MISSISSIPPI LEGISLATURE

By: Representatives McLean, Arnold, Boyd To: Public Health and Human (19th), Calvert, Crawford, Eubanks, Ford Services (73rd), Zuber

HOUSE BILL NO. 1081

AN ACT TO PROVIDE FOR THE LICENSURE AND REGULATION OF PROFESSIONAL MIDWIFERY; TO PROVIDE DEFINITIONS FOR THE PURPOSE OF THE ACT; TO PROVIDE EXCEPTIONS TO THE APPLICABILITY OF THE ACT; TO PROVIDE THE SCOPE OF PRACTICE FOR LICENSED MIDWIVES; TO PROVIDE 5 MANDATORY PROCEDURES FOR LICENSED MIDWIVES; TO PROHIBIT LICENSED MIDWIVES FROM CERTAIN ACTIONS; TO CREATE THE STATE BOARD OF LICENSED MIDWIFERY AND PROVIDE FOR ITS COMPOSITION, APPOINTMENT 7 AND POWERS AND DUTIES; TO REQUIRE THE BOARD TO PROMULGATE RULES 8 9 NOT LATER THAN JULY 1, 2025; TO REQUIRE A LICENSE FROM THE BOARD TO PRACTICE PROFESSIONAL MIDWIFERY; TO PROVIDE FOR THE ISSUANCE OF 10 11 TEMPORARY PERMITS TO PRACTICE PENDING QUALIFICATION FOR LICENSURE; 12 TO PROVIDE EXEMPTIONS FROM LICENSURE FOR CERTAIN PERSONS; TO PROVIDE FOR THE CONFIDENTIALITY OF INFORMATION MAINTAINED BY THE BOARD; TO PROVIDE IMMUNITY FOR CERTAIN ACTIONS; TO PROVIDE 14 15 CRIMINAL PENALTIES FOR VIOLATIONS OF THIS ACT; TO PROHIBIT 16 TERMINOLOGY IN ANY HEALTH COVERAGE PLAN, POLICY OR CONTRACT THAT 17 IS DISCRIMINATORY AGAINST PROFESSIONAL MIDWIFERY; TO REQUIRE 18 HEALTH COVERAGE PLANS THAT PROVIDE MATERNITY BENEFITS TO PROVIDE 19 COVERAGE FOR SERVICES RENDERED BY A LICENSED MIDWIFE; TO PROVIDE 20 WHENEVER A HEALTH COVERAGE PLAN PROVIDES FOR REIMBURSEMENT OF ANY 21 SERVICES THAT ARE WITHIN THE LAWFUL SCOPE OF PRACTICE OF LICENSED 22 MIDWIVES, THE PERSON ENTITLED TO BENEFITS UNDER THE PLAN SHALL BE 23 ENTITLED TO REIMBURSEMENT FOR THE SERVICES, WHETHER THE SERVICES 24 ARE PERFORMED BY A PHYSICIAN OR A LICENSED MIDWIFE; TO REQUIRE THE 25 STATE DEPARTMENT OF HEALTH TO DEVELOP AND INSTITUTE A SAFE 26 PERINATAL TRANSFER CERTIFICATION FOR THE FACILITIES THAT IT 27 REGULATES; TO AMEND SECTION 73-25-33, MISSISSIPPI CODE OF 1972, TO 28 REMOVE THE REFERENCE TO THE PRACTICE OF MIDWIFERY IN THE 29 DEFINITION OF THE PRACTICE OF MEDICINE; AND FOR RELATED PURPOSES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

31	SECTION 1.	Short Title.	This	act	shall	be	known	and	may	be

- 32 cited as "Martin's Law."
- 33 **SECTION 2. Legislative Purpose.** (1) The midwifery model of
- 34 care emphasizes patient-centered care that considers the whole
- 35 person and prioritizes autonomy, consent and collaboration;
- 36 focuses on maximizing the health and wellness of a woman and her
- 37 baby; and attends to the emotional, social and spiritual aspects
- 38 of pregnancy and birth. Professional midwives offer an
- 39 evidence-based model of perinatal care that views birth as a
- 40 normal physiologic process and seeks medical expertise and
- 41 interventions as warranted. Increased access to professional
- 42 midwives positively affects maternal and infant health outcomes.
- 43 (2) Midwifery is a profession in its own right and it is not
- 44 the practice of medicine. Community-based midwives have
- 45 historically served an indispensable public health role in
- 46 promoting the health and well-being of Mississippi mothers and
- 47 infants. Mississippi's current rates of preterm births, low birth
- 48 weights, infant mortality, maternal mortality, and rural hospital
- 49 closures would benefit from increased access to professional
- 50 midwifery care in community settings.
- 51 (3) Research demonstrates that integration and coordination
- 52 across birth settings and maternity care providers promote
- 53 high-quality, cost-effective care. Specifically, the integration
- of community-based midwives into regional maternity care systems
- 55 is a key determinant of improving perinatal outcomes. Regulation

- of the practice of professional midwifery is necessary to
- 57 facilitate the integration of professional midwives into
- 58 Mississippi's maternity care system.
- 59 (4) Parents have the freedom to choose the manner, place,
- 60 and attendant for giving birth. Regulating professional midwifery
- 61 in community settings will increase access to birthing options for
- 62 the families of Mississippi and preserve parental choice.
- (5) Within the State of Mississippi, mothers and families
- 64 seek out alternatives to hospital births and they find significant
- 65 value in perinatal services offered in community settings. The
- 66 term "midwife" connotes to consumers and the community an
- 67 expectation of professionalism and a minimum level of competency
- 68 and care. Community-based midwives are currently serving
- 69 Mississippi families in the absence of any regulatory mechanisms
- 70 to provide oversight or accountability. The improper practice of
- 71 midwifery poses a significant risk of harm to public health.
- 72 Governmental regulation of the practice of midwifery is reasonably
- 73 necessary to protect the health, safety and welfare of mothers and
- 74 their newborns.
- 75 (6) Therefore, the Legislature authorizes the regulation of
- 76 the practice of professional midwifery in community settings. For
- 77 the purpose of protecting the health and welfare of women and
- 78 infants, the Legislature declares that Martin's Law shall provide
- 79 for the licensure of professional midwives, create mechanisms for

- 80 oversight and accountability, facilitate informed consent, and
- 81 preserve parental freedom.
- 82 **SECTION 3. Definitions.** As used in this act, the following
- 83 terms shall be defined as provided in this section:
- 84 (a) "Antepartum" means the stage of care that begins
- 85 when a pregnant woman presents herself for care during pregnancy
- 86 and ends at the onset of labor.
- 87 (b) "Apprentice" means an individual at the
- 88 apprenticeship level of midwifery training who is obtaining
- 89 clinical experience under the supervision of a qualified, licensed
- 90 midwife by providing midwifery care under the supervision of such
- 91 a preceptor.
- 92 (c) "Board" means the Mississippi State Board of
- 93 Licensed Midwifery, which is created in Section 6 of this act.
- 94 (d) "Certified nurse midwife" means an advanced
- 95 practice registered nurse certified by the American Midwifery
- 96 Certification Board whose practice is regulated by Section 73-15-1
- 97 et seq.
- 98 (e) "Client" means an individual receiving professional
- 99 midwifery services from a licensed midwife. Because the midwifery
- 100 model of care characterizes pregnancy as a normal physiologic
- 101 process rather than a medical event, the term "client" is
- 102 preferred over the term "patient" by professional midwives as well
- 103 as the families they serve. Within this act, however, the term

104	"patient"	may	also	be	used	to	refer	to	an	individual	receiving
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- 105 professional midwifery services from a licensed midwife.
- 106 (f) "Intrapartum" means occurring from the onset of
- 107 labor until after the delivery of the placenta.
- 108 (g) "Licensed midwife" means an individual who
- 109 practices professional midwifery in community settings and has met
- 110 the licensing requirements established by this act and its
- implementing rules as promulgated by the board.
- (h) "Neonate" means a newborn child in its first four
- 113 (4) weeks of life.
- 114 (i) "Neonatal period" means the first four (4) weeks of
- 115 a child's life.
- 116 (j) "Normal" means, as applied to the antepartum,
- 117 intrapartum and postpartum periods and the neonatal period, and as
- 118 defined by board rule, circumstances under which a midwife has
- 119 determined that a client does not have a condition that requires
- 120 medical intervention.
- 121 (k) "Physician" means an individual engaged in the
- 122 practice of medicine and duly licensed by the State Board of
- 123 Medical Licensure whose practice is regulated by Section 73-25-1
- 124 et seq.
- 125 (1) "Postpartum period" means the first six (6) weeks
- 126 after a woman has given birth.
- 127 (m) "Professional midwifery" means the studied, skilled
- 128 practice of providing primary maternity care consistent with a

129	midwife's training, education and experience to women and neonates
130	during the antepartum, intrapartum and postpartum periods.
131	SECTION 4. Applicability. This act does not apply to:
132	(a) A certified nurse midwife, a physician or any
133	health care professional licensed by the state who is providing
134	care within the scope of his or her license;
135	(b) A student midwife who is engaged in didactic
136	learning and not providing clinical care;
137	(c) A doula, childbirth instructor, lactation
138	consultant or other layperson offering nonclinical support during
139	the antepartum, intrapartum and postpartum periods; or
140	(d) Any person who assists with childbirth in an
141	emergency where medical or midwifery care is not available.
142	SECTION 5. Scope of practice; practice parameters; mandatory
143	procedures; prohibitions; discrimination prohibited. (1) The
144	scope of practice of licensed midwives shall consist of:
145	(a) Providing primary maternity care that is consistent
146	with a midwife's training, education and experience to low-risk
147	women and their neonates during normal antepartum, intrapartum and
148	postpartum periods, as further articulated by the board based on

151 Nonprescriptive family planning and basic well-woman care, including, but not limited to, Pap tests, 152 153 sexually transmitted infection screenings, preconception

definitions established by national and international professional

associations and certifying bodies;

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154	screenings,	and	other	acts,	tasks,	or	functions	authorized	bу	the
155	board;									

- Consulting and collaborating with other licensed 156 health care providers, including, but not limited to, the referral 157 158 of women or their neonates to a higher level of care with an 159 appropriate licensed health care provider when the licensed 160 midwife determines that the pregnancy, labor, delivery, postpartum 161 period or neonatal period may not be classified as normal as 162 defined by this act or according to rules promulgated by the 163 board.
- (2) Prescriptive authority and the possession and
 administration of controlled substances by licensed midwives are
 prohibited. When acting within their scope of practice, licensed
 midwives may obtain, transport, and administer the following
 medications:
- 169 (a) Vitamin K;
- 170 (b) Antihemorrhagic agents;
- 171 (c) Local anesthetics;
- 172 (d) Oxygen;

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- 173 (e) Prophylactic eye agents;
- 174 (f) RhoGam or other prophylactic immunoglobulins;
- 175 (g) Intravenous fluids; and
- (h) Any other drug that is consistent with the scope of
- 177 practice of professional midwifery in community settings and is
- 178 authorized by the board by rule.

179	(3) A licensed midwife may directly obtain supplies and
180	devices, order and obtain screening tests including ultrasound
181	tests, and receive verbal and written reports of the results of
182	those tests as necessary for the practice of professional
183	midwifery in community settings and consistent with the scope of
184	practice of licensed midwives.

(4) Licensed midwives shall:

- 186 (a) Register and maintain current contact information
 187 with the board following procedures developed by the board and
 188 promulgated by rule for the publication of an official roster of
 189 licensed midwives.
- 190 (b) Register births with the State Registrar of Vital
 191 Records in accordance with the rules promulgated by the State
 192 Department of Health.
- 193 (c) Report client statistical data to the board or
 194 other national entities as required by rules promulgated by the
 195 board.
- 196 (d) Provide certain disclosures in writing at the
 197 inception of care for a client, including, but not limited to, the
 198 following:
- 199 (i) The licensed midwife's education, training and 200 qualifications;
- (ii) The licensed midwife's criteria for referring
 a client to a licensed health care provider for a higher level of
 care;

204	(iii)	The	licensed	midwife's	criteria	for

- 205 effecting an emergency transfer to a hospital;
- 206 (iv) Whether the midwife has malpractice liability
- 207 insurance coverage in effect and, if so, the policy limitations of
- 208 that coverage;
- 209 (v) Notice that the licensed midwife has certain
- 210 statistical data reporting obligations to the board that are not
- 211 optional but that may be anonymized;
- 212 (vi) The licensed midwife's disciplinary history
- 213 with the board, including whether any disciplinary action is
- 214 currently pending against them by the board;
- (vii) The procedures a client can take to initiate
- 216 disciplinary action against a licensed midwife; and
- 217 (viii) Any other information required by rules
- 218 promulgated by the board.
- 219 (5) It shall be unlawful for licensed midwives to:
- 220 (a) Perform surgical procedures other than episiotomies
- 221 or repairs of perineal lacerations;
- 222 (b) Use forceps or vacuum extraction;
- (c) Aid or abet an unlicensed person to practice as a
- 224 licensed midwife;
- 225 (d) Negligently, willfully, or intentionally act in a
- 226 manner inconsistent with the health and safety of those entrusted
- 227 to the licensed midwife's care;

228	(e) Engage in substandard, unprofessional or
229	dishonorable conduct, or any other form of misconduct as defined
230	by the board; and
231	(f) Engage in any other act, task or function
232	prohibited in rules promulgated by the board.
233	(6) Nothing in this act shall be construed to permit the
234	practice of medicine by licensed midwives.
235	SECTION 6. State Board of Licensed Midwifery created;
236	composition; powers and duties. (1) The Mississippi State Board
237	of Licensed Midwifery is created to regulate autonomous
238	professional midwifery practice in community settings within
239	Mississippi.
240	(a) The board shall consist of eight (8) persons and be
241	comprised of:
242	(i) Four (4) midwives each of whom has at least
243	two (2) years experience in the practice of midwifery in community
244	settings;
245	(ii) One (1) certified nurse midwife;
246	(iii) One (1) physician who is certified by a
247	national professional organization of physicians that certifies
248	obstetricians and gynecologists;
249	(iv) One (1) perinatal care provider who is
250	certified by a national professional organization of physicians
251	that certifies family practitioners or pediatricians; and

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252	(v) One (1) member who represents the public and
253	who is not practicing or trained in a health care profession, and
254	who is a parent with at least one (1) child born with the
255	assistance of a midwife or a certified nurse midwife.
256	(b) Board members shall be resident citizens of the
257	State of Mississippi and appointed by the Governor. The Governor
258	shall accept and consider lists of nominees from any interested
259	individual or organization, and shall prioritize the appointment
260	of nominees made by the following organizations or their
261	successors:
262	(i) The State Department of Health;
263	(ii) The Mississippi Midwives Alliance;
264	(iii) The Mississippi Perinatal Quality
265	Collaborative;
266	(iv) The Mississippi Public Health Institute;
267	(v) The Institute for the Advancement of Minority
268	Health; and
269	(vi) Better Birth Mississippi.
270	Any such list of nominees from the organizations listed in
271	this paragraph (b) shall be submitted at least thirty (30) days
272	before the expiration of the term for each position.
273	(c) The initial appointments to the board shall be for
274	staggered terms, to be designated by the Governor at the time of
275	appointment as follows: four (4) members shall serve for terms
276	ending on July 1, 2025; three (3) members shall serve for terms

- 277 ending on July 1, 2026; and one (1) member shall serve for a term
- 278 ending on July 1, 2027. All later appointments shall be for terms
- 279 of four (4) years from the expiration date of the previous term.
- 280 (d) The Governor shall fill a vacancy no later than
- 281 sixty (60) days from the date the vacancy occurs. Members may
- 282 hold office until their successors have been appointed.
- (e) Board members shall not be compensated for their
- 284 service, but shall be reimbursed for necessary and ordinary
- 285 expenses and mileage incurred while performing their duties as
- 286 members of the board as provided in Section 25-3-41, to be paid
- 287 from the special fund of the board.
- 288 (2) Not later than July 1, 2025, the board shall promulgate
- 289 rules that, at a minimum:
- 290 (a) Establish and implement a program for qualified
- 291 individuals to apply and obtain licensure as a licensed midwife,
- 292 including, but not limited to:
- 293 (i) Developing policies and procedures for
- 294 temporary permits, initial licensing, renewals and reinstatement
- 295 of lapsed licenses; and
- 296 (ii) A fee schedule for applications, temporary
- 297 permits, initial licenses, renewals and reinstatements. The board
- 298 shall review its fee schedule every four (4) years and update fees
- 299 as necessary for the growth and sustainability of the profession;
- 300 (b) Develop educational standards, including, but not
- 301 limited to:

standards, including the type of courses and number of hours
standards, including the type of courses and number of hours
required, that qualify an applicant to seek licensure;
(ii) Developing methods and requirements for
ensuring the continued competence of licensed midwives through
continuing midwifery education, including the type of courses and
number of hours required, as a condition for license renewal; and
(iii) Approving educational programs,
institutions, instructors and facilities that meet the basic and
continuing professional midwifery educational requirements for
practice within Mississippi;
(c) Prescribe standards and competencies for the
practice of professional midwifery in community settings within
Mississippi based on criteria established by national and
international professional associations and certifying bodies;
(d) Delineate specific symptoms and conditions that
require collaboration, consultation, or referral of a client by a
licensed midwife to a physician or other appropriate licensed
health care provider, and establish the process for such
collaboration, consultation, or referral. Such rules shall
promote informed consent and preserve parental choice;
(e) Exercise its disciplinary authority by establishing
and implementing formal disciplinary processes and procedures.
(i) The board shall develop and prescribe

procedures for investigating, processing and resolving complaints,

321	violations, probations, suspensions, revocations and
328	reinstatements, including, but not limited to:
329	1. Complaints of professional misconduct;
330	2. Allegations that licensed midwives are
331	violating the provisions of this act or its implementing rules;
332	3. Grievances from applicants and licensees
333	regarding agency action.
334	(ii) All procedures implementing the board's
335	disciplinary authority shall incorporate notice, the opportunity
336	to be heard, and a decision by a neutral decision-maker. Final
337	agency decisions will be subject to judicial review; and
338	(f) Collect, analyze, share and publish anonymized
339	statistical perinatal outcome data from licensed midwives and
340	individuals holding temporary permits, including, but not limited
341	to, live births, fetal demises and neonatal and maternal deaths.
342	Rules regarding data sharing shall preserve public access.
343	(3) In promulgating the rules described in subsection (2) of
344	this section, the board shall consider any data, views, questions,
345	and arguments submitted by:
346	(a) The State Department of Health;
347	(b) The Mississippi Midwives Alliance;
348	(c) The Mississippi Perinatal Quality Collaborative;
349	(d) The Mississippi Public Health Institute;
350	(e) The Institute for the Advancement of Minority
351	Health; and

352	(f)	Better	Birth	Miss	issipp	ρi.	
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- The board shall develop, publish and maintain an 353 354 official roster of licensed midwives and individuals holding 355 temporary permits that can be accessed by the public at no cost. 356 The roster shall reflect the statistical outcome data and 357 disciplinary history of each licensee and permit-holder.
 - The board shall deposit all funds received from the collection of application and licensure fees and the levying of disciplinary fines into a special fund that is created in the State Treasury to be known as the Board of Licensed Midwifery Monies in the special fund shall be used by the board, upon appropriation by the Legislature, for the purpose of administering this act. Any interest earned on the special fund shall be credited to the special fund and shall not be paid into the State General Fund. Any monies remaining in the special fund at the end of a fiscal year shall not lapse into the State General Fund.
- The board is authorized to contract with third-party (6) entities to perform clerical and administrative tasks and 369 370 functions related to the logistical implementation of midwifery 371 licensure under this act.
- The board may promulgate any and all additional rules it 372 (7) 373 deems necessary to effectively regulate the practice of licensed 374 midwives to the extent that those additional rules do not violate 375 any terms or provisions of this act.

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376	<pre>SECTION 7. License required; temporary permits; exemptions;</pre>
377	qualifications. (1) Beginning on the effective date of the
378	initial rules promulgated by the board under Section 6 of this
379	act, it shall be unlawful for any person to provide professional
380	midwifery care within the State of Mississippi without first
381	obtaining a license from the board in accordance with its rules.

- (2) The board shall promulgate rules allowing for the expedited issuance of temporary permits authorizing an individual to practice professional midwifery pending qualification for licensure.
- 386 (a) Temporary permits shall be issued for a term of
 387 twenty-four (24) months and may not be renewed except as follows:
 388 A temporary permit issued to an apprentice may be renewed upon a
 389 showing to the board that the apprentice has good cause for not
 390 completing their clinical training within the initial temporary
 391 permit period.
- 392 (b) An applicant who is granted a temporary permit
 393 under this section is subject to all other requirements of this
 394 act and rules promulgated by the board, and the board may
 395 automatically void the temporary permit if the applicant fails to
 396 comply with those requirements.
- 397 (c) An individual who paid an application fee in 398 connection with an application for a temporary permit under this 399 section is not required to pay a separate application fee in 400 connection with their application for an initial license if the

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401 board receives the application for an initial license within s	ixty
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- 402 (60) days after the expiration of the temporary permit.
- 403 (d) To qualify for a temporary permit to practice
- 404 professional midwifery, an individual must:
- 405 (i) Be an apprentice working under the supervision
- 406 of a licensed midwife;
- 407 (ii) Be licensed in good standing as a midwife in
- 408 another state at the time of application; or
- 409 (iii) Be engaged in providing professional
- 410 midwifery services to one or more Mississippi families on the
- 411 effective date of the initial rules promulgated by the board, as
- 412 evidenced by a contractual agreement to render such services.
- 413 (e) An individual seeking a temporary permit under this
- 414 subsection (2) must submit an application for full licensure
- 415 within twelve (12) months after the effective date of the initial
- 416 rules promulgated by the board.
- 417 (3) Licensure under this act is not required for:
- 418 (a) An employee or other individual who is assisting a
- 419 midwife and who is under the midwife's supervision from performing
- 420 activities or functions that are delegated by the midwife, that
- 421 are nondiscretionary, that do not require the exercise of
- 422 professional judgment for their performance, and that are within
- 423 the midwife's authority to perform; and



424		(b)	An in	divid	ual p	roviding	uncomp	ensat	ed ca:	re to a
425	friend or	fami	ly mem	ber i	f the	individ	ual doe	s not	hold	themself
426	out to the	e pubi	lic as	a li	cense	d midwife	e.			

- 427 (4) Nothing in this act shall prohibit a traditional birth
 428 attendant from providing care that falls within the scope of
 429 midwifery practice without a license where the traditional birth
 430 attendant is fulfilling a cultural or religious role that has
 431 historically included the provision of care at birth, and the
 432 traditional birth attendant only offers such services to women and
 433 families within that distinct cultural or religious group.
- SECTION 8. Confidentiality. (1) All statistical data reporting and sharing by the board shall be anonymized prior to dissemination or publication.
- 437 The board shall keep all information relating to the 438 receipt and investigation of complaints filed against licensees or applicants confidential until the information is disclosed in the 439 440 course of the investigation or any later proceeding before the 441 board. Client records, including clinical records, files, any 442 other report or oral statement relating to diagnostic findings or 443 clinical treatment of clients, any information from which a client 444 or her family might be identified, or information received and 445 records or reports kept by the board as a result of an 446 investigation made under this act shall be exempt from the 447 provisions of the Mississippi Public Records Act of 1983 and shall be kept confidential by the board. 448

449	SECTION 9. Immunity. (1) Nothing in this act shall create
450	liability of any kind for a licensed health care provider who
451	provides care to a client of a licensed midwife for personal
452	injury or death resulting from an act or omission by the midwife,
453	unless the professional negligence or malpractice of the health
454	care provider was a proximate cause of the injury or death.

- (2) No duly licensed midwife who, in good faith and in the exercise of reasonable care, renders aid in emergency childbirth, or assists in transporting a laboring mother to a place where medical assistance can be reasonably expected, shall be liable for any civil damages to the mother or infant as a result of any acts committed in good faith and in the exercise of reasonable care or omissions in good faith and in the exercise of reasonable care by such midwife in rendering aid in the emergency.
- 463 <u>SECTION 10.</u> Offenses; penalties. (1) It is a misdemeanor 464 for any person to:
- 465 (a) Offer or engage in the provision of professional
 466 midwifery services unless duly licensed to do so under the
 467 provisions of this act;
- (b) Impersonate in any manner or pretend to be a
 licensed midwife or use the title "Licensed Midwife" the letters

 "L.M." or any other words, letters, signs, symbols or devices to
 indicate the person using them is a licensed midwife, unless duly
 authorized by the license or permit under the provisions of this
 act;

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474		(C)	Provid	de midw	ifer	ry care	during	the	time	thei	r
475	license o	r tem	porary	permit	is	suspend	ded, re	vokec	d, lap	psed	or
476	expired;										

- 477 (d) Fail to notify the board of the suspension,
 478 probation or revocation of any past or currently held licenses
 479 required to practice midwifery in any other jurisdiction;
- 480 (e) Make false representations or impersonate or act as
 481 a proxy for another person or allow or aid any person to
 482 impersonate them in connection with any application for licensing
 483 or request to be licensed; or
- (f) Otherwise violate any provisions of this act.
- 485 (2) Such misdemeanor shall, upon conviction, be punishable
 486 by a fine of not more than One Thousand Dollars (\$1,000.00) or by
 487 imprisonment for not more than six (6) months or by both fine and
 488 imprisonment for each offense.
 - SECTION 11. (1) Terminology in any health coverage plan policy or contract deemed discriminatory against professional midwifery, community perinatal care, or the midwifery model of care or that inhibits reimbursement for such services at the in-network rate is void and unenforceable.
- 494 (2) Any health coverage plan amended, delivered, issued, or 495 renewed in this state on or after January 1, 2024, that provides 496 maternity benefits that are not limited to complications of 497 pregnancy, or newborn care benefits, shall provide coverage for 498 maternity services and perinatal care rendered by a licensed

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- midwife licensed under this act, regardless of the site of services. The coverage provided for in this section may be subject to annual deductibles, coinsurance and copayments.
- (3) A health coverage plan amended, delivered, issued or renewed in this state on or after January 1, 2024, shall not differentiate between perinatal services performed by a professional midwife within their lawful scope of practice and perinatal services by a physician with respect to copayment or annual deductible amounts or coinsurance percentages.
- issued, or renewed in this state on or after January 1, 2024, provides for reimbursement of any services that are within the lawful scope of practice of licensed midwives, the insured or other person entitled to benefits under the health coverage plan shall be entitled to reimbursement for the services, whether the services are performed by a physician or a licensed midwife.
- (5) The provisions of this section apply to any new policy, contract, program or health coverage plan issued on and after
 January 1, 2024. Any policy, contract or health coverage plan in effect before January 1, 2024, shall convert to conform to the provisions of this act on or before the renewal date, but no later than January 1, 2025.
- 521 (6) Nothing in this section shall restrict the Division of 522 Medicaid from setting rules and regulations regarding the coverage 523 of professional midwifery services and nothing in this section

524	shall	amend	\circ r	change	the	Division	$\circ f$	Medicaid'	S	schedule	οf
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- 525 benefits, exclusions and/or limitations related to obstetric
- 526 and/or midwifery services as determined by state or federal
- 527 regulations and state and federal law.
- 528 **SECTION 12.** (1) A licensed provider who regularly provides
- 529 health care services related to labor and delivery shall:
- 530 (a) Be able to identify when to transmit and receive
- 531 patient information, and transfer and receive patients, across the
- 532 facility's levels of care; and
- 533 (b) Coordinate with other licensed providers to
- 534 effectuate services across the facility's levels of care in a way
- 535 that prevents patients losing access to care.
- 536 (2) The acceptance of a transferred perinatal patient does
- 537 not establish an employment or supervisory relationship between
- 538 the accepting licensed provider and the transferring licensed
- 539 provider or establish grounds for vicarious liability.
- 540 (3) Within twenty-four (24) months from the effective date
- 541 of the initial rules promulgated by the board, the Division of
- 542 Health Facilities Licensure and Certification of the State
- 543 Department of Health shall develop and institute a safe perinatal
- 544 transfer certification for the facilities that it regulates.
- 545 (a) In developing the safe perinatal transfer
- 546 certification, the division shall incorporate input and feedback
- 547 from:

548	(i) Interested and affected stakeholders, with a
549	focus on pregnant women and those in the postpartum period and
550	their family members;

- (ii) Multidisciplinary, nonprofit organizations representing pregnant women and those in the postpartum period, with a focus on individuals from racial and ethnic minority groups; and
- (iii) Multidisciplinary, community-based organizations that provide support or advocacy for pregnant women and those in the postpartum period, with a focus on persons from racial and ethnic minority groups.
- 559 (4) Nothing in this act shall prohibit licensed providers or 560 facilities from billing for health care services rendered, 561 including maternity care and perinatal care.
- SECTION 13. Section 73-25-33, Mississippi Code of 1972, is amended as follows:
 - 73-25-33. The practice of medicine shall mean to suggest, recommend, prescribe, or direct for the use of any person, any drug, medicine, appliance, or other agency, whether material or not material, for the cure, relief, or palliation of any ailment or disease of the mind or body, or for the cure or relief of any wound or fracture or other bodily injury or deformity, or the practice of obstetrics or midwifery, after having received, or with the intent of receiving therefor, either directly or indirectly, any bonus, gift, profit or compensation * * *.

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5/3	SECTION 14. Sections I though 10 of this act shall be
574	codified as a new chapter in Title 73 of the Mississippi Code of
575	1972. Section 11 of this act shall be codified as a new section
576	in Article 5, Chapter 41 of the Mississippi Code of 1972.
577	SECTION 15. This act shall take effect and be in force from
578	and after July 1, 2023.