

**Senate Bill No. 407**

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Passed the Senate September 1, 2015

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*Secretary of the Senate*

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Passed the Assembly August 27, 2015

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*Chief Clerk of the Assembly*

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This bill was received by the Governor this \_\_\_\_\_ day  
of \_\_\_\_\_, 2015, at \_\_\_\_\_ o'clock \_\_\_\_M.

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*Private Secretary of the Governor*

## CHAPTER \_\_\_\_\_

An act to amend Section 14134.5 of the Welfare and Institutions Code, relating to Medi-Cal.

## LEGISLATIVE COUNSEL'S DIGEST

SB 407, Morrell. Comprehensive Perinatal Services Program: licensed midwives.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services, including comprehensive perinatal services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law, to the extent that federal financial participation is available, requires that midwifery services provided by a licensed midwife be covered under the Medi-Cal program.

Existing law, the Licensed Midwifery Practice Act of 1993, provides for the licensure of midwives by the Medical Board of California. Existing law authorizes a licensed midwife to assist a woman only in normal pregnancy and childbirth, which is defined as meeting specified conditions, including, among others, a pregnancy in which there is an absence of any preexisting maternal disease or condition likely to affect the pregnancy and of significant disease arising from the pregnancy. Existing law requires the board to adopt regulations further specifying those conditions.

Existing law establishes the Comprehensive Perinatal Services Program, administered by the State Department of Public Health, to maintain, to the extent resources are available, a permanent statewide community-based comprehensive perinatal system to provide care and services to low-income pregnant women and their infants who are considered underserved in terms of comprehensive perinatal care. Existing law generally authorizes a health care provider to employ or contract specified practitioners, including physicians and certified nurse midwives, for the purpose of providing comprehensive perinatal services.

This bill would additionally authorize a health care provider to employ or contract licensed midwives for the purpose of providing

comprehensive perinatal services. The bill would provide that, on the effective date of the regulations adopted by the board pursuant to the provisions described above, a licensed midwife shall be eligible to serve as a “comprehensive perinatal provider,” as defined. The bill would declare that its provisions shall not be construed to revise or expand the scope of practice, as defined, of licensed midwives. The bill would require the State Department of Health Care Services to commence, no later than March 1, 2016, the revision of existing regulations as it determines are necessary for the implementation of this bill.

*The people of the State of California do enact as follows:*

SECTION 1. Section 14134.5 of the Welfare and Institutions Code is amended to read:

14134.5. All of the following provisions apply to the provision of services pursuant to subdivision (u) of Section 14132:

(a) “Comprehensive perinatal provider” means any general practice physician, family practice physician, obstetrician-gynecologist, pediatrician, certified nurse midwife, a group, any of whose members is one of the above-named providers, or any preferred provider organization or clinic enrolled in the Medi-Cal program and certified pursuant to the standards of this section.

(b) “Perinatal” means the period from the establishment of pregnancy to one month following delivery.

(c) “Comprehensive perinatal services” shall include, but not be limited to, the provision of the combination of services developed through the former Department of Health Services Obstetrical Access Pilot Program provided or coordinated by a comprehensive perinatal provider.

(d) The comprehensive perinatal provider shall schedule visits with appropriate providers and shall track the patient to verify whether services have been received. As part of the reimbursement for coordinating these services, the comprehensive perinatal provider shall ensure the provision of the following services either through the provider’s own service or through subcontracts or referrals to other providers:

(1) A psychosocial assessment and when appropriate referrals to counseling.

(2) Nutrition assessments and when appropriate referral to counseling on food supplement programs, vitamins, and breastfeeding.

(3) Health, childbirth, and parenting education.

(e) (1) Except where existing law prohibits the employment of physicians, a health care provider may employ or contract with all of the following medical and other practitioners for the purpose of providing the comprehensive services delineated in this section:

(A) Physicians, including a general practitioner, a family practice physician, a pediatrician, or an obstetrician-gynecologist.

(B) Certified nurse midwives.

(C) Licensed midwives.

(D) Nurses.

(E) Nurse practitioners.

(F) Physician assistants.

(G) Social workers.

(H) Health and childbirth educators.

(I) Registered dietitians.

(2) The department shall adopt regulations that define the qualifications of any of these practitioners who are not currently included under the regulations adopted pursuant to this chapter. Providers shall, as feasible, utilize staffing patterns that reflect the linguistic and cultural features of the populations they serve.

(f) The California Medical Assistance Program and the Maternal and Child Health Branch of the State Department of Public Health in consultation with the California Conference of Local Health Officers shall establish standards for health care providers and for services rendered pursuant to this subdivision.

(g) The department shall assist local health departments to establish a community perinatal program whose responsibilities may include certifying and monitoring providers of comprehensive perinatal services. The department shall provide the local health departments with technical assistance for the purpose of implementing the community perinatal program. The department shall, to the extent feasible, and to the extent funding for administrative costs is available, utilize local health departments in the administration of the perinatal program. If these funds are not available, the department shall use alternative means to implement the community perinatal program.

(h) (1) It is the intent of the Legislature that the department shall establish a method for reimbursement of comprehensive perinatal providers that shall include a fee for coordinating services and shall be sufficient to cover reasonable costs for the provision of comprehensive perinatal services. The department may utilize fees for service, capitated fees, or global fees to reimburse providers. However, if capitated or global fees are established, the department shall set minimum standards for the provision of services including, but not limited to, the number of prenatal visits and the amount and type of psychosocial, nutritional, and educational services patients shall receive.

(2) Notwithstanding the type of reimbursement system, the comprehensive perinatal provider shall not be financially at risk for the provision of inpatient services. The provision of inpatient services that are not related to perinatal care shall not be subject to the provisions of this section. Inpatient services related to services pursuant to this subdivision shall be reimbursed, in accordance with Section 14081, 14086, 14087, or 14087.2, whichever is applicable.

(i) The department shall develop systems for the monitoring and oversight of the comprehensive perinatal services provided in this section. The monitoring shall include, but shall not be limited to, the collection of information using the perinatal data form.

(j) Participation for services provided pursuant to this section shall be voluntary. The department shall adopt patient rights safeguards for recipients of the comprehensive perinatal services.

(k) The amendments made to this section by the act that added this subdivision shall not be construed to revise or expand the scope of practice of licensed midwives, as defined in Article 24 (commencing with Section 2505) of Chapter 5 of Division 2 of the Business and Professions Code.

(l) Notwithstanding subdivision (a), on the effective date of the regulations adopted by the Medical Board of California pursuant to Section 2507 of the Business and Professions Code, a licensed midwife shall be eligible to serve as a comprehensive perinatal provider.

SEC. 2. The State Department of Health Care Services shall commence, no later than March 1, 2016, the revision of existing regulations as it determines are necessary for the implementation of the amendments made to Section 14134.5 of the Welfare and

Institutions Code by this act, in accordance with the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code).



Approved \_\_\_\_\_, 2015

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*Governor*