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1	S.210
2	Introduced by Senators Miller and Snelling
3	Referred to Committee on
4	Date:
5	Subject: Health; health insurance; midwives; home births
6	Statement of purpose: This bill proposes to tighten insurance coverage
7	requirements for home births and other services provided by licensed
8	midwives and certified nurse midwives; to ensure that all midwives submit
9	data to a nationwide database; and to require the midwife appointees to the
10	office of professional regulation's advisory board, not the commissioner of
11	health, to access the database to obtain relevant data.
12	An act relating to licensed midwives and certified nurse midwives
13	It is hereby enacted by the General Assembly of the State of Vermont:
14	Sec. 1. 8 V.S.A. § 4099d is amended to read:
15	§ 4099d. MIDWIFERY COVERAGE; HOME BIRTHS
16	(a) A health insurance plan or health benefit plan providing maternity
17	benefits shall also provide coverage for services rendered by a midwife
18	midwives licensed pursuant to 26 V.S.A. chapter 85 of Title 26 or an and by
19	advanced practice registered nurse nurses licensed pursuant to 26 V.S.A.

chapter 28 of Title 26 who is are certified as a nurse midwife midwives for all

services that are within the licensed midwife's or certified nurse midwife's
scope of practice and, whether provided in a hospital or other health care
facility or at home.

- (b) Coverage for services provided by a licensed midwife or certified nurse midwife shall not be subject to any greater co-payment, deductible, or coinsurance than is applicable to any other similar benefits provided by the plan.
- (c) A health insurance plan may require that the maternity services be provided by a licensed midwife or certified nurse midwife under contract with the plan; provided, however, that the plan may not impose on a midwife practice conditions or additional qualifications for inclusion in the plan's network that exceed the conditions and qualifications required by the midwife's applicable licensing statutes or that exceed those the plan applies to other reproductive health care practitioners. In the event that a plan does not include at least one licensed midwife and at least one certified nurse midwife in its network, the plan shall provide coverage for the services of a licensed midwife and of a certified nurse midwife according to the same terms and conditions as though the midwife were in the plan's network.
- (d) As used in this section, "health insurance plan" means any health insurance policy or health benefit plan offered by a health insurer, as defined in 18 V.S.A. § 9402, as well as Medicaid, the Vermont health access plan, and

1	any other public health care assistance program offered or administered by the
2	state or by any subdivision or instrumentality of the state. The term shall not
3	include policies or plans providing coverage for specific disease or other
4	limited benefit coverage.
5	Sec. 2. 26 V.S.A. § 1614 is amended to read:
6	§ 1614. APRN RENEWAL
7	An APRN license renewal application shall include:
8	(1) documentation of completion of the APRN practice requirement;
9	(2) a current certification by a national APRN specialty certifying
10	organization;
11	(3) current practice guidelines; and
12	(4) a current collaborative provider agreement if required for transition
13	to practice; and
14	(5) for a certified nurse midwife, verification that the midwife has
15	submitted to the database maintained by the Division of Research of the
16	Midwives Alliance of North America data for each home birth he or she
17	attended.

1	Sec. 3. 26 V.S.A. § 4187 is amended to read:
2	§ 4187. RENEWALS
3	(a)(1) Biennially, the director shall forward a renewal form to each licensed
4	midwife. The completed form shall include verification that during the
5	preceding two years, the licensed midwife has:
6	(A) completed 20 hours of continuing education approved by the
7	director by rule;
8	(B) participated in at least four peer reviews;
9	(C) submitted individual practice data;
10	(D) maintained current cardiopulmonary resuscitation
11	certification; and
12	(E) filed a timely certificate of birth for each birth at which he or she
13	was the attending midwife, as required by law; and
14	(F) submitted to the database maintained by the Division of Research
15	of the Midwives Alliance of North America data for each home birth he or she
16	attended.
17	(2) Upon receipt of the completed form and of the renewal fee, the
18	director shall issue a renewal license to applicants who qualify under this
19	section.
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Sec 4	Sec 5	8 of No	35 of	the Acts	of 2011	is amend	ed to	read.
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Sec 8	DEPARTMENT	OF HEAT TH	REPORTING	REQUIREMENT
Sec. o.	DEFARTMENT	OF REALTH,	KEFUKTING	KEQUIKEMENT

- (a) The department of health licensed midwives appointed as advisors to the office of professional regulation pursuant to 26 V.S.A. § 4186 shall access the database maintained by the Division of Research of the Midwives Alliance of North America to obtain information relating to care provided in Vermont by midwives licensed pursuant to 26 V.S.A. chapter 85 of Title 26 and by advanced practice registered nurses licensed pursuant to 26 V.S.A. chapter 28 of Title 26 who are certified as nurse midwives. The advisor appointees shall provide the full aggregate data available from the database to the commissioner of health to enable the commissioner or designee to comply with subsection (b) of this section.
- (b) No later than March 15 of each year from 2012 through 2016, inclusive, the commissioner of health or designee shall provide testimony to the house committee on health care and the senate committee on health and welfare regarding the activities of licensed midwives and certified nurse midwives performing home births and providing prenatal and postnatal care in a nonmedical environment during the preceding year. The testimony shall include the number of home births in Vermont, the number of hospital transports associated with home births, the treatment of high-risk patients, and other relevant data, as well as the level of compliance of the licensed midwives

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1	and certified nurse midwives with the laws and rules governing their scope of
2	practice.

- 3 Sec. 5. EFFECTIVE DATES
- 4 (a) Sec. 1 of this act shall take effect on October 1, 2012, and shall apply to
- 5 <u>all health insurance plans and health benefit plans on and after October 1,</u>
- 6 2012, on such date as a health insurer issues, offers, or renews the plan, but in
- 7 no event later than October 1, 2013.
- 8 (b) The remaining sections of this act shall take effect on passage.