MEDICAL BOARD OF CALIFORNIA

DATE REPORT ISSUED: ATTENTION: SUBJECT: CONTACT: January 4, 2016 Board Members Midwifery Advisory Council (MAC) Chair Report Carrie Sparrevohn, L.M., Chair

REQUESTED ACTION:

Approval of the following agenda items is requested for the next MAC meeting:

- ➤ Task Force Update:
 - Update on Revisions to Licensed Midwife Annual Report (LMAR)
- Update on continuing regulatory efforts required by Assembly Bill (AB) 1308
- > Update on midwifery related legislation expected to be introduced or followed this year
- Discussion and approval of MAC member positions that are at the end of their terms
- Update on the midwifery program
- Update on progress with midwifery assistant regulations
- Report from California Association of Midwives on data gathered regarding ability of licensed midwives to consult or collaborate as required by AB 1308
- Report on current national and international data related to vaginal birth after one or more prior cesarean sections

BACKGROUND:

The last MAC meeting was held on December 3, 2015. At this meeting, the MAC was updated by Staff regarding recommendations for moving forward with changes to the LMAR. It appears that no changes will be able to be made prior to the 2017 reporting year. The MAC received an update on regulations that will be required pursuant to the passage of Senate Bill (SB) 408 (Morrel) - Midwife Assistants. The MAC also received an update on the passage of SB 407 (Morrel) - Comprehensive Perinatal Services Program: Licensed Midwives. This important legislation will allow licensed midwives to provide care to California's low income population of birthing families and be reimbursed for that care under the Comprehensive Perinatal Services Program (CPSP).

The MAC heard updates on the continuing efforts to craft regulations required by AB 1308 (Bonilla, Chapter 665, Statutes of 2013). The interested parties continue to work on coming to an agreement on language required by Business and Professions Code Section 2507 (b)(1)(A)(i) and (ii), essentially the development of a list of conditions requiring a referral to a physician for consultation and a determination that the risk factors presented by the woman's disease or condition are not likely to significantly affect the course of pregnancy or childbirth, prior to the midwife continuing care for a particular client. The point of disagreement continues to focus on care for women who have had a prior cesarean. The MAC is asking for several reports at its March meeting to better discern the direction these regulations should take so they best serve and protect the birthing families of the state without creating an undue burden on them.