

MEMORANDUM OF SUPPORT

A8117-B
By Assemblymember Gottfried

S5007-A
By Senator Duane

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

The New York State Nurses Association (NYSNA), representing the interests of registered nurses and the patients they serve, supports the above-referenced bill, which would eliminate the requirement for a written practice agreement for a licensed midwife. 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.

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. Under the Midwifery Practice Act, the New York State Board of Midwifery outlines rigorous educational requirements and regulations for the practice of midwifery. 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.

Pursuant to their scope of practice, as well as their professional and ethical obligations, licensed midwives provide services to their clients, with referral and consultation. Midwives provide management of normal pregnancies, child births 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 lifespan, including primary care, gynecologic care and care during and after pregnancy. In addition, licensed midwives prescribe medications, order laboratory tests and refer to other healthcare providers. Midwives have been, and continue to be, a vital component of our health care delivery system in New York State.

Midwives currently practice in 15 states (AK, AZ, CT, DC, ID, IA, ME, MN, MT, NH, NM, OR, RI, WA, 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 for mothers and their infants. 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 healthcare delivery system in order to ensure that women in New York have access to comprehensive and quality healthcare 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 healthcare professionals that serve the needs of women and infants, including those in New York's underserved areas, licensed midwives play a vital role in our healthcare system. 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 care within their scope of practice, while encouraging consultation and seamless referral and transfer of care when indicated. For these reasons, NYSNA urges passage of this legislation.