

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 550

BY HEALTH AND WELFARE COMMITTEE

AN ACT

1 RELATING TO MIDWIFERY; AMENDING SECTION 54-5504, IDAHO CODE, TO REVISE CER-  
2 TAIN RULEMAKING AUTHORITY; AMENDING CHAPTER 55, TITLE 54, IDAHO CODE,  
3 BY THE ADDITION OF A NEW SECTION 54-5504A, IDAHO CODE, TO PROVIDE THAT A  
4 LICENSED MIDWIFE MAY OBTAIN AND ADMINISTER ANY MEDICATION INDICATED FOR  
5 MATERNAL CARE OR NEONATAL CARE FOR WHICH THE MIDWIFE POSSESSES THE REQ-  
6 UISITE EDUCATION, TRAINING, AND EXPERIENCE; AMENDING SECTION 54-5510,  
7 IDAHO CODE, TO PROVIDE CORRECT CODE REFERENCES; PROVIDING THAT CERTAIN  
8 ADMINISTRATIVE RULES CONTAINED IN IDAPA 24.26.01. SHALL BE NULL, VOID,  
9 AND OF NO FORCE AND EFFECT; AND DECLARING AN EMERGENCY AND PROVIDING AN  
10 EFFECTIVE DATE.  
11

12 Be It Enacted by the Legislature of the State of Idaho:

13 SECTION 1. That Section 54-5504, Idaho Code, be, and the same is hereby  
14 amended to read as follows:

15 54-5504. RULEMAKING. (1) The rules adopted by the board shall:

16 ~~(a) Allow a midwife to obtain and administer, during the practice of~~  
17 ~~midwifery, the following:~~

18 ~~(i) Oxygen;~~

19 ~~(ii) Oxytocin, misoprostol, and methylergonovine as postpartum~~  
20 ~~antihemorrhagic agents;~~

21 ~~(iii) Injectable local anesthetic for the repair of lacerations~~  
22 ~~that are no more extensive than second degree;~~

23 ~~(iv) Antibiotics to the mother for group b streptococcus prophylaxis~~  
24 ~~consistent with guidelines of the United States centers for~~  
25 ~~disease control and prevention;~~

26 ~~(v) Epinephrine to the mother administered for anaphylactic~~  
27 ~~shock;~~

28 ~~(vi) Intravenous fluids for stabilization of the mother;~~

29 ~~(vii) Rho (D) immune globulin;~~

30 ~~(viii) Phytonadione; and~~

31 ~~(ix) Eye prophylactics to the child.~~

32 ~~(b) Prohibit the use of other legend drugs, except those of a similar~~  
33 ~~nature and character as determined by the board to be consistent with~~  
34 ~~the practice of midwifery; provided that at least one hundred twenty~~  
35 ~~(120) days' advance notice of the proposal to allow the use of such drugs~~  
36 ~~is given to the board of pharmacy and the board of medicine and neither~~  
37 ~~board objects to the addition of such drugs to the midwifery formulary;~~

38 ~~(c) (a) Define a protocol for use by licensed midwives of drugs approved~~  
39 ~~in paragraphs (a) and (b) of this subsection indicated for maternal~~  
40 ~~care or neonatal care, as provided for in section 54-5504A, Idaho Code,~~  
41 ~~that shall include methods of obtaining, storing, and disposing of such~~

1 drugs and an indication for use, dosage, route of administration, and  
2 duration of treatment;

3 ~~(d)~~ (b) Define a protocol for medical waste disposal; and

4 ~~(e)~~ (c) Establish scope and practice standards for antepartum, intra-  
5 partum, postpartum, and newborn care that shall, at a minimum:

6 (i) Prohibit a licensed midwife from providing care for a client  
7 with a history of disorders, diagnoses, conditions, or symptoms  
8 that include:

- 9 1. Placental abnormality;
- 10 2. Multiple gestation, except that midwives may provide an-  
11 tepartum care that is supplementary to the medical care of  
12 the physician overseeing the pregnancy, as long as it does  
13 not interfere with the physician's recommended schedule of  
14 care;
- 15 3. Noncephalic presentation at the onset of labor or rupture  
16 of membranes, whichever occurs first;
- 17 4. Birth under thirty-seven and zero-sevenths (37 0/7)  
18 weeks and beyond forty-two and zero-sevenths (42 0/7) weeks  
19 gestational age;
- 20 5. A history of more than one (1) prior cesarean section,  
21 a cesarean section within eighteen (18) months of the esti-  
22 mated due date or any cesarean section that was surgically  
23 closed with a classical or vertical uterine incision;
- 24 6. Platelet sensitization, hematological, or coagulation  
25 disorders;
- 26 7. A body mass index of forty (40.0) or higher at the time of  
27 conception;
- 28 8. Prior chemotherapy and/or radiation treatment for a ma-  
29 lignancy;
- 30 9. Previous preeclampsia resulting in premature delivery;
- 31 10. Cervical insufficiency;
- 32 11. HIV positive status; or
- 33 12. Opiate use that places the infant at risk of neonatal ab-  
34 stinence syndrome.

35 (ii) Prohibit a licensed midwife from providing care for a client  
36 with a history of the following disorders, diagnoses, conditions,  
37 or symptoms, unless such disorders, diagnoses, conditions, or  
38 symptoms are being treated, monitored, or managed by a licensed  
39 health care provider:

- 40 1. Diabetes;
- 41 2. Thyroid disease;
- 42 3. Epilepsy;
- 43 4. Hypertension;
- 44 5. Cardiac disease;
- 45 6. Pulmonary disease;
- 46 7. Renal disease;
- 47 8. Gastrointestinal disorders;
- 48 9. Previous major surgery of the pulmonary system, cardio-  
49 vascular system, urinary tract, or gastrointestinal tract;
- 50 10. Abnormal cervical cytology;

- 1 11. Sleep apnea;
- 2 12. Previous bariatric surgery;
- 3 13. Hepatitis;
- 4 14. History of illegal drug use or excessive prescription
- 5 drug use; or
- 6 15. Rh or other blood group disorders and a physician deter-
- 7 mines the pregnancy can safely be attended by a midwife.

8 (iii) Require a licensed midwife to recommend that a client see  
 9 a physician licensed pursuant to chapter 18, title 54, Idaho  
 10 Code, or an equivalent provision of the law of a state bordering  
 11 Idaho and to document and maintain a record as required by section  
 12 54-5510, Idaho Code, if such client has a history of disorders,  
 13 diagnoses, conditions, or symptoms that include:

- 14 1. Previous complicated pregnancy;
- 15 2. Previous cesarean section;
- 16 3. Previous pregnancy loss in second or third trimester;
- 17 4. Previous spontaneous premature labor;
- 18 5. Previous preterm rupture of membranes;
- 19 6. Previous preeclampsia;
- 20 7. Previous hypertensive disease of pregnancy;
- 21 8. Parvo;
- 22 9. Toxo;
- 23 10. CMV;
- 24 11. HSV;
- 25 12. Previous maternal/newborn group b streptococcus infec-
- 26 tion;
- 27 13. A body mass index of at least thirty-five (35.0) but less
- 28 than forty (40.0) at the time of conception;
- 29 14. Underlying family genetic disorders with potential for
- 30 transmission; or
- 31 15. Psychosocial situations that may complicate pregnancy.

32 (iv) Require that a licensed midwife facilitate the immediate  
 33 transfer to a hospital for emergency care for disorders, diag-  
 34 noses, conditions, or symptoms that include:

- 35 1. Maternal fever in labor;
- 36 2. Suggestion of fetal jeopardy, such as bleeding or meco-
- 37 nium or abnormal fetal heart tones;
- 38 3. Noncephalic presentation at the onset of labor or rup-
- 39 ture of membranes, whichever occurs first, unless imminent
- 40 delivery is safer than transfer;
- 41 4. Second-stage labor after two (2) hours of initiation of
- 42 pushing when the mother has had a previous cesarean section;
- 43 5. Current spontaneous premature labor;
- 44 6. Current preterm premature rupture of membranes;
- 45 7. Current preeclampsia;
- 46 8. Current hypertensive disease of pregnancy;
- 47 9. Continuous uncontrolled bleeding;
- 48 10. Bleeding that necessitates the administration of more
- 49 than two (2) doses of oxytocin or other antihemorrhagic

1 ~~agent~~ does not respond to the administration of antihemor-  
 2 rhagic agents;

3 11. Delivery injuries to the bladder or bowel;

4 12. Grand mal seizure;

5 13. Uncontrolled vomiting;

6 14. Coughing or vomiting of blood;

7 15. Severe chest pain; or

8 16. Sudden onset of shortness of breath and associated la-  
 9 bored breathing.

10 A transfer of care shall be accompanied by the client's medical  
 11 record, the licensed midwife's assessment of the client's current  
 12 condition, and a description of the care provided by the licensed  
 13 midwife prior to transfer;

14 (v) Establish a written plan for the emergency transfer and  
 15 transport required in subparagraph (iv) of this paragraph and for  
 16 notifying the hospital to which a client will be transferred in  
 17 the case of an emergency. If a client is transferred in an emer-  
 18 gency, the licensed midwife shall notify the hospital when the  
 19 transfer is initiated and accompany the client to the hospital if  
 20 feasible, or communicate by telephone with the hospital if unable  
 21 to be present personally, and shall provide the client's medi-  
 22 cal record. The record shall include the client's name, address,  
 23 list of diagnosed medical conditions, list of prescription or  
 24 over-the-counter medications regularly taken, history of previ-  
 25 ous allergic reactions to medications, if feasible, the client's  
 26 current medical condition and description of the care provided by  
 27 the midwife, and next-of-kin contact information. A midwife who  
 28 deems it necessary to transfer or terminate care pursuant to this  
 29 section and any rules promulgated pursuant to this section or for  
 30 any other reason shall transfer or terminate care and shall not be  
 31 regarded as having abandoned care or wrongfully terminated ser-  
 32 vices. Before nonemergent discontinuing of services, the midwife  
 33 shall notify the client in writing, provide the client with names  
 34 of licensed physicians and contact information for the nearest  
 35 hospital emergency room, and offer to provide copies of medical  
 36 records regardless of whether copying costs have been paid by the  
 37 client.

38 ~~(f)~~ (d) Establish and operate a system of peer review for licensed  
 39 midwives that shall include but not be limited to the appropriateness,  
 40 quality, utilization, and ethical performance of midwifery care.

41 (2) The rules adopted by the board may not:

42 (a) Require a licensed midwife to have a nursing degree or diploma;

43 (b) Except as a condition imposed by disciplinary proceedings by the  
 44 board, require a licensed midwife to practice midwifery under the su-  
 45 pervision of another health care provider;

46 (c) Except as a condition imposed by disciplinary proceedings by the  
 47 board, require a licensed midwife to enter into an agreement, written or  
 48 otherwise, with another health care provider;

49 (d) Limit the location where a licensed midwife may practice midwifery;

1 (e) Allow a licensed midwife to use vacuum extraction or forceps as an  
2 aid in the delivery of a newborn;

3 (f) Grant a licensed midwife prescriptive privilege; or

4 (g) Allow a licensed midwife to perform abortions.

5 SECTION 2. That Chapter 55, Title 54, Idaho Code, be, and the same is  
6 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
7 ignated as Section 54-5504A, Idaho Code, and to read as follows:

8 54-5504A. MEDICATIONS. A licensed midwife may obtain and administer  
9 any medication indicated for maternal care or neonatal care for which the  
10 midwife possesses the requisite education, training, and experience. Ad-  
11 ministration of such medication shall be performed within the acceptable  
12 community standard of care.

13 SECTION 3. That Section 54-5510, Idaho Code, be, and the same is hereby  
14 amended to read as follows:

15 54-5510. DISCLOSURE AND RECORDKEEPING -- LICENSE RENEWAL. (1) Before  
16 initiating care, a licensed midwife shall obtain a signed informed consent  
17 agreement from each client, acknowledging receipt, at a minimum, of the fol-  
18 lowing:

19 (a) The licensed midwife's training and experience;

20 (b) Instructions for obtaining a copy of the rules adopted by the board  
21 pursuant to this chapter;

22 (c) Instructions for obtaining a copy of the NACPM essential documents  
23 and NARM job description;

24 (d) Instructions for filing complaints with the board;

25 (e) Notice of whether or not the licensed midwife has professional lia-  
26 bility insurance coverage;

27 (f) A written protocol for emergencies, including hospital transport,  
28 that is specific to each individual client;

29 (g) A description of the procedures, benefits, and risks of home birth,  
30 primarily those conditions that may arise during delivery; and

31 (h) Any other information required by board rule.

32 (2) All licensed midwives shall maintain a record of all signed in-  
33 formed consent agreements for each client for a minimum of nine (9) years  
34 after the last day of care for such client.

35 (3) Before providing care for a client who has a history of disorders,  
36 diagnoses, conditions, or symptoms identified in section ~~54-5504(1)(e)(ii)~~  
37 54-5504(1)(c)(ii), Idaho Code, the licensed midwife shall provide writ-  
38 ten notice to the client that the client must obtain care from a physician  
39 licensed pursuant to chapter 18, title 54, Idaho Code, as a condition  
40 to her eligibility to obtain maternity care from the licensed midwife.  
41 Before providing care for a client who has a history of disorders, diag-  
42 noses, conditions, or symptoms identified in section ~~54-5504(1)(e)(iii)~~  
43 54-5504(1)(c)(iii), Idaho Code, or who has had a previous cesarean section,  
44 the licensed midwife shall provide written notice to the client that the  
45 client is advised to consult with a physician licensed pursuant to chapter  
46 18, title 54, Idaho Code, during her pregnancy. The midwife shall obtain the  
47 client's signed acknowledgment of receipt of said notice.

1 (4) Any licensed midwife submitting an application to renew a license  
2 shall compile and submit to the board complete practice data for the calendar  
3 year preceding the date of the application. Such information shall be pro-  
4 vided in form and content as prescribed by rule of the board and shall include  
5 but not be limited to:

6 (a) The number of clients to whom care has been provided by the licensed  
7 midwife;

8 (b) The number of deliveries performed by the licensed midwife;

9 (c) The apgar scores of the infants delivered by the licensed midwife;

10 (d) The number of prenatal transfers;

11 (e) The number of transfers during labor, during delivery, and immedi-  
12 ately following birth;

13 (f) Any perinatal deaths; and

14 (g) Other morbidity statistics as required by the board.

15 SECTION 4. The rules contained in IDAPA 24.26.01., Idaho Board of Mid-  
16 wifery, relating to Protocols for the Use of Formulary Drugs, Section 200.,  
17 Subsection 01., shall be null, void, and of no force and effect on and after  
18 July 1, 2026.

19 SECTION 5. An emergency existing therefor, which emergency is hereby  
20 declared to exist, this act shall be in full force and effect on and after  
21 July 1, 2026.