



BILL HI-LIGHTS

HB 1773

- Created a CPM to LM bridge that clarified what aspiring midwife applicants (who did not attend state approved schools) need to do to bridge the gap between their national CPM credential and the additional requirements to attain licensure in WA which were previously outlined in statute but not as clearly as possible. Because the midwifery law in WA state predates the creation of a national credential for midwives, rules needed to be added to the statute to clarify how applicants can bridge the gap between current statute and their national credential.
- Ensured that midwives have the capacity to demonstrate their professional accountability through mandatory continuing education, peer review and data collection requirements. The data collection requirement will allow midwives to be prepared as the new health care laws tie third party reimbursement to outcomes.
- Provided the final step necessary to ensure that LMs are allowed to direct nurses (RNs and LPNs). We already succeeded in adding the necessary provision for this relationship in the nursing law. In 2014, we needed to and succeeded in added the corresponding language in the midwifery statute. This change clarified that nurses can take direction from an LM in a home, birth center or hospital setting enabling RNs and LPNs to seek such employment if desired.
- In 2012, Premera began refusing to pay for newborn care performed by LMs even though Medicaid and other payors (including Premera) had been compensating LMs for this important and attentive care during the first two weeks of a newborn's life that results in improved breastfeeding rates. MAWS sought a variety of solutions to this problem which lead to a sunrise review of the midwifery law concerning LM scope of practice with regard to newborn care. Customary midwifery practice dating back to the turn of the century has included monitoring newborns for deviations from normal, but because this scope of practice was not explicit in the law, the DOH sunrise review committee advised the language be clarified and updated to reflect current practice and training.
- In 2014, HB 1773 had unanimous support in WA state Senate and nearly unanimous support in the House. The bill was originally introduced in 2013.

For more information, visit the MAWS Legislative Report 2014 at

<http://www.washingtonmidwives.org/about-maws/legislative-issues-HB1773.html>