A BILL TO BE ENTITLED
AN ACT TO ESTABLISH THE CERTIFIED PROFESSIONAL MIDWIVES LICENSING ACT.
The General Assembly of North Carolina enacts:
SECTION 1. Chapter 90 of the General Statutes is amended by adding a new Article to read:
"Article 10B.
"Certified Professional Midwives.

§ 90-178.10. Title. This Article may be cited as the "Home Birth Freedom Act."

§ 90-178.11. Findings. The General Assembly makes the following findings:
(1) There is a need for a person to have the freedom to choose the manner, cost, and setting for giving birth.
(2) Access to prenatal care and delivery services is limited by the inadequate number of providers of midwifery services, and the practice of midwifery may help to reduce this shortage.
(3) There is a need for the safe and effective delivery of newborn babies and the health, safety, and welfare of their mothers in the delivery process.
(4) In the interest of public health, the State should promote the regulation of the practice of midwifery for the purpose of protecting the health and welfare of women and infants.
(5) Midwifery is a profession in its own right, and it is not the practice of medicine.

§ 90-178.12. Definitions. The following definitions apply in this Article:
(1) Antepartal. – Occurring during pregnancy.
(2) Certified nurse midwife. – A person approved to practice nurse midwifery under Article 10A of this Chapter.
(3) Certified professional midwife (CPM). – A person who has obtained national certification from the North American Registry of Midwives (NARM).
(4) Consultation. – The exchange of information and advice regarding the client’s condition and indicated treatment with a licensed physician or certified nurse midwife.
§ 90-178.13. License required; exemptions.

(a) On or after January 1, 2016, no person shall practice or offer to practice midwifery as defined in this Article or otherwise indicate or imply that the person is a licensed certified professional midwife unless the person is currently licensed as provided in this Article.

(b) The provisions of this Article do not apply to:

(1) An individual approved to practice midwifery under Article 10A of this Chapter.
(2) A physician licensed to practice medicine under Article 1 of this Chapter when engaged in the practice of medicine as defined by law.
(3) The performance of medical acts by a physician assistant or nurse practitioner when performed in accordance with the rules of the North Carolina Medical Board.
(4) The practice of nursing by a registered nurse engaged in the practice of nursing under Article 9A of this Chapter.
(5) The rendering of childbirth assistance in an emergency situation.
(6) Individuals who are present during the birth process or assisting the certified professional midwife in the birth process, including family members or other caregivers invited by the birth mother, persons providing emergency medical care, doulas or midwifery students or assistants who are under the supervision of a certified professional midwife licensed under the provisions of this Article.


(a) Composition and Terms. – The North Carolina Council of Certified Professional Midwives is created. The Council shall consist of seven members who shall serve staggered terms. The Council members shall be appointed by the Secretary of Health and Human Services, and the initial Council members shall be appointed on or before October 1, 2015, as follows:
(1) Four certified professional midwives, one of whom shall serve for a term of four years, two of whom shall serve for terms of three years, and one of whom shall serve for a term of two years.

(2) One licensed physician who is knowledgeable in midwifery care who shall serve for a term of four years.

(3) One home birth consumer who shall serve for a term of four years.

(4) One certified nurse midwife who practices home birth who shall serve for a term of two years.

Upon the expiration of the terms of the initial Council members, members shall be appointed for terms of four years and shall serve until their successors are appointed. No member may serve more than two consecutive terms.

(b) Qualifications. – Each Council member shall be a resident of this State, and the certified professional midwife members shall hold current licenses from the Council and remain in good standing with the Council during their terms.

(c) Vacancies. – Any vacancy shall be filled by the Secretary of Health and Human Services. Appointees to fill vacancies shall serve the remainder of the unexpired term and until their successors have been duly appointed.

(d) Removal. – The Council may remove any of its members for neglect of duty, incompetence, or unprofessional conduct. If a Council member is absent from three consecutive Council meetings without excuse, that member shall be removed from office, and a new member shall be appointed by the Secretary of Health and Human Services. An absence shall be deemed excused if (i) caused by a health problem or condition verified in writing by a physician; or (ii) by an accident or similar unforeseeable tragedy or event, on or before the next Council meeting. A member subject to disciplinary proceedings in the member’s capacity as a certified professional midwife shall be disqualified from participating in the official business of the Council until the charges have been resolved.

(e) Compensation. – Each member of the Council shall receive per diem and reimbursement for travel and subsistence as provided in G.S. 93B-5.

(f) Officers. – The officers of the Council shall be a chair, a vice-chair, and other officers deemed necessary by the Council to carry out the purposes of this Article. All officers shall be elected annually by the Council for two-year terms and shall serve until their successors are elected and qualified. No person may serve as chair for more than five consecutive years.

(g) Meetings. – The Council shall hold its first meeting within 45 days after the appointment of its members and shall hold at least two meetings each year to conduct business and to review the standards and rules previously adopted by the Council. The Council shall establish the procedures for calling, holding, and conducting regular and special meetings. A majority of Council members shall constitute a quorum.

(h) Notice of Meeting; Records. – Public notice shall be given for all meetings and all meetings are open to the public. All records are available to the public. Persons wishing to obtain copies of records may request copies, in writing, from the Council.


In consultation with the Division and with guidance from the National Association of Certified Professional Midwives Standards of Practice, the Council shall have the following powers and duties:

(1) Administer this Article.

(2) Issue interpretations of this Article.

(3) Adopt, amend, or repeal rules as may be necessary to carry out the provisions of this Article, including rules relating to the administration of medications consistent with a licensed certified professional midwife’s training and scope of practice.
(4) Employ and fix compensation of personnel that the Council determines is necessary to carry into effect the provisions of this Article and incur other expenses necessary to effectuate this Article.

(5) Examine and determine the qualifications and fitness of applicants for licensure, license renewal, and reciprocal licensure.

(6) Issue, renew, deny, suspend, or revoke licensure and carry out any disciplinary actions authorized by this Article.

(7) Set fees for licensure, license renewal, and other services deemed necessary to carry out the purposes of this Article.

(8) Maintain a current list of all persons who have been licensed as certified professional midwives under this Article and collect their annual statistics.

(9) Address problems and concerns of practicing certified professional midwives in order to promote safety for the citizens of this State.

(10) Conduct investigations for the purpose of determining whether violations of this Article or grounds for disciplining certified professional midwives exist.

(11) Maintain a record of all proceedings and make available to all approved certified professional midwives and other concerned parties an annual report of all Council action.

(12) Adopt a seal containing the name of the Council for use on all official documents and reports issued by the Council.

(13) Educate the public and other providers of obstetrical care about the role of the licensed midwife.

“§ 90-178.16. Requirements for licensure.

An applicant shall be licensed to practice as a certified professional midwife under this Article if the applicant meets the following requirements:

(1) Completes an application on a form approved by the Council.

(2) Has obtained a certification from NARM and currently holds the title of certified professional midwife (CPM).

(3) On or after December 31, 2018, has graduated from or otherwise successfully completed a midwifery program or school that has either been: (i) accredited by an organization recognized by the United States Department of Education, including the Midwifery Education Accreditation Council (MEAC); or (ii) approved by the Council.

(4) Submits proof to the Council of current cardiopulmonary resuscitation (CPR) certification and neonatal resuscitation (NPR) certification.

(5) Has read, understands, and agrees to practice under the guidelines set forth in this Article and any rules adopted pursuant to this Article.

(6) Pays the required fees in accordance with G.S. 90-178.20.

“§ 90-178.17. Responsibilities of a licensed midwife; display of license.

(a) A certified professional midwife licensed under this Article shall have the following responsibilities:

(1) Provide care for the healthy woman who is expected to have a normal pregnancy, labor, birth, and postpartal phase in the setting of the mother’s choice.

(2) Ensure that the client has signed an informed consent form. This form shall include information to inform the client of the qualifications of the licensee.

(3) Order routine antepartal or postpartal screening or laboratory analysis to be performed by a licensed laboratory or testing facility, when necessary.

(4) Develop an emergency plan to be signed by the client and placed in the client’s chart. The documentation shall also include referral and transfer plans for the client in the event of an emergency.
Determine the progress of labor and, when birth is imminent, be available until delivery is accomplished.

Remain with the postpartal mother during the postpartal period until the conditions of the mother and newborn are stabilized.

Instruct the parents regarding the requirements of newborn screening.

Instruct the parents regarding the requirement of newborn hearing screening.

Maintain a birth certificate for each birth in accordance with the requirements of Article 4 of Chapter 130A of the General Statutes.

Practice in compliance with the requirements of this Article and any rules adopted pursuant to this Article.

§ 90-178.18. License renewal; inactive status; lapsed license.

(a) An initial license to practice as a certified professional midwife shall be valid for three years. After the initial license expires, a license shall be renewed every two years. All applications for renewal shall be filed with the Council and shall be accompanied by the renewal fee in accordance with G.S. 90-178.20 and proof of current certification from NARM. Compliance with NARM recertification requirements shall include (i) remaining in good standing with NARM; (ii) maintaining current cardiopulmonary resuscitation (CPR) and neonatal resuscitation (NPR) certifications; and (iii) completing any continuing education requirements. A license that has expired for failure to renew may be reinstated after the applicant pays any late and renewal fees as required by G.S. 90-178.20 and complies with any other rules adopted pursuant to this Article.

(b) Upon written request to the Council, the Council may grant a licensed midwife inactive status. While inactive, the midwife shall not practice midwifery in this State and shall not be subject to license renewal requirements established by the Council. A midwife may change the midwife's status from inactive to active by (i) submitting a written request to the Council; and (ii) fulfilling the requirements for renewal described under subsection (a) of this section.

(c) A midwife who does not seek inactive status and allows the license to expire after a 60-day grace period shall apply for a new license as prescribed in this Article.


The Council may, upon application and payment of proper fees, grant a license to a person who resides in this State and has been licensed, certified, or registered to practice as a certified professional midwife in another jurisdiction if that jurisdiction's standards of competency are substantially equivalent to those provided in this Article in accordance with rules adopted by the Council.

§ 90-178.20. Fees.

(a) All fees shall be set by the Council, in consultation with the Division, pursuant to rules adopted under this Article. All fees payable to the Council shall be deposited in the name of the Council in financial institutions designated by the Council as official depositories and shall be used to pay all expenses incurred in carrying out the purposes of this Article.

(b) All salaries, compensation, and expenses incurred or allowed to carry out the purposes of this Article shall be paid by the Council exclusively out of the fees received by the Council as authorized by this Article or funds received from other sources. In no case shall any salary, expense, or other obligation of the Council be charged against the State treasury.

§ 90-178.21. Suspension, revocation, and refusal to renew license.

(a) The Council may issue a letter of reprimand, deny, refuse to renew, suspend, or revoke an application for licensure or a license if the applicant or licensee does any of the following:
(1) Gives false information or withholds material information from the Council in procuring or attempting to procure a license.

(2) Gives false information or withholds material information from the Council during the course of an investigation conducted by the Council.

(3) Has been convicted of or pled guilty or no contest to a crime that indicates the person is unfit or incompetent to practice midwifery as defined in this Article or that indicates the person has deceived, defrauded, or endangered the public.

(4) Has a habitual substance abuse problem or mental impairment that interferes with his or her ability to provide appropriate care as established by this Article or rules adopted by the Council.

(5) Has demonstrated gross negligence, incompetency, or misconduct in the practice of midwifery as defined in this Article.

(6) Has had an application for licensure or a license to practice midwifery in another jurisdiction denied, suspended, or revoked for reasons that would be grounds for similar action in this State.

(7) Has willfully violated any provision of this Article or rules adopted by the Council.

(b) The taking of any action authorized under subsection (a) of this section may be ordered by the Council after a hearing is held in accordance with Article 3A of Chapter 150B of the General Statutes. The Council may reinstate a revoked license if it finds that the reasons for revocation no longer exist and that the person can reasonably be expected to perform the services authorized under this Article in a safe manner.

§ 90-178.22. Third-party reimbursement allowed; no requirement to use licensed certified professional midwife.

A certified professional midwife licensed pursuant to this Article may receive third-party reimbursement from private agencies that provide coverage for maternity and obstetrical care. A managed care organization or insurance company may not require a patient to be served by a licensee instead of a licensed physician or nurse practitioner.

§ 90-178.23. Enjoining illegal practices; vicarious liability.

(a) The Council may apply to the superior court for an order enjoining violations of this Article. Upon a showing by the Council that any person has violated this Article, the court may grant injunctive relief.

(b) No health care provider shall be liable for an injury to a woman or infant arising during childbirth and resulting from an act or omission by a midwife licensed under this Article, regardless of whether the health care provider has consulted with or accepted a referral from the licensee.”

SECTION 2. This act is effective when it becomes law.