISHED BY THE BOARD FOR THIS PURPOSE;**

5 **(2) PAYS TO THE BOARD A REACTIVATION FEE SET BY THE BOARD;**
6 **AND**

7 **(3) IS OTHERWISE ENTITLED TO BE LICENSED.**

8 **(J) THE BOARD, IN ACCORDANCE WITH ITS REGULATIONS, SHALL**
9 **REINSTATE THE LICENSE OF AN INDIVIDUAL WHO HAS FAILED TO RENEW THE**
10 **LICENSE FOR ANY REASON IF THE INDIVIDUAL:**

11 **(1) IS OTHERWISE ENTITLED TO BE LICENSED;**

12 **(2) COMPLIES WITH ANY CONTINUING EDUCATION REQUIREMENT**
13 **ESTABLISHED BY THE BOARD FOR THIS PURPOSE;**

14 **(3) PAYS TO THE BOARD A REINSTATEMENT FEE SET BY THE BOARD;**

15 **(4) FOR AN EXPIRED LICENSE OR LAPSED LICENSE THAT HAS BEEN**
16 **EXPIRED OR LAPSED FOR MORE THAN 1 YEAR, COMPLETES A CRIMINAL HISTORY**
17 **RECORDS CHECK IN ACCORDANCE WITH § 8-303 OF THIS TITLE; AND**

18 **(5) APPLIES TO THE BOARD FOR REINSTATEMENT OF THE LICENSE**
19 **WITHIN 5 YEARS AFTER THE LICENSE EXPIRES.**

20 **(K) (1) THE BOARD MAY NOT REINSTATE THE LICENSE OF A CERTIFIED**
21 **DIRECT-ENTRY MIDWIFE WHO FAILS TO APPLY FOR REINSTATEMENT OF THE**
22 **LICENSE WITHIN 5 YEARS AFTER THE LICENSE EXPIRES.**

23 **(2) THE INDIVIDUAL MAY BECOME LICENSED BY MEETING THE**
24 **CURRENT REQUIREMENTS FOR OBTAINING A NEW LICENSE UNDER THIS SUBTITLE.**

25 **(L) (1) A LICENSEE SHALL SUBMIT TO AN ADDITIONAL CRIMINAL**
26 **HISTORY RECORDS CHECK EVERY 12 YEARS.**

27 **(2) ON RECEIPT OF THE CRIMINAL HISTORY RECORD INFORMATION**
28 **OF A LICENSEE FORWARDED TO THE BOARD IN ACCORDANCE WITH § 8-303 OF THIS**
29 **TITLE, IN DETERMINING WHETHER TO RENEW A LICENSE, THE BOARD SHALL**
30 **CONSIDER:**

- 1 (I) **THE AGE AT WHICH THE CRIME WAS COMMITTED;**
2 (II) **THE CIRCUMSTANCES SURROUNDING THE CRIME;**
3 (III) **THE LENGTH OF TIME THAT HAS PASSED SINCE THE CRIME;**
4 (IV) **SUBSEQUENT WORK HISTORY;**
5 (V) **EMPLOYMENT AND CHARACTER REFERENCES; AND**
6 (VI) **OTHER EVIDENCE THAT DEMONSTRATES WHETHER THE**
7 **APPLICANT POSES A THREAT TO THE PUBLIC HEALTH OR SAFETY.**

8 (3) **THE BOARD MAY NOT RENEW A LICENSE IF THE CRIMINAL**
9 **HISTORY RECORD INFORMATION REQUIRED UNDER § 8-303 OF THIS TITLE HAS NOT**
10 **BEEN RECEIVED.**

11 **8-6C-19.**

12 (A) **UNLESS THE BOARD AGREES TO ACCEPT THE SURRENDER OF THE**
13 **LICENSE:**

14 (1) **A CERTIFIED DIRECT-ENTRY MIDWIFE MAY NOT SURRENDER A**
15 **LICENSE; AND**

16 (2) **A LICENSE MAY NOT LAPSE BY OPERATION OF LAW WHILE THE**
17 **LICENSEE IS UNDER INVESTIGATION OR WHILE CHARGES ARE PENDING AGAINST**
18 **THE LICENSEE.**

19 (B) **THE BOARD MAY SET CONDITIONS ON AN AGREEMENT WITH THE**
20 **CERTIFIED DIRECT-ENTRY MIDWIFE UNDER INVESTIGATION OR AGAINST WHOM**
21 **CHARGES ARE PENDING TO ACCEPT SURRENDER OF THE LICENSE.**

22 **8-6C-20.**

23 (A) **SUBJECT TO THE HEARING PROVISIONS OF § 8-317 OF THIS TITLE, THE**
24 **BOARD MAY DENY A LICENSE TO AN APPLICANT, REPRIMAND A LICENSEE, PLACE A**
25 **LICENSEE ON PROBATION, OR SUSPEND OR REVOKE A LICENSE IF THE APPLICANT**
26 **OR LICENSEE:**

27 (1) **FRAUDULENTLY OR DECEPTIVELY OBTAINS OR ATTEMPTS TO**
28 **OBTAIN A LICENSE FOR THE APPLICANT OR FOR ANOTHER;**

1 **(2) FRAUDULENTLY OR DECEPTIVELY USES A LICENSE;**

2 **(3) IS DISCIPLINED BY A LICENSING, MILITARY, OR DISCIPLINARY**
3 **AUTHORITY IN THE STATE OR IN ANY OTHER STATE OR COUNTRY OR IS CONVICTED**
4 **OR DISCIPLINED BY A COURT IN THE STATE OR IN ANY OTHER STATE OR COUNTRY**
5 **FOR AN ACT THAT WOULD BE GROUNDS FOR DISCIPLINARY ACTION UNDER THE**
6 **BOARD'S DISCIPLINARY STATUTES;**

7 **(4) IS CONVICTED OF OR PLEADS GUILTY OR NOLO CONTENDERE TO**
8 **A FELONY OR TO A CRIME INVOLVING MORAL TURPITUDE, WHETHER OR NOT ANY**
9 **APPEAL OR OTHER PROCEEDING IS PENDING TO HAVE THE CONVICTION OR PLEA**
10 **SET ASIDE;**

11 **(5) WILLFULLY AND KNOWINGLY:**

12 **(I) FILES A FALSE REPORT OR RECORD OF AN INDIVIDUAL**
13 **UNDER THE LICENSEE'S CARE;**

14 **(II) GIVES ANY FALSE OR MISLEADING INFORMATION ABOUT A**
15 **MATERIAL MATTER IN AN EMPLOYMENT APPLICATION;**

16 **(III) FAILS TO FILE OR RECORD ANY HEALTH RECORD THAT IS**
17 **REQUIRED BY LAW;**

18 **(IV) OBSTRUCTS THE FILING OR RECORDING OF ANY HEALTH**
19 **RECORD AS REQUIRED BY LAW; OR**

20 **(V) INDUCES ANOTHER PERSON TO FAIL TO FILE OR RECORD**
21 **ANY HEALTH RECORD AS REQUIRED BY LAW;**

22 **(6) KNOWINGLY DOES ANY ACT THAT HAS BEEN DETERMINED BY THE**
23 **BOARD, IN ITS REGULATIONS, TO EXCEED THE SCOPE OF PRACTICE AUTHORIZED TO**
24 **THE INDIVIDUAL UNDER THIS SUBTITLE;**

25 **(7) PROVIDES PROFESSIONAL SERVICES WHILE:**

26 **(I) UNDER THE INFLUENCE OF ALCOHOL; OR**

27 **(II) USING ANY NARCOTIC OR CONTROLLED DANGEROUS**
28 **SUBSTANCE, AS DEFINED IN § 5-101 OF THE CRIMINAL LAW ARTICLE, OR OTHER**
29 **DRUG THAT IS IN EXCESS OF THERAPEUTIC AMOUNTS OR WITHOUT VALID MEDICAL**
30 **INDICATION;**

- 1 **(8) DOES AN ACT THAT IS INCONSISTENT WITH GENERALLY**
2 **ACCEPTED PROFESSIONAL STANDARDS IN THE PRACTICE OF DIRECT-ENTRY**
3 **MIDWIFERY;**
- 4 **(9) IS GROSSLY NEGLIGENT IN THE PRACTICE OF DIRECT-ENTRY**
5 **MIDWIFERY;**
- 6 **(10) HAS VIOLATED ANY PROVISION OF THIS TITLE;**
- 7 **(11) SUBMITS A FALSE STATEMENT TO COLLECT A FEE;**
- 8 **(12) IS PHYSICALLY OR MENTALLY INCOMPETENT;**
- 9 **(13) KNOWINGLY FAILS TO REPORT SUSPECTED CHILD ABUSE IN**
10 **VIOLATION OF § 5-704 OF THE FAMILY LAW ARTICLE;**
- 11 **(14) EXCEPT IN AN EMERGENCY LIFE-THREATENING SITUATION**
12 **WHERE IT IS NOT FEASIBLE OR PRACTICABLE, FAILS TO COMPLY WITH THE CENTERS**
13 **FOR DISEASE CONTROL AND PREVENTION'S GUIDELINES ON UNIVERSAL**
14 **PRECAUTIONS;**
- 15 **(15) IS IN INDEPENDENT PRACTICE AND FAILS TO DISPLAY THE**
16 **NOTICE REQUIRED UNDER § 8-6C-23 OF THIS SUBTITLE;**
- 17 **(16) IS HABITUALLY INTOXICATED;**
- 18 **(17) IS ADDICTED TO, OR HABITUALLY ABUSES, ANY NARCOTIC OR**
19 **CONTROLLED DANGEROUS SUBSTANCE AS DEFINED IN § 5-101 OF THE CRIMINAL**
20 **LAW ARTICLE;**
- 21 **(18) FAILS TO COOPERATE WITH A LAWFUL INVESTIGATION**
22 **CONDUCTED BY THE BOARD;**
- 23 **(19) IS EXPELLED FROM THE REHABILITATION PROGRAM**
24 **ESTABLISHED PURSUANT TO § 8-208 OF THIS TITLE FOR FAILURE TO COMPLY WITH**
25 **THE CONDITIONS OF THE PROGRAM;**
- 26 **(20) DELEGATES DIRECT-ENTRY MIDWIFERY ACTS OR**
27 **RESPONSIBILITIES TO AN INDIVIDUAL THAT THE APPLICANT OR LICENSEE KNOWS**
28 **OR HAS REASON TO KNOW LACKS THE ABILITY, KNOWLEDGE, OR REQUIRED**
29 **LICENSURE TO PERFORM;**

1 **(21) FAILS TO PROPERLY SUPERVISE INDIVIDUALS TO WHOM**
2 **DIRECT-ENTRY MIDWIFERY ACTS OR RESPONSIBILITIES HAVE BEEN DELEGATED;**

3 **(22) ENGAGES IN CONDUCT THAT VIOLATES THE PROFESSIONAL CODE**
4 **OF ETHICS;**

5 **(23) IS PROFESSIONALLY INCOMPETENT;**

6 **(24) PRACTICES DIRECT-ENTRY MIDWIFERY WITHOUT A LICENSE,**
7 **BEFORE OBTAINING OR RENEWING A LICENSE, INCLUDING ANY PERIOD WHEN THE**
8 **LICENSE HAS LAPSED;**

9 **(25) AFTER FAILING TO RENEW A LICENSE OR AFTER A LICENSE HAS**
10 **LAPSED, COMMITS ANY ACT THAT WOULD BE GROUNDS FOR DISCIPLINARY ACTION**
11 **UNDER THIS SECTION;**

12 **(26) PRACTICES DIRECT-ENTRY MIDWIFERY ON A NONRENEWED**
13 **LICENSE FOR A PERIOD OF 16 MONTHS OR LONGER;**

14 **(27) VIOLATES REGULATIONS ADOPTED BY THE BOARD OR AN ORDER**
15 **FROM THE BOARD;**

16 **(28) PERFORMS AN ACT THAT IS BEYOND THE LICENSEE'S**
17 **KNOWLEDGE AND SKILLS;**

18 **(29) FAILS TO SUBMIT TO A CRIMINAL HISTORY RECORDS CHECK IN**
19 **ACCORDANCE WITH § 8-303 OF THIS TITLE; OR**

20 **(30) WHEN ACTING IN A SUPERVISORY POSITION, DIRECTS ANOTHER**
21 **CERTIFIED DIRECT-ENTRY MIDWIFE TO PERFORM AN ACT THAT IS BEYOND THE**
22 **CERTIFIED DIRECT-ENTRY MIDWIFE'S KNOWLEDGE AND SKILLS.**

23 **(B) IF, AFTER A HEARING UNDER § 8-317 OF THIS TITLE, THE BOARD FINDS**
24 **THAT THERE ARE GROUNDS UNDER SUBSECTION (A) OF THIS SECTION TO SUSPEND**
25 **OR REVOKE A LICENSE, TO REPRIMAND A LICENSEE, OR TO PLACE A LICENSEE ON**
26 **PROBATION, THE BOARD MAY IMPOSE A PENALTY NOT EXCEEDING \$5,000 INSTEAD**
27 **OF OR IN ADDITION TO SUSPENDING OR REVOKING THE LICENSE, REPRIMANDING**
28 **THE LICENSEE, OR PLACING THE LICENSEE ON PROBATION.**

29 **(C) (1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, AN**
30 **INDIVIDUAL WHOSE LICENSE HAS BEEN SUSPENDED OR REVOKED BY THE BOARD**
31 **SHALL RETURN THE LICENSE TO THE BOARD.**

1 **(2) IF A SUSPENDED OR REVOKED LICENSE HAS BEEN LOST, THE**
2 **INDIVIDUAL SHALL FILE WITH THE BOARD A VERIFIED STATEMENT TO THAT**
3 **EFFECT.**

4 **8-6C-21.**

5 **(A) UNLESS AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY, AN**
6 **INDIVIDUAL MAY NOT REPRESENT TO THE PUBLIC BY TITLE, DESCRIPTION OF**
7 **SERVICE, METHOD, PROCEDURE, OR OTHERWISE, THAT THE INDIVIDUAL IS**
8 **AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY IN THE STATE.**

9 **(B) A LICENSEE MAY NOT ADVERTISE IN A MANNER THAT IS**
10 **UNREASONABLE, MISLEADING, OR FRAUDULENT.**

11 **(C) UNLESS AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY UNDER**
12 **THIS SUBTITLE, AN INDIVIDUAL MAY NOT USE THE ABBREVIATION “CDEM” OR USE**
13 **THE DESIGNATION “CERTIFIED DIRECT-ENTRY MIDWIFE”.**

14 **(D) UNLESS AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY UNDER**
15 **THIS SUBTITLE OR CERTIFIED AS A NURSE MIDWIFE UNDER THIS TITLE, AN**
16 **INDIVIDUAL MAY NOT USE THE DESIGNATION “MIDWIFE”.**

17 **8-6C-22.**

18 **(A) EXCEPT FOR ANY WILLFUL OR GROSSLY NEGLIGENT ACT, A HEALTH**
19 **CARE PROVIDER OR EMERGENCY ROOM PERSONNEL WHO WORK AT A HOSPITAL, OR**
20 **EMERGENCY MEDICAL TECHNICIANS OR AMBULANCE PERSONNEL, MAY NOT BE**
21 **HELD CIVILLY LIABLE FOR AN ACTION ARISING FROM AN INJURY RESULTING FROM**
22 **AN ACT OF OMISSION OF A CERTIFIED DIRECT-ENTRY MIDWIFE, EVEN IF THE**
23 **PERSON HAS CONSULTED WITH THE CERTIFIED DIRECT-ENTRY MIDWIFE OR**
24 **ACCEPTED A REFERRAL FROM THE CERTIFIED DIRECT-ENTRY MIDWIFE.**

25 **(B) A HEALTH CARE PRACTITIONER WHO CONSULTS WITH A CERTIFIED**
26 **DIRECT-ENTRY MIDWIFE BUT WHO DOES NOT EXAMINE OR TREAT A PATIENT OF THE**
27 **CERTIFIED DIRECT-ENTRY MIDWIFE MAY NOT BE DEEMED TO HAVE CREATED A**
28 **PHYSICIAN-PATIENT RELATIONSHIP WITH THE PATIENT.**

29 **8-6C-23.**

30 **IF A CERTIFIED DIRECT-ENTRY MIDWIFE IS ENGAGED IN THE PRIVATE**
31 **PRACTICE OF DIRECT-ENTRY MIDWIFERY IN THE STATE, THE CERTIFIED**
32 **DIRECT-ENTRY MIDWIFE SHALL DISPLAY THE NOTICE DEVELOPED UNDER § 1-207**

1 OF THIS ARTICLE CONSPICUOUSLY IN EACH OFFICE WHERE THE CERTIFIED
2 DIRECT-ENTRY MIDWIFE IS ENGAGED IN PRACTICE.

3 8-6C-24.

4 A PERSON WHO VIOLATES ANY PROVISION OF THIS SUBTITLE IS GUILTY OF A
5 MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING \$5,000
6 OR IMPRISONMENT NOT EXCEEDING 1 YEAR OR BOTH.

7 8-6C-25.

8 THIS SUBTITLE MAY BE CITED AS THE MARYLAND HOME BIRTH SAFETY ACT.

9 8-6C-26.

10 SUBJECT TO THE EVALUATION AND REESTABLISHMENT PROVISIONS OF THE
11 MARYLAND PROGRAM EVALUATION ACT, AND SUBJECT TO THE TERMINATION OF
12 THIS SUBTITLE UNDER § 8-802 OF THIS TITLE, THIS SUBTITLE AND ALL
13 REGULATIONS ADOPTED UNDER THIS SUBTITLE SHALL TERMINATE AND BE OF NO
14 EFFECT AFTER JULY 1, 2023.

15 8-701.

16 (E-1) EXCEPT AS OTHERWISE PROVIDED IN THIS TITLE, AN INDIVIDUAL MAY
17 NOT PRACTICE, ATTEMPT TO PRACTICE, OR OFFER TO PRACTICE AS A CERTIFIED
18 DIRECT-ENTRY MIDWIFE UNLESS LICENSED BY THE BOARD TO PRACTICE AS A
19 CERTIFIED DIRECT-ENTRY MIDWIFE.

20 Article – State Government

21 8-405.

22 (b) Each of the following governmental activities or units and the statutes and
23 regulations that relate to the governmental activities or units are subject to full evaluation,
24 in the evaluation year specified, without the need for a preliminary evaluation:

25 (3) [(i) Nursing, State Board of (§ 8-201 of the Health Occupations
26 Article: 2021)]; and] INCLUDING:

27 [(ii) (I) Electrology Practice Committee (§ 8-6B-05 of the Health
28 Occupations Article: 2021); AND

29 (II) DIRECT-ENTRY MIDWIFERY ADVISORY COMMITTEE (§
30 8-6C-10 OF THE HEALTH OCCUPATIONS ARTICLE: 2021);

1 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read
2 as follows:

3 **Article – Health Occupations**

4 **8–6C–02.1.**

5 (A) A CERTIFIED DIRECT-ENTRY MIDWIFE SHALL CONSULT WITH A HEALTH
6 CARE PRACTITIONER IF ANY OF THE FOLLOWING CONDITIONS PRESENT DURING
7 PRENATAL CARE:

- 8 (1) SIGNIFICANT MENTAL DISEASE, INCLUDING DEPRESSION,
9 BIPOLAR DISORDER, SCHIZOPHRENIA, AND OTHER CONDITIONS THAT IMPAIR THE
10 ABILITY OF THE PATIENT TO PARTICIPATE EFFECTIVELY IN THE PATIENT’S CARE OR
11 THAT REQUIRE THE USE OF PSYCHOTROPIC DRUGS TO CONTROL THE CONDITION;
- 12 (2) POSTMATURITY (GESTATIONAL AGE GREATER THAN 42 WEEKS);
- 13 (3) SECOND OR THIRD TRIMESTER BLEEDING;
- 14 (4) INTERMITTENT USE OF ALCOHOL INTO THE SECOND TRIMESTER;
- 15 (5) ASTHMA;
- 16 (6) DIET-CONTROLLED GESTATIONAL DIABETES;
- 17 (7) HISTORY OF GENETIC PROBLEMS, INTRAUTERINE DEATH AFTER
18 20 WEEKS’ GESTATION, OR STILLBIRTH;
- 19 (8) PREVIOUS UTERINE SURGERY, INCLUDING MYOMECTOMY, LEEP,
20 OR CONE BIOPSY;
- 21 (9) ABNORMAL PAP SMEAR;
- 22 (10) PREVIOUS OBSTETRICAL PROBLEMS, INCLUDING UTERINE
23 ABNORMALITIES, PLACENTAL ABRUPTION, SIGNIFICANT CONGENITAL ANOMALIES,
24 PLACENTA ACCRETE, INCOMPETENT CERVIX, OR PRETERM DELIVERY FOR ANY
25 REASON;
- 26 (11) POSSIBLE ECTOPIC PREGNANCY;
- 27 (12) IN REMISSION FROM INFLAMMATORY BOWEL DISEASE;

1 **(13) TUBERCULOSIS;**

2 **(14) CONTROLLED HYPOTHYROIDISM, BEING TREATED WITH THYROID**
3 **REPLACEMENT AND EUTHYROID, AND WITH THYROID TEST NUMBERS IN THE**
4 **NORMAL RANGE;**

5 **(15) MORBID OBESITY (BODY MASS INDEX (BMI) GREATER THAN 34 AT**
6 **INITIAL PREGNANCY VISIT);**

7 **(16) RH SENSITIZATION WITH POSITIVE ANTIBODY TITER;**

8 **(17) BREECH PRESENTATION BETWEEN 35 AND 38 WEEKS;**

9 **(18) TRANSVERSE LIE OR OTHER ABNORMAL PRESENTATION**
10 **BETWEEN 35 AND 38 WEEKS; AND**

11 **(19) PREMATURE RUPTURE OF MEMBRANES AT 37 WEEKS OR LESS.**

12 **(B) SUBJECT TO SUBSECTION (C) OF THIS SECTION, A CERTIFIED**
13 **DIRECT-ENTRY MIDWIFE SHALL ARRANGE IMMEDIATE EMERGENCY TRANSFER TO A**
14 **HOSPITAL IF:**

15 **(1) THE PATIENT REQUESTS TRANSFER; OR**

16 **(2) THE PATIENT OR NEWBORN IS DETERMINED TO HAVE ANY OF THE**
17 **FOLLOWING CONDITIONS DURING LABOR, DELIVERY, OR THE POSTPARTUM PERIOD:**

18 **(I) UNFORESEEN NONCEPHALIC PRESENTATION;**

19 **(II) UNFORESEEN MULTIPLE GESTATION;**

20 **(III) NONREASSURING FETAL HEART RATE OR PATTERN,**
21 **INCLUDING TACHYCARDIA, BRADYCARDIA, SIGNIFICANT CHANGE IN BASELINE, AND**
22 **PERSISTENT LATE OR SEVERE VARIABLE DECELERATIONS;**

23 **(IV) PROLAPSED CORD;**

24 **(V) UNRESOLVED MATERNAL HEMORRHAGE;**

25 **(VI) RETAINED PLACENTA;**

26 **(VII) SIGNS OF FETAL OR MATERNAL INFECTION;**

1 (VIII) PATIENT WITH A THIRD OR FOURTH DEGREE LACERATION
2 OR A LACERATION BEYOND THE CERTIFIED DIRECT-ENTRY MIDWIFE'S ABILITY TO
3 REPAIR;

4 (IX) APGAR OF LESS THAN SEVEN AT 10 MINUTES;

5 (X) SIGNIFICANT CONGENITAL ANOMALY;

6 (XI) NEED FOR CHEST COMPRESSIONS DURING NEONATAL
7 RESUSCITATION;

8 (XII) NEWBORN WITH PERSISTENT CENTRAL CYANOSIS;

9 (XIII) NEWBORN WITH PERSISTENT GRUNTING AND
10 RETRACTIONS;

11 (XIV) NEWBORN WITH ABNORMAL VITAL SIGNS WHO DOES NOT
12 IMPROVE AFTER AT-HOME INTERVENTIONS ARE ADMINISTERED; OR

13 (XV) GROSS OR THICK MECONIUM STAINING, WHEN
14 DISCOVERED.

15 (C) IF TRANSFER IS NOT POSSIBLE BECAUSE OF IMMINENT DELIVERY, THE
16 CERTIFIED DIRECT-ENTRY MIDWIFE SHALL CONSULT WITH A HOSPITAL-BASED
17 HEALTH CARE PRACTITIONER FOR GUIDANCE ON FURTHER MANAGEMENT OF THE
18 PATIENT AND TO DETERMINE WHEN TRANSFER MAY BE SAFELY ARRANGED, IF
19 REQUIRED.

20 (D) ON OR BEFORE JUNE 1, 2016, THE BOARD SHALL ADOPT REGULATIONS
21 TO IMPLEMENT THIS SECTION.

22 8-6C-02.2.

23 (A) A CERTIFIED DIRECT-ENTRY MIDWIFE MAY NOT UNDERTAKE THE CARE
24 OF A PATIENT, OR SHALL IMMEDIATELY REFER AND TRANSFER THE CARE OF A
25 PATIENT TO A HEALTH CARE PROVIDER, IF THE PATIENT IS DETERMINED TO HAVE
26 ANY OF THE FOLLOWING CONDITIONS:

27 (1) DIABETES MELLITUS, INCLUDING UNCONTROLLED GESTATIONAL
28 DIABETES;

29 (2) HYPERTHYROIDISM TREATED WITH MEDICATION;

- 1 **(3) UNCONTROLLED HYPOTHYROIDISM;**
- 2 **(4) EPILEPSY WITH SEIZURES OR ANTI-EPILEPTIC DRUG USE DURING**
3 **THE 12 MONTHS PRIOR TO THE ESTIMATED DATE OF DELIVERY;**
- 4 **(5) COAGULATION DISORDERS;**
- 5 **(6) CHRONIC PULMONARY DISEASE;**
- 6 **(7) HEART DISEASE IN WHICH THERE ARE ARRHYTHMIAS OR**
7 **MURMURS EXCEPT WHEN, AFTER EVALUATION, IT IS THE OPINION OF A PHYSICIAN**
8 **LICENSED UNDER TITLE 14 OF THIS ARTICLE OR A LICENSED NURSE CERTIFIED AS**
9 **A MIDWIFE OR A NURSE PRACTITIONER UNDER THIS TITLE THAT MIDWIFERY CARE**
10 **MAY PROCEED;**
- 11 **(8) HYPERTENSION, INCLUDING PREGNANCY-INDUCED**
12 **HYPERTENSION (PIH);**
- 13 **(9) RENAL DISEASE;**
- 14 **(10) EXCEPT AS OTHERWISE PROVIDED IN § 8-6C-02.1(A)(16), RH**
15 **SENSITIZATION WITH POSITIVE ANTIBODY TITER;**
- 16 **(11) EXCEPT AS OTHERWISE PROVIDED IN § 8-6C-08, A PREVIOUS**
17 **CESAREAN SECTION DELIVERY;**
- 18 **(12) INDICATIONS THAT THE FETUS HAS DIED IN UTERO;**
- 19 **(13) PREMATURE LABOR (GESTATION LESS THAN 37 WEEKS);**
- 20 **(14) MULTIPLE GESTATION;**
- 21 **(15) NONCEPHALIC PRESENTATION AT OR AFTER 38 WEEKS;**
- 22 **(16) PLACENTA PREVIA OR ABRUPTION;**
- 23 **(17) PREECLAMPSIA;**
- 24 **(18) SEVERE ANEMIA, DEFINED AS HEMOGLOBIN LESS THAN 10 G/DL;**
- 25 **(19) UNCOMMON DISEASES AND DISORDERS, INCLUDING ADDISON'S**
26 **DISEASE, CUSHING'S DISEASE, SYSTEMIC LUPUS ERYTHEMATOSUS,**
27 **ANTIPHOSPHOLIPID SYNDROME, SCLERODERMA, RHEUMATOID ARTHRITIS,**

1 PERIARTERITIS NODOSA, MARFAN'S SYNDROME, AND OTHER SYSTEMIC AND RARE
2 DISEASES AND DISORDERS;

3 (20) AIDS/HIV;

4 (21) HEPATITIS A THROUGH G AND NON A THROUGH G;

5 (22) ACUTE TOXOPLASMOSIS INFECTION, IF THE PATIENT IS
6 SYMPTOMATIC;

7 (23) RUBELLA INFECTION DURING PREGNANCY;

8 (24) ACUTE CYTOMEGALOVIRUS INFECTION, IF THE PATIENT IS
9 SYMPTOMATIC;

10 (25) ALCOHOL ABUSE, SUBSTANCE ABUSE, OR PRESCRIPTION ABUSE
11 DURING PREGNANCY;

12 (26) CONTINUED DAILY TOBACCO USE INTO THE SECOND TRIMESTER;

13 (27) THROMBOSIS;

14 (28) INFLAMMATORY BOWEL DISEASE THAT IS NOT IN REMISSION;

15 (29) HERPES SIMPLEX VIRUS, PRIMARY GENITAL INFECTION DURING
16 PREGNANCY, OR ACTIVE GENITAL LESIONS AT THE TIME OF DELIVERY;

17 (30) SIGNIFICANT FETAL CONGENITAL ANOMALY; OR

18 (31) ECTOPIC PREGNANCY.

19 (B) ON OR BEFORE JUNE 1, 2016, THE BOARD SHALL ADOPT REGULATIONS
20 TO IMPLEMENT THIS SECTION.

21 SECTION 3. AND BE IT FURTHER ENACTED, That:

22 (a) The Direct-Entry Midwifery Advisory Committee established under Section 1
23 of this Act, with the approval of the State Board of Nursing, shall convene a workgroup to
24 study the development of a midwifery formulary.

25 (b) The workgroup shall consist of stakeholders, including representatives of:

26 (1) the Association of Independent Midwives of Maryland;

- 1 (2) the Maryland American Congress of Obstetricians and Gynecologists;
- 2 (3) the Maryland affiliate of the American College of Nurse–Midwives;
- 3 (4) the Maryland Pharmacists Association; and
- 4 (5) any other stakeholders the Committee considers necessary.

5 (c) The workgroup shall:

- 6 (1) review the midwifery formularies developed in other states;
- 7 (2) make recommendations regarding the establishment of a midwifery
8 formulary council; and
- 9 (3) make recommendations regarding the establishment of a midwifery
10 formulary, including types of medications, equipment, and devices to be included on the
11 formulary and the method by which the midwifery formulary council will decide which
12 medications, equipment, and devices will be included in the formulary.

13 (d) On or before June 1, 2016, the workgroup shall report its findings and
14 recommendations, in accordance with § 2–1246 of the State Government Article, to the
15 Senate Education, Health, and Environmental Affairs Committee and the House Health
16 and Government Operations Committee.

17 SECTION 4. AND BE IT FURTHER ENACTED, That regulations necessary to carry
18 out the provisions of Sections 1 and 2 of this Act shall be adopted by the State Board of
19 Nursing on or before June 1, 2016.

20 SECTION 5. AND BE IT FURTHER ENACTED, That, on or before December 1,
21 2018, the State Board of Nursing, in consultation with the Direct–Entry Midwifery
22 Advisory Committee and in accordance with § 2–1246 of the State Government Article,
23 shall report to the Senate Education, Health, and Environmental Affairs Committee and
24 the House Health and Government Operations Committee, for licensure years 2016, 2017,
25 and 2018, regarding:

- 26 (1) the number of certified direct–entry midwives in the State;
- 27 (2) the number and circumstances of all:
- 28 (i) healthy birth outcomes attended by certified direct–entry
29 midwives;
- 30 (ii) adverse birth outcomes attended by certified direct–entry
31 midwives; and

1 (iii) births where a transfer or transport was made to a hospital or to
2 the care of another health care provider; and

3 (3) recommendations for the continuation and improvement of the
4 licensure of certified direct-entry midwives in the State.

5 SECTION 6. AND BE IT FURTHER ENACTED, That the terms of the initial
6 members of the Direct-Entry Midwifery Advisory Committee within the State Board of
7 Nursing shall expire as follows:

8 (1) two members in 2016;

9 (2) three members in 2017; and

10 (3) two members in 2018.

11 SECTION 7. AND BE IT FURTHER ENACTED, That this Act shall take effect June
12 1, 2015. Section 2 of this Act shall remain effective until the effective date of regulations
13 adopted by the State Board of Nursing that include the provisions in Section 2 of this Act.
14 On that date, with no further action required by the General Assembly, Section 2 of this
15 Act shall be abrogated and of no further force and effect. The State Board of Nursing shall
16 notify the Department of Legislative Services within 5 days after the effective date of the
17 regulations.