



Board of Nursing

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

March 11, 2021

The Honorable Shane E. Pendergrass
Chair, Health and Government Operations Committee
Room 241 House Office Building
Annapolis, MD 21401-1991

RE: HB 1032 – Health Occupations – Licensed Direct Entry Midwives – Previous Cesarean Section – Letter of Support

Dear Chair Pendergrass and Committee Members:

The Maryland Board of Nursing (“the Board”) respectfully submits this letter of support for HB 1032 – Health Occupations – Licensed Direct Entry Midwives – Previous Cesarean Section. This bill alters the circumstances under which a licensed direct entry midwife (LDEM) is prohibited from assuming or taking certain responsibility for a patient who had a previous cesarean section. This bill requires a licensed direct entry midwife to consult with a health care practitioner and document the consultation if a patient has had a previous cesarean section (c-section) that resulted in a certain incision and was performed at least a certain number of months before a certain date.

Licensed direct entry midwives (LDEMs) are revered proponents for delivering low-risk midwifery care in communities, particularly in the home setting. LDEMs are independent practitioners educated in the discipline of midwifery through apprenticeship, self-study, and by attending midwifery school. It has been a formalized license since 2015, and has gained familiarity within the healthcare community.

The pandemic has brought many challenges into the healthcare setting, particularly for midwifery, obstetrical and gynecologic care. There has been an incredible shift in individuals seeking midwifery care, and an interest in allowing labor and delivery to occur in the comfort of an individual’s home. With an increase in demand for midwifery services, LDEMs have been turning away women with previous cesarean section history. In current practice, LDEMs are prohibited from providing pregnancy and birth care to patients with any previous c-section history, regardless of when the procedure was performed. This bill intends to narrow the prohibition for LDEMs by changing the timeline of a c-section from an unlimited period of time to at least 18 months before the expected delivery date.

For the reasons discussed above, the Board of Nursing respectfully submits this letter of support for HB 1032.

I hope this information is useful. For more information, please contact Iman Farid, Health Policy Analyst, at (410) 585 – 1536 (iman.farid@maryland.gov) or Rhonda Scott, Deputy Director, at (410) 585 – 1953 (rhonda.scott2@maryland.gov).

Sincerely,

A handwritten signature in black ink, appearing to read 'G. Hicks', with a long horizontal stroke extending to the left.

Gary N. Hicks
Board President

The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.