

BIRTHING CENTER AMENDMENTS

2016 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Deidre M. Henderson

House Sponsor: _____

LONG TITLE

General Description:

This bill amends provisions related to birthing centers.

Highlighted Provisions:

This bill:

▶ defines terms; and

▶ prohibits the Department of Health and the Health Facility Committee from imposing certain requirements on birthing centers licensed under the Health Care Facility Licensing and Inspection Act.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

ENACTS:

26-21-28, Utah Code Annotated 1953

Be it enacted by the Legislature of the state of Utah:

Section 1. Section **26-21-28** is enacted to read:

26-21-28. Birthing centers -- Regulatory restrictions.

(1) For purposes of this section:



28 (a) "Certified nurse midwife" means an individual who is licensed under Title 58,
29 Chapter 44a, Nurse Midwife Practice Act.

30 (b) "Direct-entry midwife" means an individual who is licensed under Title 58, Chapter
31 77, Direct-Entry Midwife Act.

32 (c) "Licensed maternity care practitioner" includes:

33 (i) a physician;

34 (ii) a certified nurse midwife;

35 (iii) a direct entry midwife;

36 (iv) a naturopathic physician; and

37 (v) other individuals who are licensed under Title 58, Division of Occupational and
38 Professional Licensing Act and whose scope of practice includes midwifery or obstetric care.

39 (d) "Naturopathic physician" means an individual who is licensed under Title 58,
40 Chapter 71, Naturopathic Physician Practice Act.

41 (e) "Physician" means an individual who is licensed under Title 58, Chapter 67, Utah
42 Medical Practice Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act.

43 (2) The Health Facility Committee and the department may not require a birthing
44 center or a licensed maternity care practitioner who practices at a birthing center to:

45 (a) maintain admitting privileges at a general acute hospital;

46 (b) maintain a written transfer agreement with one or more general acute hospitals;

47 (c) maintain a collaborative practice agreement with a physician; or

48 (d) have a physician or certified nurse midwife present at each birth when another

49 licensed maternity care practitioner is present at the birth and remains until the maternal patient
50 and newborn are stable postpartum.

51 (3) The Health Facility Committee and the department shall:

52 (a) permit all types of licensed maternity care practitioners to practice in a birthing
53 center; and

54 (b) except as provided in Subsection (2)(b), require a birthing center to have a written
55 plan for the transfer of a patient to a hospital.