

SPONSORS MEMO:

**NEW YORK STATE SENATE
INTRODUCER'S MEMORANDUM IN SUPPORT
submitted in accordance with Senate Rule VI. Sec 1**

BILL NUMBER: S5007

SPONSOR: DUANE

TITLE OF BILL:

An act to amend the education law, in relation to the definition of the practice of midwifery

PURPOSE OR GENERAL IDEA OF BILL:

To eliminate the requirement for a written practice agreement.

SUMMARY OF SPECIFIC PROVISIONS:

This legislation amends subdivision 1 and 2 of section 6951 of the Education Law by eliminating the requirement for a written practice agreement.

JUSTIFICATION:

This bill will amend the Education Law to eliminate the requirement for a written practice agreement. This bill will not expand the scope of practice of licensed midwives.

Midwives are an integral part of our health care system. Although midwives have been educated in universities for over fifty years, the Midwifery Practice Act was not passed until 1992. To date, more than 1300 midwives have been licensed by the New York State Education Department for practice in a variety of settings, including private offices, public health clinics, hospitals, birth centers and homes. Midwives attend approximately 10% of all births (15% of all vaginal births) in New York State every year and are proud of the lower cesarean rates, shorter hospital stays and higher breastfeeding rates among the women they serve. Midwives provide management of normal pregnancies, child birth and postpartum care as well as primary preventive reproductive health care of essentially healthy women, including newborn evaluation, resuscitation and referral for infants. New York State licensed midwives also provide health care to pre-adolescent, adolescent and adult women throughout their life span, including primary well woman health care, gynecologic care and care during and after pregnancy. In addition, licensed midwives prescribe medications, order laboratory tests and refer to other health care providers. Midwives have been and continue to be a vital component of our health care delivery system in New York State.

Under the Midwifery Practice Act, the New York State Board of Midwifery outlines rigorous educational requirements and regulations for the practice of midwifery. Pursuant to their scope of practice, as well as their professional and ethical obligations, licensed midwives provide services

to their clients, with referral, collaboration and consultation. By removing the requirement for a "written practice agreement," this bill will promote and enhance access to health care services, especially in rural and lower-income urban areas, and increase the quality of care for those women who choose midwifery services.

Midwives currently practice in 15 states (AK, AZ, CT, DC, ID, IA, ME, MN, MT, NH, NM, OR, RI, W A, WY) without signed practice agreements. Like these and many other states, New York is experiencing a shortage in its health care workforce, especially Ob-Gyns and primary care providers. According to the New York Department of Health ("NYDOH"), the North Country region's primary care physician supply decreased by 8% between 2001 and 2005 and, in the nine-county Southern Tier region, the number of OB/GYNs declined by 28%. In addition, NYDOH statistics for 2004-2006 show that there was late or no prenatal care in almost 7% of all births in Cattaraugus County and in over 8% of all births in Queens County. Access to quality prenatal and post-partum care is essential to achieve good health outcomes, and have healthy mothers and healthy babies. For many women in New York's rural and lower-income urban areas, licensed midwives are their only source of health care and point of access to the health care system.

Licensed midwives need to be recognized as full partners in New York's health care delivery system in order to ensure that women in New York have access to comprehensive and quality health care services. Too often, however, the written practice agreement requirement stands as an obstacle to midwifery care. For example, in certain rural communities, there are no physicians available to sign an agreement. Moreover, even when a midwife is able to secure a written practice agreement, it has served as the basis for limiting the practice of midwifery by wrongly implying that midwives require direct supervision and interfering with effective coordination of care.

As health care professionals that serve and care for the needs women and babies, including those in New York's underserved areas, licensed midwives play a vital role in our health care system. The requirement for a written practice agreement restricts access to care and the choice of a licensed midwife as a health care provider for women in New York State. Safe, quality health care can best be provided to women and their infants when policymakers develop laws and regulations that foster midwives' ability to provide midwifery care within their scope of practice while encouraging consultation, collaborative management, and seamless referral and transfer of care when indicated.

PRIOR LEGISLATIVE HISTORY:

New bill.

FISCAL IMPLICATIONS:

None.

EFFECTIVE DATE:

Immediately.
