

House Bill 684

By: Representatives Davis of the 87th, Mitchell of the 88th, Schofield of the 63rd, Cannon of the 58th, Scott of the 76th, and others

A BILL TO BE ENTITLED
AN ACT

1 To amend Title 31 of the Official Code of Georgia Annotated, relating to health, so as to
2 repeal provisions relating to the practice of midwifery; to amend Title 43 of the Official Code
3 of Georgia Annotated, relating to professions and businesses, so as to provide for the
4 licensure and regulation of community midwives; to provide for a short title; to provide for
5 definitions; to provide for the creation of the Certified Community Midwife Board; to
6 provide for membership and duties of the board; to provide for licensure requirements; to
7 provide for the issuance, renewal, and revocation of licenses; to require written disclosures
8 to clients; to provide for authorized acts and duties; to provide for statutory construction; to
9 provide for conforming changes; to provide for related matters; to repeal conflicting laws;
10 and for other purposes.

11 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

12 **SECTION 1.**

13 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended by
14 repealing Chapter 26, relating to the practice of midwifery, and designating said chapter as
15 reserved.

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16 **SECTION 2.**

17 Title 43 of the Official Code of Georgia Annotated, relating to professions and businesses,
18 is amended by enacting a new chapter to read as follows:

19 **"CHAPTER 24B**20 **43-24B-1.**

21 **This chapter shall be known and may be cited as the 'Certified Community Midwifery Act.'**

22 **43-24B-2.**

23 **As used in this chapter, the term:**

24 **(1) 'Board' means the Certified Community Midwife Board created pursuant to Code**
25 **Section 43-24B-3.**

26 **(2) 'Certified community midwife' means an individual licensed under this chapter who**
27 **is credentialed under the Accreditation Commission of Certified Community Midwife**
28 **Education and Certification, holds current certification as a certified community midwife,**
29 **and provides specialized care to women and their infants during antenatal, childbirth, and**
30 **postpartum periods through the practice of certified community midwifery.**

31 **(3) 'Certified nurse-midwife' means an individual who is licensed as a registered nurse**
32 **pursuant to former Chapter 26 of this title and certified by the American College of**
33 **Nurse-Midwives.**

34 **(4) 'Client' means a woman and her fetus or newborn baby under the care of a certified**
35 **community midwife.**

36 **(5) 'Low risk' means a labor and delivery and postpartum, newborn, and interconceptual**
37 **care that does not include a condition that requires a mandatory transfer under**
38 **administrative rules adopted by the division.**

39 (6) 'Physician' means an individual licensed to practice medicine pursuant to Article 2
40 of Chapter 34 of this title.

41 (7) 'Practice of certified community midwifery' means the practice of providing the
42 necessary supervision, care, and advice to a client during essentially normal pregnancy,
43 labor, delivery, postpartum, and newborn periods that is consistent with national
44 community midwifery standards and based upon the acquisition of clinical skills
45 necessary for such care, including, but not limited to:

46 (A) Obtaining informed consent to provide services;

47 (B) Obtaining a health history, including a physical examination;

48 (C) Developing a plan of care for a client;

49 (D) Evaluating the results of client care;

50 (E) Consulting and collaborating with and referring and transferring care to licensed
51 healthcare professionals, as appropriate;

52 (F) Obtaining medications to administer to a client, including:

53 (i) Prescription vitamins;

54 (ii) Rho(D) immune globulin;

55 (iii) Sterile water;

56 (iv) One dose of intramuscular oxytocin after delivery of a baby to minimize a
57 client's blood loss;

58 (v) An additional single dose of oxytocin if a hemorrhage occurs, in which case the
59 certified community midwife must initiate transfer to a physician if a client's
60 condition does not immediately improve;

61 (vi) Oxygen;

62 (vii) Local anesthetics without epinephrine;

63 (viii) Vitamin K to prevent hemorrhagic disease of a newborn baby;

64 (ix) As required by law, eye prophylaxis to prevent ophthalmia neonatorum; and

- 65 (x) Any other medication approved by a licensed healthcare provider with authority
66 to prescribe that medication;
- 67 (G) Obtaining food, food extracts, or dietary supplements as defined by the United
68 States Food, Drug, and Cosmetic Act, homeopathic remedies, plant substances that are
69 not designated as prescription drugs or controlled substances, and over-the-counter
70 medications;
- 71 (H) Obtaining and using appropriate equipment and devices such as a fetal Doppler,
72 blood pressure cuff, phlebotomy supplies and instruments, and sutures;
- 73 (I) Obtaining appropriate screens and tests, including laboratory tests, urinalysis, and
74 ultrasound scans;
- 75 (J) Managing the antepartum period;
- 76 (K) Managing the intrapartum period, including:
- 77 (i) Monitoring and evaluating the condition of a mother and a fetus;
78 (ii) Performing an emergency episiotomy; and
79 (iii) Delivering a baby in any out-of-hospital setting;
- 80 (L) Managing the postpartum period, including the suturing of an episiotomy and the
81 suturing of first and second degree natural perineal and labial laceration, including the
82 administration of the local anesthetic;
- 83 (M) Managing the newborn period, including:
- 84 (i) Providing care for a newborn baby, including performing a normal newborn baby
85 examination; and
86 (ii) Resuscitating a newborn baby;
- 87 (N) Providing limited interconceptual services in order to provide continuity of care,
88 including:
- 89 (i) Breastfeeding support and counseling;
90 (ii) Family planning, limited to natural family planning, cervical caps, and
91 diaphragms; and

92 (iii) Pap smears and referral of a client with an abnormal result to an appropriate
93 licensed healthcare provider; and
94 (O) Executing the orders of a physician, if the orders are within the education,
95 knowledge, and skill of the certified community midwife.

96 43-24B-3.

97 (a) There is created within the division the Certified Community Midwife Board which
98 shall consist of five members.

99 (b) The Governor shall appoint all members of such board as follows:

100 (1) Four certified community midwives; and

101 (2) One member of the general public.

102 (c) The members of the board shall serve for terms of two years and may succeed
103 themselves.

104 (d) Each member of the board shall receive the expense allowance as provided by
105 subsection (b) of Code Section 45-7-21 and the same mileage allowance for the use of a
106 personal car as that received by other state officials and employees or a travel allowance
107 of actual transportation costs if traveling by public carrier within this state.

108 (e) Any vacancy on the board shall be filled in the same manner as the regular
109 appointments. The Governor may remove members of the board for incompetence, neglect
110 of duty, unprofessional conduct, conviction of any felony, failure to meet the qualifications
111 of this chapter, or committing any act prohibited by this chapter.

112 (f) The board shall elect a chairperson from among its membership and may elect other
113 officers at the discretion of the board. Such chairperson and other officers shall serve for
114 terms of one year.

115 (g) The board shall meet at least once per year or as otherwise called by the chairperson.

116 43-24B-4.

117 The board shall issue a license to engage in the practice of certified community midwifery
118 to any individual who meets the requirements of this chapter.

119 43-24B-5.

120 (a) Each applicant for a license under this chapter shall meet the following requirements:

121 (1) Submit an application in a form prescribed by the board;

122 (2) Pay a fee as determined by the board;

123 (3) Be of good moral character with no pending complaints;

124 (4) Have satisfactory results from a criminal background check. Application for a
125 license under this Code section shall constitute express consent and authorization for the
126 board to perform such criminal background check. Each applicant who submits an
127 application for licensure agrees to provide the board with any and all information
128 necessary to run such criminal background check, including, but not limited to,
129 classifiable sets of fingerprints. The applicant shall be responsible for all fees associated
130 with the performance of such background check;

131 (5) Hold the credential from the Accreditation Commission of Certified Community
132 Midwife Education and Certification (ACCM) or equivalent certification by ACCM
133 endorsement, including having passed the exam required for certification;

134 (6) Provide documentation of three years of apprenticeship which includes training and
135 practice as a doula or community health worker, and includes experience in initial
136 obstetrical exam, prenatal care, births, newborn examinations, and postpartum care.
137 Preceptors for apprenticeships may be certified community midwives, certified
138 nurse-midwives, physicians, or physician assistants with at least five years of experience
139 and at least 50 documented births, and who are credentialed by the ACCM;

140 (7) Hold current certification in adult and infant coronary pulmonary resuscitation
141 (CPR); and

142 (8) Provide documentation of successful completion of approved pharmacology,
143 anatomy and physiology, and birth emergency courses as defined by the ACCM.

144 (b) The board, in its discretion, may issue a license to an applicant who does not meet all
145 of the requirements of paragraphs (5) through (8) of subsection (a) of this Code section but
146 who has been engaged in the practice of certified community midwifery for at least ten
147 years and has at least 50 documented births, and having passed the certified communication
148 midwife exam required for certification by ACCM.

149 43-24B-6.

150 (a) A license issued by the board shall be renewed every three years if the licensee is not
151 in violation of this chapter at the time of application for renewal.

152 (b) Each individual licensed under this chapter is responsible for renewing his or her
153 license before the expiration date.

154 43-24B-7.

155 (a) The board may refuse to issue or renew a license; revoke, suspend, or restrict a license;
156 place a licensee on probation; issue a public or private reprimand; or issue a cease and
157 desist order upon proof that the licensee or applicant has:

158 (1) Represented or held himself or herself out to be a certified community midwife;

159 (2) Administered a prescription medication, except oxygen or oxytocin, in the practice
160 of certified community midwifery;

161 (3) Failed to obtain an informed consent statement pursuant to Code Section 43-24B-9
162 prior to engaging in the practice of midwifery with a client;

163 (4) Failed to retain signed informed consent statements for at least four years pursuant
164 to Code Section 43-24B-9;

165 (5) Disregarded a client's dignity or right to privacy as to her person, condition,
166 possessions, or medical records;

167 (6) Failed to file or record any medical report as required by law, impeded or obstructed
168 the filing or recording of a report, or induced another to fail to file or record a report;

169 (7) Breached a statutory, common law, regulatory, or ethical requirement of
170 confidentiality with respect to a client, unless ordered by the court;

171 (8) Used advertising or an identification statement that is false, misleading, or deceptive;
172 or

173 (9) Used in combination with the term 'midwife' the term 'nurse' or another title, initial,
174 or designation that falsely implies that the certified community midwife is licensed as a
175 certified nurse-midwife, registered nurse, licensed practical nurse, or certified practical
176 nurse.

177 (b) The board is authorized to conduct investigations into allegations of conduct described
178 in subsection (a) of this Code section.

179 (c) In addition to the actions specified in subsection (a) of this Code section, the board may
180 fine a licensee found to have violated any provision of this chapter or any rule adopted by
181 the board under this chapter of not less than \$100.00 nor more than \$500.00 for each such
182 violation.

183 (d) The provisions of Chapter 13 of Title 50, the 'Georgia Administrative Procedure Act,'
184 shall be applicable to the board and the provisions of this chapter.

185 43-24B-8.

186 Any individual engaging in the practice of certified community midwifery in violation of
187 this chapter shall be guilty of a misdemeanor.

188 43-24B-9.

189 (a) Prior to engaging in the practice of certified community midwifery with a client, a
190 certified community midwife shall obtain informed consent or refusal from such client.

191 (b) Such informed consent shall include:

- 192 (1) The name and license number of the certified community midwife;
193 (2) The client's name, address, telephone number, and primary care provider, if the client
194 has one;
195 (3) A description of the certified community midwife's education, training, continuing
196 education, and experience in midwifery;
197 (4) A description of the certified community midwife's peer review process;
198 (5) The certified community midwife's philosophy of practice;
199 (6) A promise to provide the client, upon request, with separate documents describing
200 the rules governing the practice of certified community midwifery, including a list of
201 conditions indicating the need for consultation, collaboration, referral, transfer, or
202 mandatory transfer, and the certified community midwife's personal written practice
203 guidelines;
204 (7) A medical backup or transfer plan;
205 (8) A description of the services provided to the client by the certified community
206 midwife;
207 (9) The certified community midwife's current legal status;
208 (10) The availability of a grievance process;
209 (11) The signatures of the client and certified community midwife and the date of
210 signatures; and
211 (12) Whether the certified midwife is covered by a professional liability insurance
212 policy.
213 (c) The certified community midwife shall retain a copy of executed informed consent
214 documents for at least four years after the date of signing.

215 43-24B-10.

216 A certified community midwife shall:

- 217 (1)(A) Limit the certified community midwife's practice to normal pregnancy, labor,
218 delivery, postpartum, newborn, and interconceptual care:
- 219 (i) That is not pharmacologically induced;
 - 220 (ii) That is low risk at the start of labor;
 - 221 (iii) That remains low risk throughout the course of labor and delivery;
 - 222 (iv) In which the infant is born spontaneously between 37 and 43 completed weeks
223 of gestation; and
 - 224 (v) In which after delivery, both mother and infant remain low risk.
- 225 (B) The limitations contained in subparagraph (A) of this paragraph shall not prohibit
226 a certified community midwife from delivering an infant when there is:
- 227 (i) Intrauterine fetal demise; or
 - 228 (ii) A fetal anomaly incompatible with life;
- 229 (2) Appropriately recommend and facilitate consultation and collaboration with and
230 referral or mandatory transfer of care to a licensed healthcare professional when the
231 circumstances require such action in accordance with this Code section and standards
232 established by board rule;
- 233 (3) If, after a client has been informed that she has or may have a condition indicating
234 the need for medical consultation, collaboration, referral, or transfer and the client has
235 declined such consultation, collaboration, referral, or transfer, the certified community
236 midwife shall:
- 237 (A) Terminate care in accordance with procedures established by board rule; or
 - 238 (B) Continue to provide care for the client if the client signs a waiver of medical
239 consultation, collaboration, referral, or transfer;
- 240 (4) If after a client has been informed that she has or may have a condition indicating the
241 need for mandatory transfer, the certified community midwife shall, in accordance with
242 procedures established by board rule, terminate the care or initiate transfer by:
- 243 (A) Calling 9-1-1 and reporting the need for immediate transfer;

244 (B) Immediately transporting the client by private vehicle to the receiving provider; or
245 (C) Contacting the physician to whom the client will be transferred and following such
246 physician's orders; and

247 (5) The standards for consultation and transfer are the minimum standards that a certified
248 community midwife shall follow. A certified community midwife shall initiate
249 consultation, collaboration, referral, or transfer of a patient sooner that required by
250 administrative rule if, in the opinion and experience of the certified community midwife,
251 the condition of the mother or infant warrant a consultation, collaboration, referral, or
252 transfer.

253 43-24B-11.

254 (a) If a certified community midwife seeks to consult or collaborate with or refer or
255 transfer a client to a licensed healthcare provider or facility, the responsibility of the
256 provider or facility for the client shall not begin until the client is physically within the care
257 of such provider or facility.

258 (b) A licensed healthcare provider who examines a certified community midwife's client
259 shall only be liable for the actual examination and shall not be held accountable for the
260 client's decision to pursue an out-of-hospital birth or the services of a certified community
261 midwife.

262 (c)(1) A licensed healthcare provider may, upon receiving a briefing or data from a
263 certified community midwife, issue a medical order for the certified community
264 midwife's client, without that client being an explicit patient of such provider.

265 (2) Regardless of the advice given or order issued, the responsibility and liability for
266 caring for the client shall be that of the certified community midwife.

267 (3) The provider giving the order shall be responsible and liable only for the
268 appropriateness of the order, given the briefing or data received.

269 (4) The issuing of an order for a certified community midwife's client does not constitute
270 a delegation of duties from the other provider to the certified community midwife.

271 (d) A licensed healthcare provider may not be held civilly liable for rendering emergency
272 medical services that arise from prohibited conduct or from care rendered under a waiver
273 as specified, unless the emergency medical services constitute gross negligence or reckless
274 disregard for the client.

275 (e) A certified community midwife shall be solely responsible for the use of medications
276 under this chapter.

277 43-24B-12.

278 A certified community midwife shall not be authorized to:

279 (1) Administer a prescription drug to a client in a manner that violates this chapter;

280 (2) Effect any type of surgical delivery except for the cutting of an emergency
281 episiotomy, and suturing a first and second degree tear;

282 (3) Administer any type of epidural, spinal, or caudal anesthetic, or any type of narcotic
283 analgesia;

284 (4) Use forceps or a vacuum extractor; or

285 (5) Manually remove the placenta, except in an emergency that presents an immediate
286 threat to the life of the mother.

287 43-24B-13.

288 Nothing in this chapter shall be construed to abridge, limit, or change in any way the right
289 of a parent or parents to deliver a fetus where, when, how, and with whom they choose.

290 43-24B-14.

291 The practice of certified community midwifery shall not be considered the practice of
292 medicine, nursing, or nurse-midwifery."

293

SECTION 3.

294 All laws and parts of laws in conflict with this Act are repealed.