



**Testimony Before the
House Health Care Committee regarding HB 2997
Presented by Courtni Dresser
on behalf of the Oregon Medical Association
March 15, 2013**

Thank you for allowing me to testify today. My name is Courtni Dresser and I am the Associate Director of Government Relations at the Oregon Medical Association.

The OMA would like to thank the members of the Workgroup that met over the last year on midwifery issues and we appreciate the work that it took to produce HB 2997. While we appreciate the steps that this proposal takes to license Direct Entry Midwives, the OMA believes the bill still does not go far enough to ensure the safety of the mother and baby. While we support this proposal we would like to request that the Legislature continue to monitor this issue and also request that the workgroup continue to meet to discuss other potential changes and partnerships.

The OMA's initial concerns with HB 2997 are:

Exemptions for traditional midwives

There is a concern that the exemption language on page 2 line 7 could be too broad. The OMA has suggested changing language that exempts traditional midwives to include the following on page 2, line 7- "The person is acting as a traditional midwife and **is a member of a** religious or cultural group..." No other licensed health care profession in Oregon is exempted from licensure and the OMA is concerned that this exemption is too broad and does not achieve the intent of this legislation- to license all midwives in the state of Oregon.

Legislation passed in 2011 enabled the state to collect data on births performed by midwives via the Centers for Vital Records. These records now capture information on the supervising provider type at the time of the birth, including the initial provider type if the patient(s) required emergency transport to a hospital. Collecting this data was only the first step in making midwifery practice safer. The data along with licensure of all midwives is critical information that ensures healthy pregnant women with a low risk pregnancy are provided clear and appropriate choices in the her birth plan, including an at home birth.

Another change is on page 2 line 12 regarding the requirement for unlicensed midwives to disclose certain information. We have requested the removal of the first part of line 12 "If a person has received notice from the Board about the requirements to disclose the following information,"

Liability

The OMA also supports the requirement that all midwives carry liability insurance. Again, this would better align licensed midwives with other licensed health care providers in the state - physicians, nurse practitioners and physician assistants are all required to carry liability coverage. This protects both the health care provider and the patient, ensuring safe and effective care.

Tocolytics

The OMA is concerned that the inclusion of the drug tocolytics (page 11, line 42) was not fully vetted by the workgroup facilitated by Representative Parrish and Representative Keny-Guyer. Tocolytics is a drug that is generally administered in a hospital setting for pre-term contractions to address preterm birth or fetal distress symptoms. Physicians have expressed concern that administering this drug at an at-home birth may have effects on the mother and unborn child.

The OMA is supportive of licensing midwives and does not wish to remove an expectant parents choice of birth plan; rather, we want to ensure that physicians, midwives and families can work together to ensure the safe delivery of a healthy baby through increased transparency in the midwifery profession, licensing, continued data collection, liability issues and continued monitoring of services that are provided to women at a home birth.

We hope that we can make some amendments to this bill and also have the workgroup continue to meet to address ongoing concerns.

The Oregon Medical Association is an organization of over 8,000 physicians, physician assistants, and medical students organized to serve and support physicians in their efforts to improve the health of Oregonians. Additional information can be found at www.theOMA.org.