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Representative Kane supports maternal health care bill to expand access to non-hospital childbirth options

BOSTON – State Representative Hannah Kane (R-Shrewsbury) recently supported legislation to expand access to non-hospital childbirth options for expectant parents in Massachusetts and establish a formal licensing process for certified professional midwives and lactation consultants.

House Bill 4773, *An Act promoting access to midwifery care and out-of-hospital birth options*, also provides for postpartum depression screenings and requires the Department of Public Health (DPH) to establish a program to conduct fetal and infant mortality reviews. The bill was engrossed by the House of Representatives on a vote of 153-0 on June 20.

Representative Kane noted that House Bill 4773 incorporates recommendations made by the Special Commission on Racial Inequities in Maternal Health, which was created in 2021 to investigate and study ways to reduce or eliminate racial inequities in maternal mortality and severe maternal morbidity in the Commonwealth. According to the State House News Service, from 2011 to 2020 the severe maternal morbidity rate in Massachusetts nearly doubled, with the highest rate of complications experienced by Black women.

According to Representative Kane, House Bill 4773 establishes a Board of Registration in Midwifery, which will be responsible for establishing and administering the licensure process for midwives, including establishing an exam and processing applications and renewals. All applicants must complete a formal midwifery education and training program, possess a valid certified professional midwife credential from the North American Registry of Midwives (NARM), and satisfactorily complete the board-required exam.

House Bill 4773 also expands the Board of Allied Health Professionals from 11 to 15 members appointed by the governor by adding 3 licensed lactation consultants and 1 additional licensed physician to the board. Representative Kane said that under the House bill, the board must establish examination procedures for the licensing of lactation consultants, with all applications required to be certified by the International Board of Lactation Consultant Examiners. The bill allows for the licensure of a lactation consultant or certified professional midwife, without examination, if they are licensed in another state that has the same requirements as Massachusetts.

Representative Kane said House Bill 4773 also establishes a task force on maternal health access and birthing patient safety in response to the increasing number of birthing facility closures. The task force will study past essential services closures for inpatient maternity units and acute-level birthing centers, and closures of community-based or office-based maternal health care, as well as patient quality and safety considerations of essential service closures of maternal care units, with a final report due by September 1, 2025.

Under the House bill, DPH will be required to establish a program to conduct an in-depth fetal and infant mortality review to help identify social, economic and systems factors associated with fetal and infant deaths

and inform public health policy programs. DPH will also be required to develop and maintain a comprehensive digital resource center on perinatal mood and anxiety disorders, which must be made available to the public.

House Bill 4773 also:

- requires the Division of Medical Assistance (DMA) to provide coverage for midwifery services including prenatal care, childbirth and postpartum care provided by a licensed midwife regardless of where the services are delivered;
- requires MassHealth and insurance policies offered in Massachusetts to cover postpartum depression screenings conducted by primary care providers, obstetricians, gynecologists, certified nurse-midwives, licensed midwives, and pediatricians;
- requires DPH to promulgate revised regulations governing the operation of licensed freestanding birth centers to ensure safe, equitable and accessible birth options;
- directs the Commissioner of Public Health to develop and distribute materials to the public regarding pregnancy loss and the accessibility of the range of evidence-based and medically-appropriate treatment options, including comprehensive mental health supports, necessary procedures and medications, and culturally responsive supports such as pregnancy-loss doula care; and
- requires MassHealth to cover cell-free DNA-based testing to detect whether a pregnancy is at increased risk for chromosomal abnormalities such as Down Syndrome, Edwards Syndrome, or Patau Syndrome, for all pregnant patients regardless of age, baseline risk, or family history.

During floor debate, the House adopted several amendments to the bill, including proposals to:

- add Duchenne muscular dystrophy to the list of diseases for which physicians must screen newborn children and require the advisory committee on newborn screening to convene at least twice a year;
- require DMA to provide coverage for services rendered by a certified nurse midwife equal to the payment rate for the same service if performed by a physician;
- amend the definition of low-risk pregnancy to specify that it involves no maternal or fetal factors that place the pregnancy at significantly increased risk for complications;
- allow directors of clinical affairs at birth centers to be licensed midwives as well as certified nurse-midwives;
- require employers to provide earned sick time for employees to address their own physical and mental health needs, and those of their spouse, if the employee or the employee's spouse experiences pregnancy loss or a failed assisted reproduction, adoption or surrogacy;
- direct the Commissioner of Public Health to develop procedures for information related to miscarriage and pregnancy loss in multiple languages, including Spanish, Portuguese, Mandarin, Cantonese, Haitian Creole, and other commonly spoken languages in the Commonwealth;
- provide insurance coverage for the provision of medically necessary pasteurized donor human milk and donor human milk-derived products; and
- expand the Maternal Mortality and Morbidity Review Committee by adding the assistant secretary of MassHealth or their designee, as well as the executive director of the Healthy Policy Commission or their designee, and authorize the committee to request and receive information it deems necessary from relevant agencies, including the Executive Office of Health and Human Services, the Executive Office of Public Safety and Security, the Center for Health Information Analysis, the Office of Patient Protection, and any other health care facility or provider.

House Bill 4773, as amended, now moves to the Senate for its consideration.

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