

# HOUSE BILL 9

J2

(5lr0492)

## ENROLLED BILL

— Health and Government Operations/Education, Health, and Environmental Affairs —

Introduced by ~~Delegate Kelly~~ Delegates Kelly, Afzali, Grammer, Korman, McMillan, Moon, Morhaim, Parrott, Stein, Valderrama, Vogt, Hayes, Oaks, Pena-Melnyk, Miele, Saab, Morgan, Pendergrass, Hammen, Kipke, Cullison, Sample-Hughes, Barron, Reznik, West, Rose, Hill, Krebs, and K. Young

Read and Examined by Proofreaders:

\_\_\_\_\_  
Proofreader.  
\_\_\_\_\_  
Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ o'clock, \_\_\_\_\_ M.

\_\_\_\_\_  
Speaker.

### CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 **Maryland ~~Home Birth Safety~~ Licensure of Direct-Entry Midwives Act**

3 FOR the purpose of establishing a licensing and regulatory system for the practice of  
4 direct-entry midwifery under the State Board of Nursing; establishing the  
5 Direct-Entry Midwifery Advisory Committee within the Board; providing for the  
6 composition, qualifications, chair, term, quorum, meeting requirements,  
7 compensation, reimbursement, and removal of members of the Committee; providing  
8 for the duties of the Committee; requiring the Committee, beginning on a certain  
9 date, to submit a certain annual report to the Board; including certain midwives  
10 under the jurisdiction of a certain rehabilitation committee; requiring the Board to  
11 give certain persons a hearing before taking certain actions; requiring certain

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#### EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.

*Italics indicate opposite chamber/conference committee amendments.*



1 midwives to notify certain ~~providers~~ health care practitioners of certain births,  
2 transfer certain records, make certain recommendations, develop certain plans for  
3 certain patients, obtain certain informed consent agreements that acknowledge  
4 certain items from certain patients, comply with certain data collection and reporting  
5 requirements, complete and submit certain birth certificates, make certain records  
6 and information available to certain individuals, and display a certain notice under  
7 certain circumstances; requiring certain midwives to consult with certain health care  
8 ~~providers~~ practitioners under certain circumstances, arrange for emergency transfer  
9 under certain circumstances, ~~and~~ refer and transfer care of certain patients under  
10 certain circumstances, and complete certain forms; authorizing certain licensed  
11 direct-entry midwives to continue certain care of certain patients in consultation  
12 with certain health care practitioners; requiring the Committee to review and  
13 ~~approve~~ recommend approval to the Board of certain plans; requiring certain plans  
14 to be provided to certain hospitals; requiring the Board, in consultation with certain  
15 parties, to develop a certain form for use during certain transfers; ~~prohibiting certain~~  
16 ~~midwives from offering a certain service except under certain circumstances~~  
17 requiring the Board, in consultation with stakeholders, to develop a certain consent  
18 agreement; requiring, beginning on a certain date, a licensed direct-entry midwife  
19 to annually report certain information to the Committee in a certain form; requiring  
20 the Committee to maintain the confidentiality of certain reports; requiring the Board  
21 to send a certain notice to certain licensed direct-entry midwives under certain  
22 circumstances; prohibiting the Board from renewing the license of certain licensed  
23 direct-entry midwives, under certain circumstances, or taking other action against  
24 certain licensed direct-entry midwives for the failure to submit certain reports;  
25 specifying the qualifications for a license to practice direct-entry midwifery;  
26 specifying the procedure for applying for a license to practice direct-entry midwifery;  
27 requiring the Board to set certain fees for the issuance and renewal of certain  
28 licenses and services; requiring the Board to pay certain fees to the Comptroller of  
29 the State; requiring the fees to be used for a certain purpose; ~~authorizing the Board~~  
30 ~~to waive certain education and training requirements under certain circumstances;~~  
31 requiring the Board to issue certain licenses and to include a certain designation on  
32 each license; requiring the Board to consider certain factors on receipt of certain  
33 criminal history record information in making certain determinations; specifying the  
34 scope of a license issued under this Act; providing for the expiration and renewal of  
35 a license to practice direct-entry midwifery; requiring the Board to send to the  
36 licensee a certain renewal notice at a certain time and in a certain manner; requiring  
37 certain continuing education, peer review, and data submission as a condition of  
38 license renewal; requiring the Board to place certain licensees on inactive status and  
39 to reactivate and reinstate certain licenses under certain circumstances; prohibiting  
40 the Board from reinstating certain licenses under certain circumstances; requiring  
41 certain licensees to submit to additional criminal history records checks at specified  
42 intervals; prohibiting certain midwives from surrendering certain licenses except  
43 under certain circumstances; prohibiting certain licenses from lapsing by operation  
44 of law under certain circumstances; authorizing the Board to set certain conditions  
45 to accept the surrender of certain licenses; authorizing the Board to deny certain  
46 licenses, reprimand or place on probation certain licensees, or suspend or revoke  
47 certain licenses under certain circumstances, subject to certain hearing provisions;

1 authorizing the Board to impose a certain penalty; prohibiting certain individuals  
 2 from making certain representations or using certain abbreviations or designations  
 3 unless authorized to practice direct-entry midwifery in the State; prohibiting certain  
 4 licensees from advertising in a certain manner; providing for the scope of this Act;  
 5 providing certain ~~health care providers~~ persons with certain immunity from civil  
 6 liability under certain circumstances; providing certain penalties for the violation of  
 7 certain provisions of this Act; providing a short title for certain provisions of this Act;  
 8 ~~subjecting certain provisions of this Act to the Maryland Program Evaluation Act~~  
 9 ~~and a certain full evaluation under certain circumstances;~~ specifying the terms of  
 10 the initial members of the Committee; requiring the Board, beginning on a certain  
 11 date and every year thereafter, to submit a certain report to certain committees of  
 12 the General Assembly ~~on or before a certain date regarding the practice of~~  
 13 ~~direct-entry midwifery in the State;~~ defining certain terms; altering ~~a~~ certain  
 14 ~~definition~~ definitions; requiring the Committee, with the approval of the Board, to  
 15 convene a certain workgroup to develop a certain form, a certain consent agreement,  
 16 and a certain formulary; providing for the composition and duties of the workgroup;  
 17 requiring the workgroup to report its findings and recommendations to the Board on  
 18 or before a certain date; requiring the Department of Legislative Services, on or  
 19 before a certain date, to compile and analyze certain data, report on the data to  
 20 certain committees of the General Assembly, and provide the data to the Board;  
 21 requiring the Board to adopt certain regulations on or before a certain date;  
 22 ~~providing for the termination of certain provisions of this Act under certain~~  
 23 ~~circumstances;~~ and generally relating to the licensure and regulation of direct-entry  
 24 midwives by the State Board of Nursing.

25 BY repealing and reenacting, without amendments,  
 26 Article – Health – General  
 27 Section 19-301(f)  
 28 Annotated Code of Maryland  
 29 (2009 Replacement Volume and 2014 Supplement)

30 BY repealing and reenacting, with amendments,  
 31 Article – Health Occupations  
 32 Section 8-208 and 8-317(a)  
 33 Annotated Code of Maryland  
 34 (2014 Replacement Volume)

35 BY adding to  
 36 Article – Health Occupations  
 37 Section ~~8-6C-01, 8-6C-02, 8-6C-02.1, 8-6C-02.2, and 8-6C-03~~ through 8-6C-26  
 38 to be under the new subtitle “Subtitle 6C. Direct-Entry Midwives”; and  
 39 8-701(e-1)  
 40 Annotated Code of Maryland  
 41 (2014 Replacement Volume)

42 BY repealing and reenacting, with amendments,  
 43 Article – State Government

1 Section 8-405(b)(3)  
 2 Annotated Code of Maryland  
 3 (2014 Replacement Volume)

4 ~~Preamble~~

5 ~~WHEREAS, A parent has the responsibility and right to give birth where and with~~  
 6 ~~whom the parent chooses; and~~

7 ~~WHEREAS, For personal and economic reasons, some Maryland residents will~~  
 8 ~~choose to have home births; and~~

9 ~~WHEREAS, Reproductive health care decisions are best made by individuals and via~~  
 10 ~~informed consent processes; and~~

11 ~~WHEREAS, It is understood that childbirth is a culmination of pregnancy and is a~~  
 12 ~~natural process rather than an illness; and~~

13 ~~WHEREAS, There is a public interest in preserving the rights of women to deliver~~  
 14 ~~children at home, to remove obstacles to safe out-of-hospital deliveries, and to assure~~  
 15 ~~quality health care during the birthing of a child at home; and~~

16 ~~WHEREAS, The practice of midwifery has been a part of the culture and tradition~~  
 17 ~~of Maryland since the colonial days, and it is in the public interest to remove impediments~~  
 18 ~~to the practice of midwifery; and~~

19 ~~WHEREAS, The services of a direct-entry midwife are a reasonable alternative for~~  
 20 ~~healthy pregnant women; now, therefore,~~

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

23 **Article – Health – General**

24 19-301.

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

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

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

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

31 **Article – Health Occupations**

1 8–208.

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

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

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

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

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

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

11 (2) Of the 6 Committee members:

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

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

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

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

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

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

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

24 (4) The Board may remove a Committee member for incompetence or  
25 misconduct.

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

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

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

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

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

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

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

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

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

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

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

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

20 (4) Consider in the case of each nurse, nursing assistant, medication  
21 technician, electrologist, **LICENSED DIRECT-ENTRY MIDWIFE**, or applicant participating  
22 in a program whether the nurse, nursing assistant, medication technician, electrologist,  
23 **LICENSED DIRECT-ENTRY MIDWIFE**, or applicant may with safety continue or resume  
24 the practice of nursing or delegated nursing functions [or], electrology, **OR LICENSED**  
25 **DIRECT-ENTRY MIDWIFERY**; and

26 (5) Have meetings as necessary to consider the requests of nurses, nursing  
27 assistants, medication technicians, electrologists, **LICENSED DIRECT-ENTRY MIDWIVES**,  
28 or applicants to participate in the program, and consider reports regarding nurses, nursing  
29 assistants, medication technicians, electrologists, **LICENSED DIRECT-ENTRY MIDWIVES**,  
30 or applicants participating in the program.

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

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

1 (2) Set forth in writing for each nurse, nursing assistant, medication  
2 technician, electrologist, LICENSED DIRECT-ENTRY MIDWIFE, or applicant participating  
3 in the program a rehabilitation program established for that nurse, nursing assistant,  
4 medication technician, electrologist, LICENSED DIRECT-ENTRY MIDWIFE, or applicant,  
5 including the requirements for supervision and surveillance.

6 (l) The Committee shall inform each nurse, nursing assistant, medication  
7 technician, electrologist, LICENSED DIRECT-ENTRY MIDWIFE, or applicant who requests  
8 participation in the program of:

9 (1) The procedures followed in the program;

10 (2) The rights and responsibilities of the nurse, nursing assistant,  
11 medication technician, electrologist, LICENSED DIRECT-ENTRY MIDWIFE, or applicant in  
12 the program; and

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

14 (m) (1) Each nurse, nursing assistant, medication technician, electrologist,  
15 LICENSED DIRECT-ENTRY MIDWIFE, or applicant who requests to participate in the  
16 program shall agree to cooperate with the individual rehabilitation program designed by  
17 the Committee.

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

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

26 (4) (i) The program shall transfer to the Board all the records of any  
27 nurse, nursing assistant, medication technician, electrologist, LICENSED DIRECT-ENTRY  
28 MIDWIFE, or applicant expelled from the program.

29 (ii) The Board may initiate disciplinary action based on the failure  
30 of the nurse, nursing assistant, medication technician, electrologist, LICENSED  
31 DIRECT-ENTRY MIDWIFE, or applicant to comply with the conditions of the program in  
32 accordance with the provisions of §§ 8-316 and 8-317 [or], §§ 8-6B-18 and 8-6B-19, **OR**  
33 **8-6C-20** of this title.

34 (n) After the Committee has determined that a nurse, nursing assistant,  
35 medication technician, electrologist, LICENSED DIRECT-ENTRY MIDWIFE, or applicant

1 has been rehabilitated, the Committee shall purge and destroy all records concerning a  
2 nurse's, nursing assistant's, medication technician's, electrologist's, **LICENSED**  
3 **DIRECT-ENTRY MIDWIFE'S**, or applicant's participation in the program.

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

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

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

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

17 (2) A cost analysis of the program.

18 8-317.

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

23 **SUBTITLE 6C. LICENSED DIRECT-ENTRY MIDWIVES.**

24 **8-6C-01.**

25 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS  
26 INDICATED.

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

31 (C) "AIMM" MEANS THE ASSOCIATION OF INDEPENDENT MIDWIVES OF  
32 MARYLAND OR A SUCCESSOR ORGANIZATION THAT IS A PROFESSIONAL  
33 ORGANIZATION REPRESENTING INDEPENDENT MIDWIVES IN THE STATE.



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

2 ~~(E) (1) "CERTIFIED DIRECT-ENTRY MIDWIFE" MEANS AN INDIVIDUAL~~  
3 ~~WHO HAS BEEN GRANTED A LICENSE UNDER THIS SUBTITLE TO PRACTICE~~  
4 ~~DIRECT-ENTRY MIDWIFERY.~~

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

7 ~~(F) (E)~~ "COMMITTEE" MEANS THE DIRECT-ENTRY MIDWIFERY  
8 ADVISORY COMMITTEE ESTABLISHED UNDER ~~§ 8-6C-10~~ § 8-6C-11 OF THIS  
9 SUBTITLE.

10 ~~(G) (F)~~ "HEALTH CARE PRACTITIONER" MEANS:

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

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

14 ~~(3) A PHYSICIAN ASSISTANT LICENSED UNDER TITLE 15 OF THIS~~  
15 ~~ARTICLE.~~

16 ~~(H) (G)~~ (1) "HEALTH CARE PROVIDER" MEANS A HEALTH CARE  
17 PRACTITIONER OR A HOSPITAL.

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

20 ~~(I) (H)~~ "HOSPITAL" HAS THE MEANING STATED IN § 19-301 OF THE  
21 HEALTH - GENERAL ARTICLE.

22 ~~(J) (I)~~ "LICENSE" MEANS, UNLESS THE CONTEXT REQUIRES OTHERWISE, A  
23 LICENSE ISSUED BY THE BOARD TO PRACTICE DIRECT-ENTRY MIDWIFERY.

24 (J) (1) "LICENSED DIRECT-ENTRY MIDWIFE" MEANS AN INDIVIDUAL  
25 WHO HAS BEEN GRANTED A LICENSE UNDER THIS SUBTITLE TO PRACTICE  
26 DIRECT-ENTRY MIDWIFERY.

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

1 (K) "LOW-RISK PREGNANCY" MEANS A PREGNANCY, LABOR, AND DELIVERY  
 2 AND POSTPARTUM, NEWBORN, AND ~~INTERCONCEPTUAL~~ INTERCONCEPTIONAL CARE  
 3 THAT DOES NOT INCLUDE A CONDITION THAT REQUIRES A MANDATORY TRANSFER  
 4 UNDER ~~REGULATIONS ADOPTED BY THE BOARD~~ UNDER § 8-6C-03.

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

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

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

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

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

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

23 ~~(O)~~ (O) "POSTPARTUM PERIOD" MEANS THE FIRST 6 WEEKS AFTER  
 24 DELIVERY.

25 ~~(P)~~ (P) (1) "PRACTICE DIRECT-ENTRY MIDWIFERY" MEANS:

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

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

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

1 8-6C-02.

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

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

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

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

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

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

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

16 (2) DISCUSSING:

17 (I) ANY GENERAL RISK FACTORS ASSOCIATED WITH THE  
18 SERVICES TO BE PROVIDED;

19 (II) ANY SPECIFIC RISK FACTORS PERTAINING TO THE HEALTH  
20 AND CIRCUMSTANCES OF THE INDIVIDUAL PATIENT;

21 (III) CONDITIONS THAT PRECLUDE CARE BY A LICENSED  
22 DIRECT-ENTRY MIDWIFE; AND

23 (IV) THE CONDITIONS UNDER WHICH CONSULTATION,  
24 TRANSFER OF CARE, OR TRANSPORT OF THE PATIENT MUST BE IMPLEMENTED;

25 ~~(2)~~ (3) OBTAINING A HEALTH HISTORY OF THE PATIENT,  
26 ~~INCLUDING~~ AND PERFORMING A PHYSICAL EXAMINATION;

27 ~~(3)~~ (4) DEVELOPING A WRITTEN PLAN OF CARE SPECIFIC TO THE  
28 PATIENT, TO ENSURE CONTINUITY OF CARE THROUGHOUT THE ANTEPARTUM,  
29 INTRAPARTUM, AND POSTPARTUM PERIODS, THAT INCLUDES:

1                   (I) ~~ANY GENERAL RISK FACTORS ASSOCIATED WITH THE~~  
2 ~~SERVICES TO BE PROVIDED;~~

3                   ~~(H)~~ ANY A PLAN FOR THE MANAGEMENT OF ANY SPECIFIC RISK  
4 FACTORS PERTAINING TO THE INDIVIDUAL HEALTH AND CIRCUMSTANCES OF THE  
5 INDIVIDUAL PATIENT; AND

6                   ~~(HH) THE CONDITIONS UNDER WHICH CONSULTATION,~~  
7 ~~TRANSFER OF CARE, OR TRANSPORT OF THE PATIENT MAY BE IMPLEMENTED; AND~~

8                   ~~(IV)~~ (II) A PLAN TO BE FOLLOWED IN THE EVENT OF AN  
9 EMERGENCY, INCLUDING A PLAN FOR TRANSPORTATION;

10               ~~(4)~~ (5) EVALUATING THE RESULTS OF PATIENT CARE;

11               ~~(5)~~ (6) CONSULTING AND COLLABORATING WITH A HEALTH CARE  
12 PRACTITIONER REGARDING THE CARE OF A PATIENT, AND REFERRING AND  
13 TRANSFERRING CARE TO, A HEALTH CARE PROVIDER, AS REQUIRED;

14               ~~(6)~~ (7) REFERRAL OF ALL PATIENTS, ~~PRIOR TO~~ WITHIN 72 HOURS  
15 AFTER DELIVERY, TO A PEDIATRIC HEALTH CARE PROVIDER PRACTITIONER FOR  
16 CARE OF THE NEWBORN;

17               ~~(7)~~ (8) ~~AS RECOMMENDED BY THE COMMITTEE AND~~ APPROVED BY  
18 THE BOARD:

19                   (I) OBTAINING AND ADMINISTERING MEDICATIONS; AND

20                   (II) OBTAINING AND USING EQUIPMENT AND DEVICES;

21               ~~(8)~~ (9) OBTAINING APPROPRIATE SCREENING AND TESTING,  
22 INCLUDING LABORATORY TESTS, URINALYSIS, AND ULTRASOUND;

23               ~~(9)~~ (10) PROVIDING PRENATAL CARE DURING THE ANTEPARTUM  
24 PERIOD, WITH CONSULTATION OR REFERRAL AS REQUIRED;

25               ~~(10)~~ (11) PROVIDING CARE DURING THE INTRAPARTUM PERIOD,  
26 INCLUDING:

27                   (I) MONITORING AND EVALUATING THE CONDITION OF THE  
28 PATIENT AND FETUS;

29                   (II) AT THE ONSET OF ACTIVE LABOR NOTIFYING THE  
30 PEDIATRIC HEALTH CARE PRACTITIONER THAT DELIVERY IS IMMINENT;

~~(II)~~ (III) PERFORMING EMERGENCY PROCEDURES, INCLUDING:

1. ADMINISTERING APPROVED MEDICATIONS;
2. ADMINISTERING INTRAVENOUS FLUIDS FOR STABILIZATION;
3. PERFORMING AN EMERGENCY EPISIOTOMY; AND
4. PROVIDING CARE WHILE ON THE WAY TO A HOSPITAL UNDER CIRCUMSTANCES IN WHICH EMERGENCY MEDICAL SERVICES HAVE NOT BEEN ACTIVATED; AND

~~(III)~~ (IV) ACTIVATING EMERGENCY MEDICAL SERVICES FOR AN EMERGENCY; AND~~(IV)~~ (V) DELIVERING IN AN OUT-OF-HOSPITAL SETTING;~~(V)~~ (12) PARTICIPATING IN PEER REVIEW AS REQUIRED UNDER § 8-6C-18(E)(1)(II) OF THIS SUBTITLE;~~(VI)~~ (13) PROVIDING CARE DURING THE POSTPARTUM PERIOD, INCLUDING:~~(i)~~ ~~WITH THE ADMINISTRATION OF A LOCAL ANESTHETIC;~~~~1. SUTURING OF FIRST AND SECOND DEGREE PERINEAL OR LABIAL LACERATIONS; AND~~~~2. PERFORMING AN EPISIOTOMY; AND~~(I) SUTURING OF FIRST AND SECOND DEGREE PERINEAL OR LABIAL LACERATIONS, OR SUTURING OF AN EPISIOTOMY WITH THE ADMINISTRATION OF A LOCAL ANESTHETIC; AND(II) MAKING FURTHER CONTACT WITH THE PATIENT WITHIN 48 HOURS, WITHIN 2 WEEKS, AND AT 6 WEEKS AFTER THE DELIVERY TO ASSESS FOR HEMORRHAGE, PREECLAMPSIA, THROMBO-EMBOLISM, INFECTION, AND EMOTIONAL WELL-BEING;~~(13)~~ (14) PROVIDING ROUTINE CARE FOR THE NEWBORN FOR UP TO 72 HOURS AFTER DELIVERY, EXCLUSIVE OF ADMINISTERING IMMUNIZATIONS, INCLUDING:

1 (I) IMMEDIATE CARE AT BIRTH, INCLUDING RESUSCITATING AS  
 2 NEEDED, PERFORMING A NEWBORN EXAMINATION, AND ADMINISTERING  
 3 INTRAMUSCULAR VITAMIN K AND EYE OINTMENT FOR PREVENTION OF  
 4 OPTHALMIA NEONATORUM; ~~AND~~

5 ~~(H) 1. SUBJECT TO ITEM 2 OF THIS ITEM, PERFORMING~~  
 6 ~~CRITICAL CONGENITAL HEART DISEASE SCREENING, IN ACCORDANCE WITH~~  
 7 ~~REGULATIONS ADOPTED BY THE BOARD, ON A NEWBORN BETWEEN 24 HOURS AND~~  
 8 ~~48 HOURS AFTER DELIVERY; OR~~

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

12 (II) ASSESSING NEWBORN FEEDING AND HYDRATION;

13 (III) PERFORMING METABOLIC SCREENING AND REPORTING ON  
 14 THE SCREENING IN ACCORDANCE WITH THE REGULATIONS RELATED TO NEWBORN  
 15 SCREENINGS THAT ARE ADOPTED BY THE DEPARTMENT;

16 (IV) PERFORMING CRITICAL CONGENITAL HEART DISEASE  
 17 SCREENING AND REPORTING ON THE SCREENING IN ACCORDANCE WITH THE  
 18 REGULATIONS RELATED TO NEWBORN SCREENINGS THAT ARE ADOPTED BY THE  
 19 DEPARTMENT;

20 (V) IF UNABLE TO PERFORM THE SCREENING REQUIRED UNDER  
 21 ITEM (III) OR (IV) OF THIS ITEM, REFERRING THE NEWBORN TO A PEDIATRIC HEALTH  
 22 CARE PRACTITIONER TO PERFORM THE SCREENING WITHIN 24 TO 48 HOURS AFTER  
 23 DELIVERY; AND

24 (VI) REFERRING THE INFANT TO AN AUDIOLOGIST FOR A  
 25 HEARING SCREENING IN ACCORDANCE WITH THE REGULATIONS RELATED TO  
 26 NEWBORN SCREENINGS THAT ARE ADOPTED BY THE DEPARTMENT;

27 ~~(14)~~ (15) WITHIN 24 HOURS AFTER DELIVERY;

28 ~~(H)~~ NOTIFYING, NOTIFYING A PEDIATRIC HEALTH CARE  
 29 PROVIDER PRACTITIONER OF THE DELIVERY;

30 (16) WITHIN 72 HOURS AFTER DELIVERY;

31 ~~(H)~~ (I) TRANSFERRING HEALTH RECORDS TO THE  
 32 PEDIATRIC HEALTH CARE PROVIDER PRACTITIONER, INCLUDING DOCUMENTATION

1 OF THE PERFORMANCE OF THE SCREENINGS REQUIRED UNDER ITEM (14)(III) AND  
 2 (IV) OF THIS SUBSECTION; AND

3 ~~(III) (II) RECOMMENDING TO THE PATIENT THAT REFERRING~~  
 4 ~~THE NEWBORN BE SEEN BY TO A PEDIATRIC HEALTH CARE PROVIDER~~  
 5 ~~PRACTITIONER WITHIN 24 HOURS AFTER DELIVERY;~~

6 ~~(15) (17)~~ PROVIDING THE FOLLOWING CARE OF THE NEWBORN  
 7 ~~AFTER~~ BEYOND THE FIRST 72 HOURS AFTER DELIVERY:

8 (I) WEIGHT CHECKS AND GENERAL OBSERVATION OF THE  
 9 NEWBORN'S ACTIVITY, WITH ABNORMAL FINDINGS COMMUNICATED TO THE  
 10 NEWBORN'S PEDIATRIC HEALTH CARE PROVIDER PRACTITIONER;

11 ~~(II) REFERRAL FOR METABOLIC SCREENING, CRITICAL~~  
 12 ~~CONGENITAL HEART DISEASE SCREENING, AND HEARING SCREENING; AND~~  
 13 ASSESSMENT OF NEWBORN FEEDING AND HYDRATION; AND

14 (III) BREASTFEEDING SUPPORT AND COUNSELING; AND

15 ~~(16) (18)~~ PROVIDING LIMITED SERVICES TO THE PATIENT AFTER THE  
 16 POSTPARTUM PERIOD, INCLUDING:

17 (I) BREASTFEEDING SUPPORT AND COUNSELING; AND

18 (II) COUNSELING AND REFERRAL ~~AS NECESSARY~~ FOR ALL  
 19 FAMILY PLANNING METHODS, INCLUDING:

20 ~~1. STERILIZATION; AND~~

21 ~~2. LONG-ACTING REVERSIBLE CONTRACEPTIVES.~~

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

23 (1) PHARMACOLOGICAL INDUCTION OR AUGMENTATION OF LABOR  
 24 OR ARTIFICIAL RUPTURE OF MEMBRANES PRIOR TO THE ONSET OF LABOR;

25 (2) SURGICAL DELIVERY OR ANY SURGERY EXCEPT AN EMERGENCY  
 26 EPISIOTOMY;

27 (3) USE OF FORCEPS OR VACUUM EXTRACTOR;

28 (4) EXCEPT FOR THE ADMINISTRATION OF A LOCAL ANESTHETIC,  
 29 ADMINISTRATION OF AN ANESTHETIC;

1 (5) ADMINISTRATION OF ANY KIND OF NARCOTIC ANALGESIC; OR

2 (6) ADMINISTRATION OF ANY PRESCRIPTION MEDICATION IN A  
3 MANNER THAT VIOLATES THIS SUBTITLE.

4 8-6C-03.

5 A LICENSED DIRECT-ENTRY MIDWIFE MAY NOT ASSUME OR CONTINUE TO  
6 TAKE RESPONSIBILITY FOR A PATIENT'S PREGNANCY AND BIRTH CARE AND SHALL  
7 ARRANGE FOR THE ORDERLY TRANSFER OF CARE TO A HEALTH CARE  
8 PRACTITIONER FOR A PATIENT WHO IS ALREADY UNDER THE CARE OF THE  
9 LICENSED DIRECT-ENTRY MIDWIFE, IF A HISTORY OF ANY OF THE FOLLOWING  
10 DISORDERS OR SITUATIONS IS FOUND TO BE PRESENT AT THE INITIAL INTERVIEW  
11 OR IF ANY OF THE FOLLOWING DISORDERS OR SITUATIONS BECOME APPARENT  
12 THROUGH A PATIENT HISTORY, AN EXAMINATION, OR IN A LABORATORY REPORT AS  
13 PRENATAL CARE PROCEEDS:

14 (1) DIABETES MELLITUS, INCLUDING UNCONTROLLED GESTATIONAL  
15 DIABETES;

16 (2) HYPERTHYROIDISM TREATED WITH MEDICATION;

17 (3) UNCONTROLLED HYPOTHYROIDISM;

18 (4) EPILEPSY WITH SEIZURES OR ANTIEPILEPTIC DRUG USE DURING  
19 THE PREVIOUS 12 MONTHS;

20 (5) COAGULATION DISORDERS;

21 (6) CHRONIC PULMONARY DISEASE;

22 (7) HEART DISEASE IN WHICH THERE ARE ARRHYTHMIAS OR  
23 MURMURS EXCEPT WHEN, AFTER EVALUATION, IT IS THE OPINION OF A PHYSICIAN  
24 LICENSED UNDER TITLE 14 OF THIS ARTICLE OR A LICENSED NURSE CERTIFIED AS  
25 A NURSE-MIDWIFE OR A NURSE PRACTITIONER UNDER THIS TITLE THAT MIDWIFERY  
26 CARE MAY PROCEED;

27 (8) HYPERTENSION, INCLUDING PREGNANCY-INDUCED  
28 HYPERTENSION (PIH);

29 (9) RENAL DISEASE;



1           **(10) EXCEPT AS OTHERWISE PROVIDED IN § 8-6C-04(A)(11) OF THIS**  
2 **SUBTITLE, RH SENSITIZATION WITH POSITIVE ANTIBODY TITER;**

3           **(11) PREVIOUS UTERINE SURGERY, INCLUDING A CESAREAN SECTION**  
4 **OR MYOMECTOMY;**

5           **(12) INDICATIONS THAT THE FETUS HAS DIED IN UTERO;**

6           **(13) PREMATURE LABOR (GESTATION LESS THAN 37 WEEKS);**

7           **(14) MULTIPLE GESTATION;**

8           **(15) NONCEPHALIC PRESENTATION AT OR AFTER 38 WEEKS;**

9           **(16) PLACENTA PREVIA OR ABRUPTION;**

10          **(17) PREECLAMPSIA;**

11          **(18) SEVERE ANEMIA, DEFINED AS HEMOGLOBIN LESS THAN 10 G/DL;**

12          **(19) UNCOMMON DISEASES AND DISORDERS, INCLUDING ADDISON'S**  
13 **DISEASE, CUSHING'S DISEASE, SYSTEMIC LUPUS ERYTHEMATOSUS,**  
14 **ANTIPHOSPHOLIPID SYNDROME, SCLERODERMA, RHEUMATOID ARTHRITIS,**  
15 **PERIARTERITIS NODOSA, MARFAN'S SYNDROME, AND OTHER SYSTEMIC AND RARE**  
16 **DISEASES AND DISORDERS;**

17          **(20) AIDS/HIV;**

18          **(21) HEPATITIS A THROUGH G AND NON-A THROUGH G;**

19          **(22) ACUTE TOXOPLASMOSIS INFECTION, IF THE PATIENT IS**  
20 **SYMPTOMATIC;**

21          **(23) ACUTE RUBELLA INFECTION DURING PREGNANCY;**

22          **(24) ACUTE CYTOMEGALOVIRUS INFECTION, IF THE PATIENT IS**  
23 **SYMPTOMATIC;**

24          **(25) ACUTE PARVOVIRUS INFECTION, IF THE PATIENT IS**  
25 **SYMPTOMATIC;**

26          **(26) ALCOHOL ABUSE, SUBSTANCE ABUSE, OR PRESCRIPTION ABUSE**  
27 **DURING PREGNANCY;**

1           **(27) CONTINUED DAILY TOBACCO USE INTO THE SECOND TRIMESTER;**

2           **(28) THROMBOSIS;**

3           **(29) INFLAMMATORY BOWEL DISEASE THAT IS NOT IN REMISSION;**

4           **(30) HERPES SIMPLEX VIRUS, PRIMARY GENITAL INFECTION DURING**  
5 **PREGNANCY, OR ACTIVE GENITAL LESIONS AT THE TIME OF DELIVERY;**

6           **(31) SIGNIFICANT FETAL CONGENITAL ANOMALY;**

7           **(32) ECTOPIC PREGNANCY;**

8           **(33) PREPREGNANCY BODY MASS INDEX (BMI) OF LESS THAN 18.5 OR**  
9 **35 OR MORE; OR**

10           **(34) POST TERM MATURITY (GESTATIONAL AGE 42 0/7 WEEKS AND**  
11 **BEYOND).**

12 **8-6C-04.**

13           **(A) A LICENSED DIRECT-ENTRY MIDWIFE SHALL CONSULT WITH A HEALTH**  
14 **CARE PRACTITIONER, AND DOCUMENT THE CONSULTATION, THE**  
15 **RECOMMENDATIONS OF THE CONSULTATION, AND THE DISCUSSION OF THE**  
16 **CONSULTATION WITH THE CLIENT, IF ANY OF THE FOLLOWING CONDITIONS ARE**  
17 **PRESENT DURING PRENATAL CARE:**

18           **(1) SIGNIFICANT MENTAL DISEASE, INCLUDING DEPRESSION,**  
19 **BIPOLAR DISORDER, SCHIZOPHRENIA, AND OTHER CONDITIONS THAT IMPAIR THE**  
20 **ABILITY OF THE PATIENT TO PARTICIPATE EFFECTIVELY IN THE PATIENT'S CARE OR**  
21 **THAT REQUIRE THE USE OF PSYCHOTROPIC DRUGS TO CONTROL THE CONDITION;**

22           **(2) SECOND OR THIRD TRIMESTER BLEEDING;**

23           **(3) INTERMITTENT USE OF ALCOHOL INTO THE SECOND TRIMESTER;**

24           **(4) ASTHMA;**

25           **(5) DIET-CONTROLLED GESTATIONAL DIABETES;**

26           **(6) HISTORY OF GENETIC PROBLEMS, INTRAUTERINE DEATH AFTER**  
27 **20 WEEKS' GESTATION, OR STILLBIRTH;**

28           **(7) ABNORMAL PAP SMEAR;**

1           **(8) POSSIBLE ECTOPIC PREGNANCY;**

2           **(9) TUBERCULOSIS;**

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

6           **(11) RH SENSITIZATION WITH POSITIVE ANTIBODY TITER;**

7           **(12) BREECH PRESENTATION BETWEEN 35 AND 38 WEEKS;**

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

10           **(14) PREMATURE RUPTURE OF MEMBRANES AT 37 WEEKS OR LESS;**

11           **(15) SMALL FOR GESTATIONAL AGE OR LARGE FOR GESTATIONAL AGE**  
12 **FETUS;**

13           **(16) POLYHYDRAMNIOS OR OLIGOHYDRAMNIOS;**

14           **(17) PREVIOUS LEEP PROCEDURE OR CONE BIOPSY;**

15           **(18) PREVIOUS OBSTETRICAL PROBLEMS, INCLUDING UTERINE**  
16 **ABNORMALITIES, PLACENTAL ABRUPTION, PLACENTA ACCRETA, OBSTETRIC**  
17 **HEMORRHAGE, INCOMPETENT CERVIX, OR PRETERM DELIVERY FOR ANY REASON;**

18           **(19) POSTTERM MATURITY (41 0/7 TO 6/7 WEEKS GESTATIONAL AGE);**

19           **(20) INFLAMMATORY BOWEL DISEASE, IN REMISSION; OR**

20           **(21) HERPES SIMPLEX VIRUS, PRIMARY INFECTION OR ACTIVE**  
21 **INFECTION AT TIME OF DELIVERY.**

22           **(B) SUBJECT TO SUBSECTION (C) OF THIS SECTION, A LICENSED**  
23 **DIRECT-ENTRY MIDWIFE SHALL ARRANGE IMMEDIATE EMERGENCY TRANSFER TO A**  
24 **HOSPITAL IF:**

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

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

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

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

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

9           **(IV) PROLAPSED CORD;**

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

11          **(VI) RETAINED PLACENTA;**

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

13          **(VIII) PATIENT WITH A THIRD OR FOURTH DEGREE LACERATION**  
14 **OR A LACERATION BEYOND THE LICENSED DIRECT-ENTRY MIDWIFE'S ABILITY TO**  
15 **REPAIR;**

16          **(IX) APGAR OF LESS THAN SEVEN AT 5 MINUTES;**

17          **(X) OBVIOUS CONGENITAL ANOMALIES;**

18          **(XI) NEED FOR CHEST COMPRESSIONS DURING NEONATAL**  
19 **RESUSCITATION;**

20          **(XII) NEWBORN WITH PERSISTENT CENTRAL CYANOSIS;**

21          **(XIII) NEWBORN WITH PERSISTENT GRUNTING AND**  
22 **RETRACTIONS;**

23          **(XIV) NEWBORN WITH ABNORMAL VITAL SIGNS;**

24          **(XV) GROSS OR THICK MECONIUM STAINING, WHEN**  
25 **DISCOVERED; OR**

26          **(XVI) NEWBORN WITH EXCESSIVE DEHYDRATION DUE TO**  
27 **INABILITY TO FEED.**

1        **(C) IF TRANSFER IS NOT POSSIBLE BECAUSE OF IMMINENT DELIVERY, THE**  
2 **LICENSED DIRECT-ENTRY MIDWIFE SHALL CONSULT WITH A HEALTH CARE**  
3 **PROVIDER FOR GUIDANCE ON FURTHER MANAGEMENT OF THE PATIENT AND TO**  
4 **DETERMINE WHEN TRANSFER MAY BE SAFELY ARRANGED, IF REQUIRED.**

5        **(D) (1) A LICENSED DIRECT-ENTRY MIDWIFE SHALL IMMEDIATELY**  
6 **TRANSFER THE CARE OF A PATIENT TO A HEALTH CARE PROVIDER FOR THE**  
7 **TREATMENT OF ANY SIGNIFICANT POSTPARTUM MORBIDITY, INCLUDING:**

8                    **(I) UNCONTROLLED POSTPARTUM HEMORRHAGE;**

9                    **(II) PREECLAMPSIA;**

10                   **(III) THROMBO-EMBOLISM;**

11                   **(IV) AN INFECTION; OR**

12                   **(V) A POSTPARTUM MENTAL HEALTH DISORDER.**

13        **(2) A LICENSED DIRECT-ENTRY MIDWIFE WHO IS REQUIRED TO**  
14 **TRANSFER CARE OF A PATIENT UNDER PARAGRAPH (1) OF THIS SUBSECTION MAY**  
15 **CONTINUE OTHER ASPECTS OF POSTPARTUM CARE IN CONSULTATION WITH THE**  
16 **TREATING HEALTH CARE PRACTITIONER.**

17 ~~8-6C-03.~~ **8-6C-05.**

18        **AT THE TIME OF DELIVERY, A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE**  
19 **SHALL BE ASSISTED BY A SECOND INDIVIDUAL WHO:**

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

23                   **(2) HAS THE SKILLS AND EQUIPMENT NECESSARY TO PERFORM A**  
24 **FULL RESUSCITATION OF THE NEWBORN IN ACCORDANCE WITH THE PRINCIPLES OF**  
25 **NRP.**

26 ~~8-6C-04.~~ **8-6C-06.**

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

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

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

2 (2) AN INDIVIDUAL WHO IS LICENSED AS A HEALTH CARE  
3 PRACTITIONER ~~AND WHOSE SCOPE OF PRACTICE AUTHORIZES THE~~ ALLOWS THE  
4 INDIVIDUAL TO PRACTICE OF DIRECT-ENTRY MIDWIFERY; OR

5 (3) A STUDENT WHO IS PRACTICING DIRECT-ENTRY MIDWIFERY  
6 WHILE ENGAGED IN AN APPROVED CLINICAL MIDWIFE EDUCATIONAL EXPERIENCE  
7 UNDER THE SUPERVISION OF A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE.

8 ~~8-6C-05. 8-6C-07.~~

9 (A) IF A PATIENT CHOOSES TO GIVE BIRTH AT HOME IN A SITUATION  
10 PROHIBITED BY THIS SUBTITLE OR IN WHICH A ~~CERTIFIED~~ LICENSED  
11 DIRECT-ENTRY MIDWIFE RECOMMENDS TRANSFER, THE ~~CERTIFIED~~ LICENSED  
12 DIRECT-ENTRY MIDWIFE SHALL:

13 (1) TRANSFER CARE OF THE PATIENT AND THE PATIENT'S FAMILY TO  
14 AN ALTERNATIVE A HEALTH CARE PROVIDER PRACTITIONER; AND

15 (2) COMPLETE THE STANDARD FORM DEVELOPED UNDER §  
16 8-6C-08(E) OF THIS SUBTITLE AND SUBMIT THE COMPLETED FORM TO THE  
17 ACCEPTING HEALTH CARE PRACTITIONER; AND

18 ~~(2)~~ (3) CEASE TO TAKE RESPONSIBILITY FOR THE PATIENT'S  
19 PREGNANCY CARE WITHIN 1 WEEK AFTER PROVIDING THE REFERRAL AFTER THE  
20 TRANSFER.

21 (B) IF BIRTH IS IMMINENT AND THE PATIENT REFUSES TO BE TRANSFERRED  
22 AFTER THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE DETERMINES THAT A  
23 TRANSFER IS NECESSARY, THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE  
24 SHALL ~~CALL~~:

25 (1) CALL 9-1-1 AND REMAIN WITH THE PATIENT UNTIL EMERGENCY  
26 SERVICES PERSONNEL ARRIVE; AND

27 (2) TRANSFER CARE AND GIVE A VERBAL REPORT OF THE CARE  
28 PROVIDED TO THE EMERGENCY MEDICAL SERVICES PROVIDERS.

29 ~~8-6C-06. 8-6C-08.~~

30 (A) A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE SHALL DEVELOP A  
31 GENERAL WRITTEN PLAN FOR THEIR PRACTICE FOR:

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

2 (2) TRANSPORT OF A NEWBORN TO A NEWBORN NURSERY OR  
3 NEONATAL INTENSIVE CARE NURSERY; AND

4 (3) TRANSPORT OF A PATIENT TO AN APPROPRIATE HOSPITAL WITH  
5 A LABOR AND DELIVERY UNIT.

6 (B) THE COMMITTEE SHALL REVIEW AND ~~APPROVE~~ RECOMMEND  
7 APPROVAL TO THE BOARD OF THE PLAN REQUIRED UNDER SUBSECTION (A) OF THIS  
8 SECTION.

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

11 (D) (1) IN ADDITION TO THE GENERAL WRITTEN PLAN REQUIRED UNDER  
12 SUBSECTION (A) OF THIS SECTION, A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE  
13 SHALL PREPARE A PLAN THAT IS SPECIFIC TO EACH PATIENT AND SHARE THE PLAN  
14 WITH THE PATIENT.

15 (2) THE PLAN REQUIRED UNDER PARAGRAPH (1) OF THIS  
16 SUBSECTION SHALL:

17 (i) INCLUDE PROCEDURES AND PROCESSES TO BE  
18 UNDERTAKEN IN THE EVENT OF AN EMERGENCY FOR THE MOTHER, THE NEWBORN,  
19 OR BOTH;

20 (ii) IDENTIFY THE HOSPITAL CLOSEST TO THE ADDRESS OF THE  
21 PLANNED HOME BIRTH THAT HAS A LABOR AND DELIVERY UNIT;

22 (iii) INCLUDE A CARE PLAN FOR THE NEWBORN; AND

23 (iv) IDENTIFY THE PEDIATRIC HEALTH CARE PRACTITIONER  
24 WHO WILL BE NOTIFIED AFTER DELIVERY IN ACCORDANCE WITH § 8-6C-02(B)(15)  
25 OF THIS SUBTITLE TO RECEIVE THE TRANSFER OF CARE OF THE NEWBORN.

26 (E) (1) THE BOARD, IN CONSULTATION WITH STAKEHOLDERS, SHALL  
27 DEVELOP A ~~SINGLE-UNIFORM~~ STANDARD FORM FOR USE IN ALL CASES IN WHICH A  
28 TRANSFER OCCURS DURING PRENATAL CARE, LABOR, OR POSTPARTUM.

29 (2) THE FORM SHALL INCLUDE THE MEDICAL INFORMATION NEEDED  
30 BY THE ~~HOSPITAL-BASED~~ HEALTH CARE PROVIDER PRACTITIONER RECEIVING THE  
31 PATIENT.

1 (F) (1) ~~UNLESS EMERGENCY SERVICES PERSONNEL IS BEING USED FOR~~  
 2 ~~THE TRANSPORT, AFTER~~ AFTER A DECISION TO TRANSPORT A PATIENT HAS BEEN  
 3 MADE, THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE SHALL ~~CALL~~:

4 (I) CALL THE RECEIVING ~~HOSPITAL-BASED~~ HEALTH CARE  
 5 PROVIDER ~~AND INFORM~~;

6 (II) INFORM THE HEALTH CARE PROVIDER OF THE INCOMING  
 7 PATIENT; AND

8 (III) ACCOMPANY THE PATIENT TO THE HOSPITAL.

9 (2) ON ARRIVAL AT THE HOSPITAL, THE ~~CERTIFIED~~ LICENSED  
 10 DIRECT-ENTRY MIDWIFE SHALL PROVIDE ~~TO~~:

11 (I) TO THE STAFF OF THE HOSPITAL:

12 ~~(#)~~ 1. THE STANDARD FORM DEVELOPED UNDER  
 13 SUBSECTION (E) OF THIS SECTION; AND

14 ~~(#)~~ 2. THE COMPLETE MEDICAL RECORDS OF THE PATIENT;  
 15 AND

16 (II) TO THE ACCEPTING HEALTH CARE TEAM, A VERBAL  
 17 SUMMARY OF THE CARE PROVIDED TO THE PATIENT BY THE LICENSED  
 18 DIRECT-ENTRY MIDWIFE.

19 ~~§ 6C-07, § 6C-09.~~

20 (A) BEFORE INITIATING CARE, A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY  
 21 MIDWIFE SHALL OBTAIN A SIGNED COPY OF THE STANDARDIZED INFORMED  
 22 CONSENT AGREEMENT DEVELOPED ~~BY THE COMMITTEE UNDER § 6C-11(A)(3) OF~~  
 23 ~~THIS SUBTITLE~~ IN ACCORDANCE WITH THIS SECTION.

24 (B) ~~AN ADDITIONAL~~ (1) THE BOARD, IN CONSULTATION WITH  
 25 STAKEHOLDERS, SHALL DEVELOP AN INFORMED CONSENT AGREEMENT.

26 (2) THE AGREEMENT DEVELOPED UNDER PARAGRAPH (1) OF THIS  
 27 SUBSECTION SHALL INCLUDE ACKNOWLEDGMENT BY THE PATIENT OF RECEIPT, AT  
 28 A MINIMUM, OF THE FOLLOWING:

29 ~~(#)~~ (I) THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE'S  
 30 TRAINING AND EXPERIENCE;



1           ~~(2)~~ (II) INSTRUCTIONS FOR OBTAINING A COPY OF THE  
2 REGULATIONS ADOPTED BY THE BOARD UNDER THIS SUBTITLE;

3           ~~(3)~~ (III) INSTRUCTIONS FOR OBTAINING A COPY OF THE NARM  
4 CERTIFICATION REQUIREMENTS;

5           ~~(4)~~ (IV) INSTRUCTIONS FOR FILING A COMPLAINT WITH THE  
6 BOARD;

7           ~~(5)~~ (V) NOTICE OF WHETHER THE ~~CERTIFIED~~ LICENSED  
8 DIRECT-ENTRY MIDWIFE HAS PROFESSIONAL LIABILITY INSURANCE COVERAGE;

9           ~~(6)~~ (VI) A DESCRIPTION OF THE PROCEDURES, BENEFITS, AND  
10 RISKS OF HOME BIRTHS, INCLUDING THOSE CONDITIONS THAT MAY ARISE DURING  
11 DELIVERY; AND

12           ~~(7)~~ (VII) ANY OTHER INFORMATION THAT THE BOARD REQUIRES.

13 ~~§ 6C-08.~~

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

16           ~~(1) THE PATIENT HAD A LOW TRANSVERSE INCISION;~~

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

19           ~~(3) THE CERTIFIED DIRECT-ENTRY MIDWIFE HAS RECOMMENDED~~  
20 ~~THAT THE PATIENT CONSULT WITH A HEALTH CARE PRACTITIONER TO REVIEW THE~~  
21 ~~PATIENT'S OPERATIVE REPORT AND DISCUSS THE PATIENT'S INDIVIDUAL LEVEL OF~~  
22 ~~RISK; AND~~

23           ~~(4) THE CERTIFIED DIRECT-ENTRY MIDWIFE HAS OBTAINED~~  
24 ~~WRITTEN INFORMED CONSENT, IN ADDITION TO THE DOCUMENTS REQUIRED UNDER~~  
25 ~~§ 6C-07 OF THIS SUBTITLE, THAT SPECIFIES THE RISKS OF A VAGINAL BIRTH~~  
26 ~~AFTER CESAREAN SECTION WHEN PERFORMED IN AN OUT-OF-HOSPITAL SETTING.~~

27 ~~§ 6C-09. § 6C-10.~~

28           ~~(A) A CERTIFIED LICENSED DIRECT-ENTRY MIDWIFE SHALL:~~

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

3 ~~(2) SUBMIT A COPY OF INDIVIDUAL MANA STATS ANNUALLY TO THE~~  
4 ~~COMMITTEE; AND~~

5 ~~(3) NOTIFY THE COMMITTEE ANNUALLY OF THE NUMBER OF~~  
6 ~~PATIENTS WHO DECLINE CONSENT TO PARTICIPATE IN THE MANA STATS DATA~~  
7 ~~COLLECTION SYSTEM ON A FORM PRESCRIBED BY THE COMMITTEE.~~

8 (A) BEGINNING OCTOBER 1, 2016, AND ON EACH OCTOBER 1 THEREAFTER,  
9 A LICENSED DIRECT-ENTRY MIDWIFE SHALL REPORT TO THE COMMITTEE, IN A  
10 FORM SPECIFIED BY THE BOARD, THE FOLLOWING INFORMATION REGARDING  
11 CASES IN WHICH THE LICENSED DIRECT-ENTRY MIDWIFE ASSISTED DURING THE  
12 PREVIOUS FISCAL YEAR WHEN THE INTENDED PLACE OF BIRTH AT THE ONSET OF  
13 CARE WAS AN OUT-OF-HOSPITAL SETTING:

14 (1) THE TOTAL NUMBER OF PATIENTS SERVED AS PRIMARY  
15 CAREGIVER AT THE ONSET OF CARE;

16 (2) THE NUMBER, BY COUNTY, OF LIVE BIRTHS ATTENDED AS  
17 PRIMARY CAREGIVER;

18 (3) THE NUMBER, BY COUNTY, OF CASES OF FETAL DEMISE, INFANT  
19 DEATHS, AND MATERNAL DEATHS ATTENDED AS PRIMARY CAREGIVER AT THE  
20 DISCOVERY OF THE DEMISE OR DEATH;

21 (4) THE NUMBER OF WOMEN WHOSE PRIMARY CARE WAS  
22 TRANSFERRED TO ANOTHER HEALTH CARE PRACTITIONER DURING THE  
23 ANTEPARTUM PERIOD AND THE REASON FOR TRANSFER;

24 (5) THE NUMBER, REASON FOR, AND OUTCOME OF EACH  
25 NONEMERGENCY HOSPITAL TRANSFER DURING THE INTRAPARTUM OR  
26 POSTPARTUM PERIOD;

27 (6) THE NUMBER, REASON FOR, AND OUTCOME OF EACH URGENT OR  
28 EMERGENCY TRANSPORT OF AN EXPECTANT MOTHER IN THE ANTEPARTUM PERIOD;

29 (7) THE NUMBER, REASON FOR, AND OUTCOME OF EACH URGENT OR  
30 EMERGENCY TRANSPORT OF AN INFANT OR MOTHER DURING THE INTRAPARTUM OR  
31 IMMEDIATE POSTPARTUM PERIOD;

1           (8) THE NUMBER OF PLANNED OUT-OF-HOSPITAL BIRTHS AT THE  
2 ONSET OF LABOR AND THE NUMBER OF BIRTHS COMPLETED IN AN  
3 OUT-OF-HOSPITAL SETTING;

4           (9) A BRIEF DESCRIPTION OF ANY COMPLICATIONS RESULTING IN  
5 THE MORBIDITY OR MORTALITY OF A MOTHER OR A NEONATE; AND

6           (10) ANY OTHER INFORMATION REQUIRED BY THE BOARD IN  
7 REGULATIONS.

8           (B) THE BOARD SHALL SEND A WRITTEN NOTICE OF NONCOMPLIANCE TO  
9 EACH LICENSEE WHO FAILS TO MEET THE REPORTING REQUIREMENTS UNDER  
10 SUBSECTION (A) THIS SECTION.

11           (C) A LICENSED DIRECT-ENTRY MIDWIFE WHO FAILS TO COMPLY WITH THE  
12 REPORTING REQUIREMENTS UNDER THIS SECTION SHALL BE PROHIBITED FROM  
13 LICENSE RENEWAL UNTIL THE INFORMATION REQUIRED UNDER SUBSECTION (A)  
14 THIS SECTION IS REPORTED.

15           (D) THE COMMITTEE SHALL MAINTAIN THE CONFIDENTIALITY OF ANY  
16 REPORT SUBMITTED UNDER SUBSECTION (A) THIS SECTION.

17           ~~(B)~~ (E) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, A CERTIFIED  
18 LICENSED DIRECT-ENTRY MIDWIFE SHALL BE SUBJECT TO THE SAME REPORTING  
19 REQUIREMENTS AS OTHER HEALTH CARE PROVIDERS PRACTITIONERS WHO  
20 PROVIDE CARE TO INDIVIDUALS IN ACCORDANCE WITH THIS TITLE.

21           (G) A LICENSED DIRECT-ENTRY MIDWIFE ATTENDING AN  
22 OUT-OF-HOSPITAL DELIVERY SHALL:

23           (1) FOR ANY LIVE BIRTH, COMPLETE AND SUBMIT A BIRTH  
24 CERTIFICATE IN ACCORDANCE WITH § 4-208 OF THE HEALTH - GENERAL ARTICLE;  
25 AND

26           (2) FOR ANY DEATH, MAKE ALL MEDICAL RECORDS AVAILABLE AND  
27 COMMUNICATE RELEVANT CIRCUMSTANCES OF THE DEATH TO THE INDIVIDUAL  
28 RESPONSIBLE FOR COMPLETING THE CERTIFICATE OF DEATH UNDER § 4-212 OR §  
29 4-213 OF THE HEALTH - GENERAL ARTICLE.

30 ~~§ 6C-10. § 6C-11.~~

31           (A) THERE IS A DIRECT-ENTRY MIDWIFERY ADVISORY COMMITTEE  
32 WITHIN THE BOARD.

1 (B) (1) THE COMMITTEE CONSISTS OF SEVEN MEMBERS APPOINTED BY  
2 THE BOARD.

3 (2) OF THE SEVEN MEMBERS:

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

7 (II) ~~SUBJECT TO PARAGRAPH (3) OF THIS SUBSECTION, TWO~~  
8 TWO SHALL BE LICENSED NURSES CERTIFIED AS NURSE-MIDWIVES ~~WHO:~~

9 ~~1. CURRENTLY PRACTICE IN AN OUT-OF-HOSPITAL~~  
10 ~~SETTING, INCLUDING A FREESTANDING BIRTH CENTER OR HOME BIRTH PRACTICE;~~  
11 ~~OR~~

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

15 (III) ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND  
16 HOSPITAL ASSOCIATION; AND

17 (IV) ONE SHALL BE A CONSUMER MEMBER.

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

23 ~~(4)~~ (3) (I) THE BOARD SHALL APPOINT THE ~~CERTIFIED~~  
24 LICENSED DIRECT-ENTRY MIDWIFE MEMBERS OF THE COMMITTEE FROM A LIST OF  
25 QUALIFIED INDIVIDUALS SUBMITTED TO THE BOARD BY AIMM.

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

29 (C) EACH MEMBER OF THE COMMITTEE SHALL BE A CITIZEN OF THE  
30 UNITED STATES AND A RESIDENT OF THE STATE.

31 (D) ~~(1)~~ EACH ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE MEMBER OF  
32 THE COMMITTEE ~~APPOINTED ON OR BEFORE SEPTEMBER 30, 2021:~~

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

4 ~~(H) (1)~~ SHALL MEET THE LICENSURE REQUIREMENTS OF THIS  
 5 SUBTITLE; AND

6 ~~(H) (2)~~ MAY NOT BE A LICENSED NURSE WHO IS CERTIFIED AS A  
 7 NURSE-MIDWIFE.

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

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

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

14 (E) THE CONSUMER MEMBER OF THE COMMITTEE:

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

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

17 (I) A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE;

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

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

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

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

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

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

5                   **(4) MAY NOT:**

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

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

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

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

17                   **(G) (1) THE TERM OF A MEMBER IS ~~3~~ 4 YEARS.**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

17 ~~§ 6C-11, § 6C-12.~~

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

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

23 (2) MAINTAIN A LIST OF ALL ~~CERTIFIED~~ LICENSED DIRECT-ENTRY  
24 MIDWIVES;

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

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

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

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

6           **(7) COLLECT ~~MANA STATS ANNUAL SUMMARY~~ THE REPORTS ~~FROM~~**  
 7 **REQUIRED TO BE SUBMITTED BY EACH ~~CERTIFIED~~ LICENSED DIRECT-ENTRY**  
 8 **MIDWIFE UNDER § 8-6C-10(A) OF THIS SUBTITLE;**

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

13           **~~(I) DEFINE SPECIFIC CONDITIONS REQUIRING TRANSFER OF~~**  
 14 **~~CARE OR CONSULTATION, INCLUDING:~~**

15                   **~~1. PREEXISTING CONDITIONS;~~**

16                   **~~2. PREGNANCY COMPLICATIONS;~~**

17                   **~~3. PREGNANCY-RELATED COMPLICATIONS;~~**

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

20                   **~~5. CONDITIONS ARISING DURING THE POSTPARTUM~~**  
 21 **~~PERIOD;~~**

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

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

28                   **~~2. KNOWN MULTIPLE GESTATION;~~**

29           **~~(III) INCLUDE SPECIFIC CONDITIONS FOR WHICH THE~~**  
 30 **~~CERTIFIED LICENSED DIRECT-ENTRY MIDWIFE SHALL:~~**



1                   1. ~~CONSULT WITH A HEALTH CARE PROVIDER~~  
2 ~~PRACTITIONER; AND~~

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

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

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

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

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

17                   (11) ~~SUBMIT AN ANNUAL~~ SUBJECT TO SUBSECTION (B) OF THIS  
18 SECTION, BEGINNING NOVEMBER 1, 2016, AND ON EACH NOVEMBER 1  
19 THEREAFTER, SUBMIT A REPORT TO THE BOARD, INCLUDING:

20                   (I) ~~THE NUMBER OF CERTIFIED DIRECT ENTRY MIDWIVES~~  
21 ~~LICENSED IN THE STATE;~~

22                   (II) ~~THE TOTAL NUMBER OF PLANNED HOME BIRTHS IN THE~~  
23 ~~STATE; AND~~

24                   (III) ~~THE NUMBER AND CIRCUMSTANCES OF ALL:~~

25                   1. ~~HEALTHY BIRTH OUTCOMES ATTENDED BY~~  
26 ~~CERTIFIED DIRECT-ENTRY MIDWIVES;~~

27                   2. ~~ADVERSE BIRTH OUTCOMES ATTENDED BY~~  
28 ~~CERTIFIED DIRECT-ENTRY MIDWIVES; AND~~

29                   3. ~~BIRTHS IN WHICH A TRANSFER OR TRANSPORT WAS~~  
30 ~~MADE TO A HOSPITAL OR TO THE CARE OF ANOTHER HEALTH CARE PROVIDER.~~

1                    (I) A SUMMARY OF THE INFORMATION INCLUDED IN REPORTS  
2 SUBMITTED TO THE COMMITTEE BY LICENSED DIRECT-ENTRY MIDWIVES UNDER §  
3 8-6C-10(A) OF THIS SUBTITLE; AND

4                    (II) ANY OTHER INFORMATION IDENTIFIED BY THE BOARD.

5                    (B) THE COMMITTEE MAY NOT INCLUDE ANY PERSONALLY IDENTIFYING  
6 INFORMATION IN THE REPORT SUBMITTED TO THE BOARD UNDER SUBSECTION  
7 (A)(11) OF THIS SECTION.

8                    (C) BEGINNING DECEMBER 1, 2016, AND ON EACH DECEMBER 1  
9 THEREAFTER, THE BOARD SHALL SUBMIT TO THE SENATE EDUCATION, HEALTH,  
10 AND ENVIRONMENTAL AFFAIRS COMMITTEE AND THE HOUSE HEALTH AND  
11 GOVERNMENT OPERATIONS COMMITTEE, IN ACCORDANCE WITH § 2-1246 OF THE  
12 STATE GOVERNMENT ARTICLE:

13                    (1) THE REPORT SUBMITTED TO THE BOARD UNDER SUBSECTION  
14 (A)(11) OF THIS SECTION;

15                    (2) IN CONSULTATION WITH THE COMMITTEE, ANY  
16 RECOMMENDATIONS REGARDING THE CONTINUATION AND IMPROVEMENT OF THE  
17 LICENSURE OF LICENSED DIRECT-ENTRY MIDWIVES IN THE STATE; ~~AND~~

18                    (3) ANY RECOMMENDATIONS REGARDING EXPANDING THE SCOPE OF  
19 PRACTICE OF LICENSED DIRECT-ENTRY MIDWIVES; AND

20                    (4) ANY RECOMMENDATIONS, INCLUDING RECOMMENDATIONS FOR  
21 LEGISLATION, REGARDING THE SCOPE OF PRACTICE OF LICENSED DIRECT-ENTRY  
22 MIDWIVES TO INCLUDE VAGINAL BIRTH AFTER CESAREAN.

23 ~~§ 6C-12.~~ § 6C-13.

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

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

29                    (2) BE OF GOOD MORAL CHARACTER;

30                    (3) BE A HIGH SCHOOL GRADUATE OR HAVE COMPLETED  
31 EQUIVALENT EDUCATION;

1 (4) BE AT LEAST 21 YEARS OLD;

2 (5) HOLD A CURRENT CARDIOPULMONARY RESUSCITATION (CPR)  
3 CERTIFICATION ISSUED BY THE AMERICAN RED CROSS OR THE AMERICAN HEART  
4 ASSOCIATION; AND

5 (6) ~~HOLD A CURRENT NEONATAL RESUSCITATION (NRP)~~  
6 ~~CERTIFICATION ISSUED BY THE AMERICAN ACADEMY OF PEDIATRICS~~ HAVE  
7 COMPLETED IN THE PAST 2 YEARS THE AMERICAN ACADEMY OF  
8 PEDIATRICS/AMERICAN HEART ASSOCIATION NEONATAL RESUSCITATION  
9 PROGRAM (NRP).

10 (B) AN APPLICANT:

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

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

15 (II) IF THE APPLICANT WAS CERTIFIED BY NARM AS A  
16 CERTIFIED PROFESSIONAL MIDWIFE ON OR BEFORE JANUARY 15, 2017, THROUGH  
17 A NON-MEAC ACCREDITED PROGRAM, BUT OTHERWISE QUALIFIES FOR  
18 LICENSURE, SHALL PROVIDE:

19 1. VERIFICATION OF COMPLETION OF  
20 NARM-APPROVED CLINICAL REQUIREMENTS; AND

21 2. EVIDENCE OF COMPLETION, IN THE PAST ~~5~~ 2 YEARS,  
22 OF AN ADDITIONAL ~~40~~ 50 HOURS OF ~~ACCREDITED AND BOARD APPROVED~~  
23 CONTINUING EDUCATION UNITS APPROVED BY THE BOARD AND ACCREDITED BY  
24 MEAC, THE AMERICAN COLLEGE OF NURSE MIDWIVES, OR THE ACCREDITING  
25 COUNCIL FOR CONTINUING MEDICAL EDUCATION, INCLUDING A MINIMUM OF 8  
26 HOURS OF PHARMACOLOGY AND:

27 A. 14 HOURS OF OBSTETRIC EMERGENCY SKILLS  
28 TRAINING SUCH AS A BIRTH EMERGENCY SKILLS TRAINING (BEST) OR AN  
29 ADVANCED LIFE SAVING IN OBSTETRICS (ALSO) COURSE; AND

30 B. THE REMAINING 36 HOURS DIVIDED AMONG AND  
31 INCLUDING HOURS IN THE AREAS OF PHARMACOLOGY, LAB INTERPRETATION OF  
32 PREGNANCY, ANTEPARTUM COMPLICATIONS, INTRAPARTUM COMPLICATIONS,  
33 POSTPARTUM COMPLICATIONS, AND NEONATAL CARE.

1 ~~§ 6C-13.~~ § 6C-14.

2 TO APPLY FOR A LICENSE, AN APPLICANT SHALL:

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

5 (2) SUBMIT TO THE BOARD:

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

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

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

11 ~~§ 6C-14.~~ § 6C-15.

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

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

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

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

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

26 ~~§ 6C-15.~~

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

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

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

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

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

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

10 8-6C-16.

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

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

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

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

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

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

22 (II) THE CIRCUMSTANCES SURROUNDING THE CRIME;

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

24 (IV) SUBSEQUENT WORK HISTORY;

25 (V) EMPLOYMENT AND CHARACTER REFERENCES; AND

26 (VI) OTHER EVIDENCE THAT DEMONSTRATES WHETHER THE  
27 APPLICANT POSES A THREAT TO THE PUBLIC HEALTH OR SAFETY.

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

4 **8-6C-17.**

5           **A LICENSE ISSUED UNDER THIS SUBTITLE AUTHORIZES THE LICENSEE TO**  
6 **PRACTICE DIRECT-ENTRY MIDWIFERY WHILE THE LICENSE IS ~~EFFECTIVE~~ ACTIVE.**

7 **8-6C-18.**

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

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

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

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

15                   **(II) ELECTRONIC MEANS TO THE LAST KNOWN ELECTRONIC**  
16 **ADDRESS OF THE LICENSEE.**

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

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

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

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

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

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

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

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

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

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

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

9                   **(1) 20 ACCREDITED AND BOARD-APPROVED CONTINUING**  
10 **EDUCATION UNITS TO BE COMPLETED EVERY 2 YEARS;**

11                   **(2) 4 HOURS OF PEER REVIEW IN ACCORDANCE WITH NARM**  
12 **STANDARDS FOR OFFICIAL PEER REVIEW TO BE COMPLETED EVERY 2 YEARS; AND**

13                   **(3) SUBMISSION OF ~~DATA ON EVERY PATIENT WHO CONSENTS TO~~**  
14 **~~PARTICIPATE IN MANA STATS ON ANY FORM PRESCRIBED BY MANA AND IN~~**  
15 **~~ACCORDANCE WITH THE POLICIES AND PROCEDURES OF MANA~~ THE ANNUAL**  
16 **REPORTS REQUIRED UNDER § 8-6C-10(A) OF THIS SUBTITLE.**

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

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

25                   **(1) FAILS TO PROVIDE SATISFACTORY EVIDENCE OF COMPLIANCE**  
26 **WITH ANY CONTINUING EDUCATION REQUIREMENTS SET UNDER THIS SECTION FOR**  
27 **LICENSE RENEWAL; OR**

28                   **(2) FAILS TO SUBMIT THE ANNUAL REPORT REQUIRED UNDER §**  
29 **8-6C-10(A) OF THIS SUBTITLE.**

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

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

3           (2) THE INACTIVE STATUS FEE SET BY THE BOARD.

4           (I) THE BOARD SHALL REACTIVATE THE LICENSE OF AN INDIVIDUAL WHO  
5 IS ON INACTIVE STATUS IF THE INDIVIDUAL:

6           (1) COMPLIES WITH ANY CONTINUING EDUCATION ~~REQUIREMENT~~  
7 AND DATA REPORTING REQUIREMENTS ESTABLISHED BY THE BOARD FOR THIS  
8 PURPOSE;

9           (2) PAYS TO THE BOARD A REACTIVATION FEE SET BY THE BOARD;  
10 AND

11          (3) IS OTHERWISE ENTITLED TO BE LICENSED.

12          (J) THE BOARD, IN ACCORDANCE WITH ITS REGULATIONS, SHALL  
13 REINSTATE THE LICENSE OF AN INDIVIDUAL WHO HAS FAILED TO RENEW THE  
14 LICENSE FOR ANY REASON IF THE INDIVIDUAL:

15          (1) IS OTHERWISE ENTITLED TO BE LICENSED;

16          (2) COMPLIES WITH ANY CONTINUING EDUCATION ~~REQUIREMENT~~  
17 AND DATA REPORTING REQUIREMENTS ESTABLISHED BY THE BOARD FOR THIS  
18 PURPOSE;

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

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

23          (5) APPLIES TO THE BOARD FOR REINSTATEMENT OF THE LICENSE  
24 WITHIN 5 YEARS AFTER THE LICENSE EXPIRES.

25          (K) (1) THE BOARD MAY NOT REINSTATE THE LICENSE OF A ~~CERTIFIED~~  
26 LICENSED DIRECT-ENTRY MIDWIFE WHO FAILS TO APPLY FOR REINSTATEMENT OF  
27 THE LICENSE WITHIN 5 YEARS AFTER THE LICENSE EXPIRES.

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



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

3           (2) ON RECEIPT OF THE CRIMINAL HISTORY RECORD INFORMATION  
4 OF A LICENSEE FORWARDED TO THE BOARD IN ACCORDANCE WITH § 8-303 OF THIS  
5 TITLE, IN DETERMINING WHETHER TO RENEW A LICENSE, THE BOARD SHALL  
6 CONSIDER:

7                   (I) THE AGE AT WHICH THE CRIME WAS COMMITTED;

8                   (II) THE CIRCUMSTANCES SURROUNDING THE CRIME;

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

10                  (IV) SUBSEQUENT WORK HISTORY;

11                  (V) EMPLOYMENT AND CHARACTER REFERENCES; AND

12                  (VI) OTHER EVIDENCE THAT DEMONSTRATES WHETHER THE  
13 APPLICANT POSES A THREAT TO THE PUBLIC HEALTH OR SAFETY.

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

17 8-6C-19.

18           (A) UNLESS THE BOARD AGREES TO ACCEPT THE SURRENDER OF THE  
19 LICENSE:

20                   (1) A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE MAY NOT  
21 SURRENDER A LICENSE; AND

22                   (2) A LICENSE MAY NOT LAPSE BY OPERATION OF LAW WHILE THE  
23 LICENSEE IS UNDER INVESTIGATION OR WHILE CHARGES ARE PENDING AGAINST  
24 THE LICENSEE.

25           (B) THE BOARD MAY SET CONDITIONS ON AN AGREEMENT WITH THE  
26 ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE UNDER INVESTIGATION OR AGAINST  
27 WHOM CHARGES ARE PENDING TO ACCEPT SURRENDER OF THE LICENSE.

28 8-6C-20.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

6           **(8) DOES AN ACT THAT IS INCONSISTENT WITH GENERALLY**  
7 **ACCEPTED PROFESSIONAL STANDARDS IN THE PRACTICE OF DIRECT-ENTRY**  
8 **MIDWIFERY;**

9           **(9) IS GROSSLY NEGLIGENT IN THE PRACTICE OF DIRECT-ENTRY**  
10 **MIDWIFERY;**

11           **(10) HAS VIOLATED ANY PROVISION OF THIS TITLE;**

12           **(11) SUBMITS A FALSE STATEMENT TO COLLECT A FEE;**

13           **(12) IS PHYSICALLY OR MENTALLY INCOMPETENT;**

14           **(13) KNOWINGLY FAILS TO REPORT SUSPECTED CHILD ABUSE IN**  
15 **VIOLATION OF § 5-704 OF THE FAMILY LAW ARTICLE;**

16           **(14) EXCEPT IN AN EMERGENCY LIFE-THREATENING SITUATION**  
17 **WHERE IT IS NOT FEASIBLE OR PRACTICABLE, FAILS TO COMPLY WITH THE CENTERS**  
18 **FOR DISEASE CONTROL AND PREVENTION'S GUIDELINES ON UNIVERSAL**  
19 **PRECAUTIONS;**

20           **(15) IS IN INDEPENDENT PRACTICE AND FAILS TO DISPLAY THE**  
21 **NOTICE REQUIRED UNDER § 8-6C-23 OF THIS SUBTITLE;**

22           **(16) IS HABITUALLY INTOXICATED;**

23           **(17) IS ADDICTED TO, OR HABITUALLY ABUSES, ANY NARCOTIC OR**  
24 **CONTROLLED DANGEROUS SUBSTANCE AS DEFINED IN § 5-101 OF THE CRIMINAL**  
25 **LAW ARTICLE;**

26           **(18) FAILS TO COOPERATE WITH A LAWFUL INVESTIGATION**  
27 **CONDUCTED BY THE BOARD;**

28           **(19) IS EXPELLED FROM THE REHABILITATION PROGRAM**  
29 **ESTABLISHED PURSUANT TO § 8-208 OF THIS TITLE FOR FAILURE TO COMPLY WITH**  
30 **THE CONDITIONS OF THE PROGRAM;**

1           ~~(20) DELEGATES DIRECT ENTRY MIDWIFERY ACTS OR~~  
 2 ~~RESPONSIBILITIES TO AN INDIVIDUAL THAT THE APPLICANT OR LICENSEE KNOWS~~  
 3 ~~OR HAS REASON TO KNOW LACKS THE ABILITY, KNOWLEDGE, OR REQUIRED~~  
 4 ~~LICENSURE TO PERFORM;~~

5           ~~(21) FAILS TO PROPERLY SUPERVISE INDIVIDUALS TO WHOM~~  
 6 ~~DIRECT ENTRY MIDWIFERY ACTS OR RESPONSIBILITIES HAVE BEEN DELEGATED;~~

7           ~~(22)~~ (20)   ENGAGES IN CONDUCT THAT VIOLATES THE PROFESSIONAL  
 8 CODE OF ETHICS;

9           ~~(23)~~ (21)   IS PROFESSIONALLY INCOMPETENT;

10          ~~(24)~~ (22)   PRACTICES DIRECT-ENTRY MIDWIFERY WITHOUT A  
 11 LICENSE, BEFORE OBTAINING OR RENEWING A LICENSE, INCLUDING ANY PERIOD  
 12 WHEN THE LICENSE HAS LAPSED;

13          ~~(25)~~ (23)   AFTER FAILING TO RENEW A LICENSE OR AFTER A LICENSE  
 14 HAS LAPSED, COMMITS ANY ACT THAT WOULD BE GROUNDS FOR DISCIPLINARY  
 15 ACTION UNDER THIS SECTION;

16          ~~(26) PRACTICES DIRECT ENTRY MIDWIFERY ON A NONRENEWED~~  
 17 ~~LICENSE FOR A PERIOD OF 16 MONTHS OR LONGER;~~

18          ~~(27)~~ (24)   VIOLATES REGULATIONS ADOPTED BY THE BOARD OR AN  
 19 ORDER FROM THE BOARD;

20          ~~(28)~~ (25)   PERFORMS AN ACT THAT IS BEYOND THE LICENSEE'S  
 21 KNOWLEDGE AND SKILLS;

22          ~~(29)~~ (26)   FAILS TO SUBMIT TO A CRIMINAL HISTORY RECORDS CHECK  
 23 IN ACCORDANCE WITH § 8-303 OF THIS TITLE; ~~OR~~

24          ~~(30)~~ (27)   WHEN ACTING IN A SUPERVISORY POSITION, DIRECTS  
 25 ANOTHER ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE TO PERFORM AN ACT  
 26 THAT IS BEYOND THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE'S KNOWLEDGE  
 27 AND SKILLS; OR

28          (28)   FAILS TO FILE A REPORT REQUIRED UNDER THIS SUBTITLE.

29          (B)   IF, AFTER A HEARING UNDER § 8-317 OF THIS TITLE, THE BOARD FINDS  
 30 THAT THERE ARE GROUNDS UNDER SUBSECTION (A) OF THIS SECTION TO SUSPEND  
 31 OR REVOKE A LICENSE, TO REPRIMAND A LICENSEE, OR TO PLACE A LICENSEE ON  
 32 PROBATION, THE BOARD MAY IMPOSE A PENALTY NOT EXCEEDING \$5,000 INSTEAD

1 OF OR IN ADDITION TO SUSPENDING OR REVOKING THE LICENSE, REPRIMANDING  
2 THE LICENSEE, OR PLACING THE LICENSEE ON PROBATION.

3 (C) (1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, AN  
4 INDIVIDUAL WHOSE LICENSE HAS BEEN SUSPENDED OR REVOKED BY THE BOARD  
5 SHALL RETURN THE LICENSE TO THE BOARD.

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

9 8-6C-21.

10 (A) UNLESS AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY, AN  
11 INDIVIDUAL MAY NOT REPRESENT TO THE PUBLIC BY TITLE, DESCRIPTION OF  
12 SERVICE, METHOD, PROCEDURE, OR OTHERWISE, THAT THE INDIVIDUAL IS  
13 AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY IN THE STATE.

14 (B) A LICENSEE MAY NOT ADVERTISE IN A MANNER THAT IS  
15 UNREASONABLE, MISLEADING, OR FRAUDULENT.

16 (C) UNLESS AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY UNDER  
17 THIS SUBTITLE, AN INDIVIDUAL MAY NOT USE THE ABBREVIATION "~~CDEM~~ LDEM"  
18 OR USE THE DESIGNATION "~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE".

19 (D) UNLESS AUTHORIZED TO PRACTICE DIRECT-ENTRY MIDWIFERY UNDER  
20 THIS SUBTITLE OR CERTIFIED AS A NURSE MIDWIFE UNDER THIS TITLE, AN  
21 INDIVIDUAL MAY NOT USE THE DESIGNATION "MIDWIFE".

22 8-6C-22.

23 (A) EXCEPT FOR ANY WILLFUL OR GROSSLY NEGLIGENT ACT, A HEALTH  
24 CARE PROVIDER OR EMERGENCY ROOM PERSONNEL WHO WORK AT A HOSPITAL, OR  
25 EMERGENCY MEDICAL ~~TECHNICIANS~~ SERVICES PROVIDERS OR AMBULANCE  
26 PERSONNEL, MAY NOT BE HELD CIVILLY LIABLE FOR AN ACTION ARISING SOLELY  
27 FROM AN INJURY RESULTING FROM AN ACT ~~OF~~ OR OMISSION OF A ~~CERTIFIED~~  
28 LICENSED DIRECT-ENTRY MIDWIFE, EVEN IF THE PERSON HAS CONSULTED WITH  
29 THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE OR ACCEPTED A REFERRAL  
30 FROM THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE.

31 (B) A HEALTH CARE PRACTITIONER WHO CONSULTS WITH A ~~CERTIFIED~~  
32 LICENSED DIRECT-ENTRY MIDWIFE OR RECEIVES NOTIFICATION OF A DELIVERY  
33 UNDER ~~§ 6-6C-02(B)(15)~~ § 8-6C-02(B)(15) OF THIS SUBTITLE OR THE TRANSFER  
34 OF RECORDS UNDER § 8-6C-02(B)(16) OF THIS SUBTITLE BUT WHO DOES NOT

1 EXAMINE OR TREAT A PATIENT OF THE ~~CERTIFIED~~ LICENSED DIRECT-ENTRY  
2 MIDWIFE MAY NOT BE DEEMED TO HAVE CREATED A PHYSICIAN-PATIENT  
3 RELATIONSHIP WITH THE PATIENT.

4 8-6C-23.

5 IF A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE IS ENGAGED IN THE  
6 PRIVATE PRACTICE OF DIRECT-ENTRY MIDWIFERY IN THE STATE, THE ~~CERTIFIED~~  
7 LICENSED DIRECT-ENTRY MIDWIFE SHALL DISPLAY THE NOTICE DEVELOPED  
8 UNDER § 1-207 OF THIS ARTICLE CONSPICUOUSLY IN EACH OFFICE WHERE THE  
9 ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE IS ENGAGED IN PRACTICE.

10 8-6C-24.

11 (A) THIS SECTION DOES NOT APPLY TO A VIOLATION OF § 8-6C-10(A) OF  
12 THIS SUBTITLE.

13 (B) A PERSON WHO VIOLATES ANY PROVISION OF THIS SUBTITLE IS GUILTY  
14 OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING  
15 \$5,000 OR IMPRISONMENT NOT EXCEEDING 1 YEAR OR BOTH.

16 8-6C-25.

17 THIS SUBTITLE MAY BE CITED AS THE ~~MARYLAND HOME BIRTH SAFETY ACT~~  
18 MARYLAND LICENSURE OF DIRECT-ENTRY MIDWIVES ACT.

19 8-6C-26.

20 SUBJECT TO THE EVALUATION AND REESTABLISHMENT PROVISIONS OF THE  
21 MARYLAND PROGRAM EVALUATION ACT, AND SUBJECT TO THE TERMINATION OF  
22 THIS SUBTITLE UNDER § 8-802 OF THIS TITLE, THIS SUBTITLE AND ALL  
23 REGULATIONS ADOPTED UNDER THIS SUBTITLE SHALL TERMINATE AND BE OF NO  
24 EFFECT AFTER JULY 1, 2023.

25 8-701.

26 (E-1) EXCEPT AS OTHERWISE PROVIDED IN THIS TITLE, AN INDIVIDUAL MAY  
27 NOT PRACTICE, ATTEMPT TO PRACTICE, OR OFFER TO PRACTICE AS A ~~CERTIFIED~~  
28 LICENSED DIRECT-ENTRY MIDWIFE UNLESS LICENSED BY THE BOARD TO PRACTICE  
29 AS A ~~CERTIFIED~~ LICENSED DIRECT-ENTRY MIDWIFE.

30 Article – State Government

31 8-405.

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

4 (3) [(i)] Nursing, State Board of (§ 8–201 of the Health Occupations  
 5 Article: 2021)[; and] **INCLUDING:**

6 [(ii)] **(I)** Electrology Practice Committee (§ 8–6B–05 of the Health  
 7 Occupations Article: 2021); **AND**

8 **(II) DIRECT-ENTRY MIDWIFERY ADVISORY COMMITTEE (§**  
 9 **8–6C–10 OF THE HEALTH OCCUPATIONS ARTICLE: 2021);**

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

12 ~~**Article Health Occupations**~~

13 ~~**§ 6C-02.1.**~~

14 ~~**(A) A CERTIFIED DIRECT-ENTRY MIDWIFE SHALL CONSULT WITH A HEALTH**~~  
 15 ~~**CARE PRACTITIONER IF ANY OF THE FOLLOWING CONDITIONS PRESENT DURING**~~  
 16 ~~**PRENATAL CARE:**~~

17 ~~**(1) SIGNIFICANT MENTAL DISEASE, INCLUDING DEPRESSION,**~~  
 18 ~~**BIPOLAR DISORDER, SCHIZOPHRENIA, AND OTHER CONDITIONS THAT IMPAIR THE**~~  
 19 ~~**ABILITY OF THE PATIENT TO PARTICIPATE EFFECTIVELY IN THE PATIENT'S CARE OR**~~  
 20 ~~**THAT REQUIRE THE USE OF PSYCHOTROPIC DRUGS TO CONTROL THE CONDITION;**~~

21 ~~**(2) POSTMATURITY (GESTATIONAL AGE GREATER THAN 42 WEEKS);**~~

22 ~~**(3) SECOND OR THIRD TRIMESTER BLEEDING;**~~

23 ~~**(4) INTERMITTENT USE OF ALCOHOL INTO THE SECOND TRIMESTER;**~~

24 ~~**(5) ASTHMA;**~~

25 ~~**(6) DIET-CONTROLLED GESTATIONAL DIABETES;**~~

26 ~~**(7) HISTORY OF GENETIC PROBLEMS, INTRAUTERINE DEATH AFTER**~~  
 27 ~~**20 WEEKS' GESTATION, OR STILLBIRTH;**~~

28 ~~**(8) PREVIOUS UTERINE SURGERY, INCLUDING MYOMECTOMY, LEEP,**~~  
 29 ~~**OR CONE BIOPSY;**~~

1           ~~(9) ABNORMAL PAP SMEAR;~~

2           ~~(10) PREVIOUS OBSTETRICAL PROBLEMS, INCLUDING UTERINE~~  
3 ~~ABNORMALITIES, PLACENTAL ABRUPTION, SIGNIFICANT CONGENITAL ANOMALIES,~~  
4 ~~PLACENTA ACCRETE, INCOMPETENT CERVIX, OR PRETERM DELIVERY FOR ANY~~  
5 ~~REASON;~~

6           ~~(11) POSSIBLE ECTOPIC PREGNANCY;~~

7           ~~(12) IN REMISSION FROM INFLAMMATORY BOWEL DISEASE;~~

8           ~~(13) TUBERCULOSIS;~~

9           ~~(14) CONTROLLED HYPOTHYROIDISM, BEING TREATED WITH THYROID~~  
10 ~~REPLACEMENT AND EUTHYROID, AND WITH THYROID TEST NUMBERS IN THE~~  
11 ~~NORMAL RANGE;~~

12           ~~(15) MORBID OBESITY (BODY MASS INDEX (BMI) GREATER THAN 34 AT~~  
13 ~~INITIAL PREGNANCY VISIT);~~

14           ~~(16) RH SENSITIZATION WITH POSITIVE ANTIBODY TITER;~~

15           ~~(17) BREECH PRESENTATION BETWEEN 35 AND 38 WEEKS;~~

16           ~~(18) TRANSVERSE LIE OR OTHER ABNORMAL PRESENTATION~~  
17 ~~BETWEEN 35 AND 38 WEEKS; AND~~

18           ~~(19) PREMATURE RUPTURE OF MEMBRANES AT 37 WEEKS OR LESS.~~

19           ~~(B) SUBJECT TO SUBSECTION (C) OF THIS SECTION, A CERTIFIED~~  
20 ~~DIRECT ENTRY MIDWIFE SHALL ARRANGE IMMEDIATE EMERGENCY TRANSFER TO A~~  
21 ~~HOSPITAL IF:~~

22           ~~(1) THE PATIENT REQUESTS TRANSFER; OR~~

23           ~~(2) THE PATIENT OR NEWBORN IS DETERMINED TO HAVE ANY OF THE~~  
24 ~~FOLLOWING CONDITIONS DURING LABOR, DELIVERY, OR THE POSTPARTUM PERIOD:~~

25           ~~(i) UNFORESEEN NONCEPHALIC PRESENTATION;~~

26           ~~(ii) UNFORESEEN MULTIPLE GESTATION;~~



1 ~~(III) NONREASSURING FETAL HEART RATE OR PATTERN,~~  
2 ~~INCLUDING TACHYCARDIA, BRADYCARDIA, SIGNIFICANT CHANGE IN BASELINE, AND~~  
3 ~~PERSISTENT LATE OR SEVERE VARIABLE DECELERATIONS;~~

4 ~~(IV) PROLAPSED CORD;~~

5 ~~(V) UNRESOLVED MATERNAL HEMORRHAGE;~~

6 ~~(VI) RETAINED PLACENTA;~~

7 ~~(VII) SIGNS OF FETAL OR MATERNAL INFECTION;~~

8 ~~(VIII) PATIENT WITH A THIRD OR FOURTH DEGREE LACERATION~~  
9 ~~OR A LACERATION BEYOND THE CERTIFIED DIRECT ENTRY MIDWIFE'S ABILITY TO~~  
10 ~~REPAIR;~~

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

12 ~~(X) SIGNIFICANT CONGENITAL ANOMALY;~~

13 ~~(XI) NEED FOR CHEST COMPRESSIONS DURING NEONATAL~~  
14 ~~RESUSCITATION;~~

15 ~~(XII) NEWBORN WITH PERSISTENT CENTRAL CYANOSIS;~~

16 ~~(XIII) NEWBORN WITH PERSISTENT GRUNTING AND~~  
17 ~~RETRACTIONS;~~

18 ~~(XIV) NEWBORN WITH ABNORMAL VITAL SIGNS WHO DOES NOT~~  
19 ~~IMPROVE AFTER AT HOME INTERVENTIONS ARE ADMINISTERED; OR~~

20 ~~(XV) GROSS OR THICK MECONIUM STAINING, WHEN~~  
21 ~~DISCOVERED.~~

22 ~~(C) IF TRANSFER IS NOT POSSIBLE BECAUSE OF IMMINENT DELIVERY, THE~~  
23 ~~CERTIFIED DIRECT ENTRY MIDWIFE SHALL CONSULT WITH A HOSPITAL BASED~~  
24 ~~HEALTH CARE PRACTITIONER FOR GUIDANCE ON FURTHER MANAGEMENT OF THE~~  
25 ~~PATIENT AND TO DETERMINE WHEN TRANSFER MAY BE SAFELY ARRANGED, IF~~  
26 ~~REQUIRED.~~

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

29 ~~§ 6C-02.2.~~

1       ~~(A) A CERTIFIED DIRECT ENTRY MIDWIFE MAY NOT UNDERTAKE THE CARE~~  
2 ~~OF A PATIENT, OR SHALL IMMEDIATELY REFER AND TRANSFER THE CARE OF A~~  
3 ~~PATIENT TO A HEALTH CARE PROVIDER, IF THE PATIENT IS DETERMINED TO HAVE~~  
4 ~~ANY OF THE FOLLOWING CONDITIONS:~~

5           ~~(1) DIABETES MELLITUS, INCLUDING UNCONTROLLED GESTATIONAL~~  
6 ~~DIABETES;~~

7           ~~(2) HYPERTHYROIDISM TREATED WITH MEDICATION;~~

8           ~~(3) UNCONTROLLED HYPOTHYROIDISM;~~

9           ~~(4) EPILEPSY WITH SEIZURES OR ANTI-EPILEPTIC DRUG USE DURING~~  
10 ~~THE 12 MONTHS PRIOR TO THE ESTIMATED DATE OF DELIVERY;~~

11          ~~(5) COAGULATION DISORDERS;~~

12          ~~(6) CHRONIC PULMONARY DISEASE;~~

13          ~~(7) HEART DISEASE IN WHICH THERE ARE ARRHYTHMIAS OR~~  
14 ~~MURMURS EXCEPT WHEN, AFTER EVALUATION, IT IS THE OPINION OF A PHYSICIAN~~  
15 ~~LICENSED UNDER TITLE 14 OF THIS ARTICLE OR A LICENSED NURSE CERTIFIED AS~~  
16 ~~A MIDWIFE OR A NURSE PRACTITIONER UNDER THIS TITLE THAT MIDWIFERY CARE~~  
17 ~~MAY PROCEED;~~

18          ~~(8) HYPERTENSION, INCLUDING PREGNANCY-INDUCED~~  
19 ~~HYPERTENSION (PIH);~~

20          ~~(9) RENAL DISEASE;~~

21          ~~(10) EXCEPT AS OTHERWISE PROVIDED IN § 8-6C-02.1(A)(16), RH~~  
22 ~~SENSITIZATION WITH POSITIVE ANTIBODY TITER;~~

23          ~~(11) EXCEPT AS OTHERWISE PROVIDED IN § 8-6C-08, A PREVIOUS~~  
24 ~~CESAREAN SECTION DELIVERY;~~

25          ~~(12) INDICATIONS THAT THE FETUS HAS DIED IN UTERO;~~

26          ~~(13) PREMATURE LABOR (GESTATION LESS THAN 37 WEEKS);~~

27          ~~(14) MULTIPLE GESTATION;~~

28          ~~(15) NONCEPHALIC PRESENTATION AT OR AFTER 38 WEEKS;~~

1           ~~(16) PLACENTA PREVIA OR ABRUPTION;~~

2           ~~(17) PREECLAMPSIA;~~

3           ~~(18) SEVERE ANEMIA, DEFINED AS HEMOGLOBIN LESS THAN 10 G/DL;~~

4           ~~(19) UNCOMMON DISEASES AND DISORDERS, INCLUDING ADDISON'S~~  
5 ~~DISEASE, CUSHING'S DISEASE, SYSTEMIC LUPUS ERYTHEMATOSUS,~~  
6 ~~ANTIPHOSPHOLIPID SYNDROME, SCLERODERMA, RHEUMATOID ARTHRITIS,~~  
7 ~~PERIARTERITIS NODOSA, MARFAN'S SYNDROME, AND OTHER SYSTEMIC AND RARE~~  
8 ~~DISEASES AND DISORDERS;~~

9           ~~(20) AIDS/HIV;~~

10          ~~(21) HEPATITIS A THROUGH C AND NON A THROUGH C;~~

11          ~~(22) ACUTE TOXOPLASMOSIS INFECTION, IF THE PATIENT IS~~  
12 ~~SYMPTOMATIC;~~

13          ~~(23) RUBELLA INFECTION DURING PREGNANCY;~~

14          ~~(24) ACUTE CYTOMEGALOVIRUS INFECTION, IF THE PATIENT IS~~  
15 ~~SYMPTOMATIC;~~

16          ~~(25) ALCOHOL ABUSE, SUBSTANCE ABUSE, OR PRESCRIPTION ABUSE~~  
17 ~~DURING PREGNANCY;~~

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

19          ~~(27) THROMBOSIS;~~

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

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

23          ~~(30) SIGNIFICANT FETAL CONGENITAL ANOMALY; OR~~

24          ~~(31) ECTOPIC PREGNANCY.~~

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

27           SECTION ~~2~~ 2. AND BE IT FURTHER ENACTED, That:

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

4 (1) the standardized transfer form required to be developed under §  
 5 8-6C-08(e)(1) of the Health Occupations Article, as enacted by Section 1 of this Act;

6 (2) the standardized informed consent agreement required to be developed  
 7 under § 8-6C-13(a)(3) of the Health Occupations Article, as enacted by Section 1 of this  
 8 Act; and

9 (3) a midwifery formulary.

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

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

12 (2) the Maryland Chapter of the American Congress of Obstetricians and  
 13 Gynecologists;

14 (3) the Maryland affiliate of the American College of Nurse-Midwives;

15 (4) the Maryland Pharmacists Association; ~~and~~

16 ~~(4)~~ (5) the Maryland Chapter of the American Academy of Pediatrics;  
 17 and

18 ~~(5)~~ (6) any other stakeholders the Committee considers necessary.

19 (c) The workgroup shall:

20 (1) review the transfer forms, informed consent forms, and midwifery  
 21 formularies developed in other states;

22 (2) make recommendations regarding the ~~establishment of a midwifery~~  
 23 ~~formulary council; and~~ content and use of the standardized transfer form required to be  
 24 developed under § 8-6C-08(e)(1) of the Health Occupations Article, as enacted by Section  
 25 1 of this Act;

26 (3) make recommendations regarding the content and use of the  
 27 standardized informed consent agreement required to be developed under § 8-6C-13(a)(3)  
 28 of the Health Occupations Article, as enacted by Section 1 of this Act; and

29 ~~(3)~~ (4) make recommendations regarding the establishment of a midwifery  
 30 formulary, including types of medications, equipment, and devices to be included on the  
 31 formulary and explain the method by which the ~~midwifery formulary council will decide~~

1 workgroup decided which medications, equipment, and devices will be included in the  
2 formulary.

3 (d) On or before ~~June~~ January 1, 2016, the workgroup shall report its findings  
4 and recommendations, ~~in accordance with § 2-1246 of the State Government Article, to the~~  
5 ~~Senate Education, Health, and Environmental Affairs Committee and the House Health~~  
6 ~~and Government Operations Committee~~ to the State Board of Nursing.

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

8 (a) On or before December 1, 2016, the Department of Legislative Services shall  
9 compile ~~and analyze~~ data on the outcomes of vaginal births after cesarean attended by  
10 licensed certified professional midwives in out-of-hospital settings from other states and  
11 by licensed midwives in out-of-hospital settings in other countries.

12 (b) The data compiled ~~and analyzed~~ under subsection (a) of this section shall  
13 include information, as available, on the incidence of uterine rupture, vaginal birth after  
14 cesarean success rates, transfer rates, and information on evidence of adverse outcomes.

15 (c) The Department shall:

16 (1) report, in accordance with § 2-1246 of the State Government Article, on  
17 the data compiled ~~and analyzed~~ under subsection (a) of this section to the Senate Education,  
18 Health, and Environmental Affairs Committee and the House Health and Government  
19 Operations Committee; ~~and~~

20 (2) provide the data to the State Board of Nursing; *and*

21 (3) *present the data to the Senate Education, Health, and Environmental*  
22 *Affairs Committee and the House Health and Government Operations Committee.*

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

26 ~~SECTION 5. AND BE IT FURTHER ENACTED, That, on or before December 1,~~  
27 ~~2018, the State Board of Nursing, in consultation with the Direct Entry Midwifery~~  
28 ~~Advisory Committee and in accordance with § 2-1246 of the State Government Article,~~  
29 ~~shall report to the Senate Education, Health, and Environmental Affairs Committee and~~  
30 ~~the House Health and Government Operations Committee, for licensure years 2016, 2017,~~  
31 ~~and 2018, regarding:~~

32 (1) ~~the number of certified direct entry midwives in the State;~~

33 (2) ~~the number and circumstances of all;~~

1                   (i) ~~healthy birth outcomes attended by certified direct entry~~  
2 ~~midwives;~~

3                   (ii) ~~adverse birth outcomes attended by certified direct entry~~  
4 ~~midwives; and~~

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

7                   (3) ~~recommendations for the continuation and improvement of the~~  
8 ~~licensure of certified direct entry midwives in the State.~~

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

12                   (1)     two members in 2016;

13                   (2)     three members in 2017; and

14                   (3)     two members in 2018.

15           SECTION ~~7~~ 6. AND BE IT FURTHER ENACTED, That this Act shall take effect  
16 June 1, 2015. ~~Section 2 of this Act shall remain effective until the effective date of~~  
17 ~~regulations adopted by the State Board of Nursing that include the provisions in Section 2~~  
18 ~~of this Act. On that date, with no further action required by the General Assembly, Section~~  
19 ~~2 of this Act shall be abrogated and of no further force and effect. The State Board of~~  
20 ~~Nursing shall notify the Department of Legislative Services within 5 days after the effective~~  
21 ~~date of the regulations.~~

Approved:

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Governor.

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Speaker of the House of Delegates.

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President of the Senate.