MISSISSIPPI LEGISLATURE

By: Senator(s) Blackwell

REGULAR SESSION 2023

To: Public Health and Welfare

SENATE BILL NO. 2793

1 AN ACT TO PROVIDE FOR THE LICENSURE AND REGULATION OF 2 PROFESSIONAL MIDWIFERY; TO PROVIDE DEFINITIONS FOR THE PURPOSE OF 3 THE ACT; TO PROVIDE EXCEPTIONS TO THE APPLICABILITY OF THE ACT; TO 4 PROVIDE THE SCOPE OF PRACTICE FOR LICENSED MIDWIVES; TO PROVIDE 5 MANDATORY PROCEDURES FOR LICENSED MIDWIVES; TO PROHIBIT LICENSED 6 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 13 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.

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

S. B. No. 2793 23/SS26/R1001 PAGE 1 (scm\tb) G3/5

31 <u>SECTION 1.</u> Short title. This act shall be known and may be 32 cited as "Martin's Law."

The midwifery model of 33 **SECTION 2.** Legislative purpose. (1) care emphasizes patient-centered care that considers the whole 34 35 person and prioritizes autonomy, consent and collaboration; 36 focuses on maximizing the health and wellness of a woman and her baby; and attends to the emotional, social and spiritual aspects 37 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 midwives positively affects maternal and infant health outcomes. 42

43 Midwifery is a profession in its own right and it is not (2)the practice of medicine. Community-based midwives have 44 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 weights, infant mortality, maternal mortality, and rural hospital 48 49 closures would benefit from increased access to professional 50 midwifery care in community settings.

(3) Research demonstrates that integration and coordination across birth settings and maternity care providers promote high-quality, cost-effective care. Specifically, the integration of community-based midwives into regional maternity care systems is a key determinant of improving perinatal outcomes. Regulation

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 2 (scm\tb) of the practice of professional midwifery is necessary to facilitate the integration of professional midwives into Mississippi's maternity care system.

(4) Parents have the freedom to choose the manner, place,
and attendant for giving birth. Regulating professional midwifery
in community settings will increase access to birthing options for
the families of Mississippi and preserve parental choice.

63 Within the State of Mississippi, mothers and families (5)64 seek out alternatives to hospital births and they find significant value in perinatal services offered in community settings. 65 The term "midwife" connotes to consumers and the community an 66 expectation of professionalism and a minimum level of competency 67 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 necessary to protect the health, safety and welfare of mothers and 73 74 their newborns.

(6) Therefore, the Legislature authorizes the regulation of the practice of professional midwifery in community settings. For the purpose of protecting the health and welfare of women and infants, the Legislature declares that Martin's Law shall provide for the licensure of professional midwives, create mechanisms for

S. B. No. 2793 23/SS26/R1001 PAGE 3 (scm\tb)

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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.

(b) "Apprentice" means an individual at the
apprenticeship level of midwifery training who is obtaining
clinical experience under the supervision of a qualified, licensed
midwife by providing midwifery care under the supervision of such
a preceptor.

92 (c) "Board" means the Mississippi State Board of93 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

S. B. No. 2793 23/SS26/R1001 PAGE 4 (scm\tb) ~ OFFICIAL ~

104 "patient" may also be used to refer to an individual receiving 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.

(g) "Licensed midwife" means an individual who practices professional midwifery in community settings and has met 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(4) weeks of life.

(i) "Neonatal period" means the first four (4) weeks of a child's life.

(j) "Normal" means, as applied to the antepartum, intrapartum and postpartum periods and the neonatal period, and as defined by board rule, circumstances under which a midwife has determined that a client does not have a condition that requires 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) weeks126 after a woman has given birth.

127 (m) "Professional midwifery" means the studied, skilled 128 practice of providing primary maternity care consistent with a

S. B. No. 2793 ~ OFFICIAL ~ 23/SS26/R1001 PAGE 5 (scm\tb) 129 midwife's training, education and experience to women and neonates 130 during the antepartum, intrapartum and postpartum periods.

131 <u>SECTION 4.</u> 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;

(b) A student midwife who is engaged in didacticlearning 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 an141 emergency where medical or midwifery care is not available.

142 <u>SECTION 5.</u> Scope of practice; practice parameters; mandatory
 143 procedures; prohibitions; discrimination prohibited. (1) The
 144 scope of practice of licensed midwives shall consist of:

(a) Providing primary maternity care that is consistent
with a midwife's training, education and experience to low-risk
women and their neonates during normal antepartum, intrapartum and
postpartum periods, as further articulated by the board based on
definitions established by national and international professional
associations and certifying bodies;

(b) Nonprescriptive family planning and basic
well-woman care, including, but not limited to, Pap tests,
sexually transmitted infection screenings, preconception

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 6 (scm\tb) 154 screenings, and other acts, tasks, or functions authorized by the 155 board;

156 Consulting and collaborating with other licensed (C) 157 health care providers, including, but not limited to, the referral 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.

164 (2) Prescriptive authority and the possession and 165 administration of controlled substances by licensed midwives are 166 prohibited. When acting within their scope of practice, licensed 167 midwives may obtain, transport, and administer the following 168 medications:

- 169 (a) Vitamin K;
- 170 (b) Antihemorrhagic agents;
- 171 (c) Local anesthetics;
- 172 (d) Oxygen;
- 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 practice of professional midwifery in community settings and is authorized by the board by rule.

S. B. No. 2793	~ OFFICIAL ~
23/SS26/R1001	
PAGE 7 (scm\tb)	

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

185 (4)

(4) Licensed midwives shall:

(a) Register and maintain current contact information
with the board following procedures developed by the board and
promulgated by rule for the publication of an official roster of
licensed midwives.

(b) Register births with the State Registrar of Vital
Records in accordance with the rules promulgated by the State
Department of Health.

(c) Report client statistical data to the board or other national entities as required by rules promulgated by the board.

(d) Provide certain disclosures in writing at the inception of care for a client, including, but not limited to, the following:

199 (i) The licensed midwife's education, training and200 qualifications;

201 (ii) The licensed midwife's criteria for referring 202 a client to a licensed health care provider for a higher level of 203 care;

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 8 (scm\tb) 204 (iii) The licensed midwife's criteria for 205 effecting an emergency transfer to a hospital;

(iv) Whether the midwife has malpractice liability
insurance coverage in effect and, if so, the policy limitations of
that coverage;

(v) Notice that the licensed midwife has certain statistical data reporting obligations to the board that are not optional but that may be anonymized;

(vi) The licensed midwife's disciplinary history with the board, including whether any disciplinary action is currently pending against them by the board;

(vii) The procedures a client can take to initiate disciplinary action against a licensed midwife; and

217 (viii) Any other information required by rules218 promulgated by the board.

219 (5) It shall be unlawful for licensed midwives to:

(a) Perform surgical procedures other than episiotomiesor repairs of perineal lacerations;

222 (b) Use forceps or vacuum extraction;

(c) Aid or abet an unlicensed person to practice as a licensed midwife;

(d) Negligently, willfully, or intentionally act in a manner inconsistent with the health and safety of those entrusted to the licensed midwife's care;

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 9 (scm\tb)

228 Engage in substandard, unprofessional or (e) 229 dishonorable conduct, or any other form of misconduct as defined 230 by the board; and 231 Engage in any other act, task or function (f) 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 The board shall consist of eight (8) persons and be (a) 241 comprised of: 242 Four (4) midwives each of whom has at least (i) 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 that certifies family practitioners or pediatricians; and 251

S. B. No. 2793	~ OFFICIAL ~
23/SS26/R1001	
PAGE 10 (scm\tb)	

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. Board members shall be resident citizens of the 256 (b) 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; (iv) The Mississippi Public Health Institute; 266 267 (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 The initial appointments to the board shall be for (C) 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

S. B. No. 2793	~ OFFICIAL ~
23/SS26/R1001	
PAGE 11 (scm\tb)	

ending on July 1, 2026; and one (1) member shall serve for a term ending on July 1, 2027. All later appointments shall be for terms of four (4) years from the expiration date of the previous term.

(d) The Governor shall fill a vacancy no later than
sixty (60) days from the date the vacancy occurs. Members may
hold office until their successors have been appointed.

(e) Board members shall not be compensated for their service, but shall be reimbursed for necessary and ordinary expenses and mileage incurred while performing their duties as members of the board as provided in Section 25-3-41, to be paid from the special fund of the board.

288 (2) Not later than July 1, 2025, the board shall promulgate289 rules that, at a minimum:

(a) Establish and implement a program for qualified
individuals to apply and obtain licensure as a licensed midwife,
including, but not limited to:

(i) Developing policies and procedures for
 temporary permits, initial licensing, renewals and reinstatement
 of lapsed licenses; and

(ii) A fee schedule for applications, temporary
permits, initial licenses, renewals and reinstatements. The board
shall review its fee schedule every four (4) years and update fees
as necessary for the growth and sustainability of the profession;
(b) Develop educational standards, including, but not

301 limited to:

S. B. No. 2793 ~ OFFICIAL ~ 23/SS26/R1001 PAGE 12 (scm\tb) 302 (i) Identifying the basic minimum educational
303 standards, including the type of courses and number of hours
304 required, that qualify an applicant to seek licensure;

305 (ii) Developing methods and requirements for
 306 ensuring the continued competence of licensed midwives through
 307 continuing midwifery education, including the type of courses and
 308 number of hours required, as a condition for license renewal; and
 309 (iii) Approving educational programs,
 310 institutions, instructors and facilities that meet the basic and

311 continuing professional midwifery educational requirements for 312 practice within Mississippi;

313 (c) Prescribe standards and competencies for the 314 practice of professional midwifery in community settings within 315 Mississippi based on criteria established by national and 316 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;

323 (e) Exercise its disciplinary authority by establishing 324 and implementing formal disciplinary processes and procedures.

325 (i) The board shall develop and prescribe326 procedures for investigating, processing and resolving complaints,

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 13 (scm\tb) 327 violations, probations, suspensions, revocations and 328 reinstatements, including, but not limited to: 329 Complaints of professional misconduct; 1. 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.

(ii) All procedures implementing the board's
disciplinary authority shall incorporate notice, the opportunity
to be heard, and a decision by a neutral decision-maker. Final
agency decisions will be subject to judicial review; and

(f) Collect, analyze, share and publish anonymized statistical perinatal outcome data from licensed midwives and individuals holding temporary permits, including, but not limited to, live births, fetal demises and neonatal and maternal deaths. 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:

(a) The State Department of Health;
(b) The Mississippi Midwives Alliance;
(c) The Mississippi Perinatal Quality Collaborative;
(d) The Mississippi Public Health Institute;
(e) The Institute for the Advancement of Minority

351 Health; and

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 14 (scm\tb) 352

(f) Better Birth Mississippi.

(4) The board shall develop, publish and maintain an official roster of licensed midwives and individuals holding temporary permits that can be accessed by the public at no cost. The roster shall reflect the statistical outcome data and disciplinary history of each licensee and permit-holder.

358 The board shall deposit all funds received from the (5) 359 collection of application and licensure fees and the levying of 360 disciplinary fines into a special fund that is created in the 361 State Treasury to be known as the Board of Licensed Midwifery 362 Fund. Monies in the special fund shall be used by the board, upon 363 appropriation by the Legislature, for the purpose of administering 364 this act. Any interest earned on the special fund shall be 365 credited to the special fund and shall not be paid into the State 366 General Fund. Any monies remaining in the special fund at the end 367 of a fiscal year shall not lapse into the State General Fund.

368 (6) The board is authorized to contract with third-party 369 entities to perform clerical and administrative tasks and 370 functions related to the logistical implementation of midwifery 371 licensure under this act.

(7) The board may promulgate any and all additional rules it deems necessary to effectively regulate the practice of licensed midwives to the extent that those additional rules do not violate any terms or provisions of this act.

~ OFFICIAL ~

S. B. No. 2793 23/SS26/R1001 PAGE 15 (scm\tb) 376 <u>SECTION 7.</u> License required; temporary permits; exemptions; 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.

382 (2) The board shall promulgate rules allowing for the
 383 expedited issuance of temporary permits authorizing an individual
 384 to practice professional midwifery pending qualification for
 385 licensure.

(a) Temporary permits shall be issued for a term of
twenty-four (24) months and may not be renewed except as follows:
A temporary permit issued to an apprentice may be renewed upon a
showing to the board that the apprentice has good cause for not
completing their clinical training within the initial temporary
permit period.

(b) An applicant who is granted a temporary permit under this section is subject to all other requirements of this act and rules promulgated by the board, and the board may automatically void the temporary permit if the applicant fails to 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

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 16 (scm\tb) 401 board receives the application for an initial license within sixty 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 supervision406 of a licensed midwife;

407 (ii) Be licensed in good standing as a midwife in408 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.

(e) An individual seeking a temporary permit under this
subsection (2) must submit an application for full licensure
within twelve (12) months after the effective date of the initial
rules promulgated by the board.

417 (3) Licensure under this act is not required for:

(a) An employee or other individual who is assisting a midwife and who is under the midwife's supervision from performing activities or functions that are delegated by the midwife, that are nondiscretionary, that do not require the exercise of professional judgment for their performance, and that are within the midwife's authority to perform; and

S. B. No. 2793

PAGE 17 (scm\tb)

(b) An individual providing uncompensated care to a friend or family member if the individual does not hold themself out to the public as a licensed midwife.

(4) Nothing in this act shall prohibit a traditional birth attendant from providing care that falls within the scope of midwifery practice without a license where the traditional birth attendant is fulfilling a cultural or religious role that has historically included the provision of care at birth, and the traditional birth attendant only offers such services to women and families within that distinct cultural or religious group.

434 <u>SECTION 8.</u> Confidentiality. (1) All statistical data 435 reporting and sharing by the board shall be anonymized prior to 436 dissemination or publication.

437 The board shall keep all information relating to the (2)438 receipt and investigation of complaints filed against licensees or 439 applicants confidential until the information is disclosed in the 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 provisions of the Mississippi Public Records Act of 1983 and shall 447 448 be kept confidential by the board.

~ OFFICIAL ~

S. B. No. 2793 23/SS26/R1001 PAGE 18 (scm\tb) 449 <u>SECTION 9.</u> 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.

455 No duly licensed midwife who, in good faith and in the (2) 456 exercise of reasonable care, renders aid in emergency childbirth, 457 or assists in transporting a laboring mother to a place where 458 medical assistance can be reasonably expected, shall be liable for 459 any civil damages to the mother or infant as a result of any acts 460 committed in good faith and in the exercise of reasonable care or 461 omissions in good faith and in the exercise of reasonable care by 462 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:

(a) Offer or engage in the provision of professional
midwifery services unless duly licensed to do so under the
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;

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 19 (scm\tb) 474 (c) Provide midwifery care during the time their 475 license or temporary permit is suspended, revoked, lapsed 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;

(e) Make false representations or impersonate or act as
a proxy for another person or allow or aid any person to
impersonate them in connection with any application for licensing
or request to be licensed; or

484

(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.

489 <u>SECTION 11.</u> (1) Terminology in any health coverage plan 490 policy or contract deemed discriminatory against professional 491 midwifery, community perinatal care, or the midwifery model of 492 care or that inhibits reimbursement for such services at the 493 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

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 20 (scm\tb) 499 midwife licensed under this act, regardless of the site of 500 services. The coverage provided for in this section may be 501 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.

(4) Whenever any health coverage plan amended, delivered, 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

S. B. No. 2793 ~ OFFICIAL ~ 23/SS26/R1001 PAGE 21 (scm\tb) 524 shall amend or change the Division of Medicaid's schedule of 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:

(a) Be able to identify when to transmit and receive
patient information, and transfer and receive patients, across the
facility's levels of care; and

(b) Coordinate with other licensed providers to
effectuate services across the facility's levels of care in a way
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.

(3) Within twenty-four (24) months from the effective date of the initial rules promulgated by the board, the Division of Health Facilities Licensure and Certification of the State Department of Health shall develop and institute a safe perinatal 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:

S. B. No. 2793 23/SS26/R1001 PAGE 22 (scm\tb) 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.

(4) Nothing in this act shall prohibit licensed providers or
facilities from billing for health care services rendered,
including maternity care and perinatal care.

562 SECTION 13. Section 73-25-33, Mississippi Code of 1972, is 563 amended as follows:

564 73-25-33. The practice of medicine shall mean to suggest, recommend, prescribe, or direct for the use of any person, any 565 566 drug, medicine, appliance, or other agency, whether material or 567 not material, for the cure, relief, or palliation of any ailment 568 or disease of the mind or body, or for the cure or relief of any 569 wound or fracture or other bodily injury or deformity, or the practice of obstetrics or midwifery, after having received, or 570 with the intent of receiving therefor, either directly or 571 indirectly, any bonus, gift, profit or compensation \* \* \*. 572

S. B. No. 2793 **~ OFFICIAL ~** 23/SS26/R1001 PAGE 23 (scm\tb) 573 SECTION 14. Sections 1 though 10 of this act shall be 574 codified as a new chapter in Title 73, Mississippi Code of 1972. 575 Section 11 of this act shall be codified as a new section in 576 Article 5, Chapter 41, Mississippi Code of 1972.

577 **SECTION 15.** This act shall take effect and be in force from 578 and after July 1, 2023.