CERTIFICATION OF ENROLLMENT

SUBSTITUTE SENATE BILL 5765

Chapter 289, Laws of 2022

67th Legislature
2022 Regular Session

MIDWIFERY—VARIOUS PROVISIONS

EFFECTIVE DATE: June 9, 2022

Passed by the Senate February 14, 2022
Yeas 27  Nays 20

DENNY HECK
President of the Senate

Passed by the House March 3, 2022
Yeas 61  Nays 37

LAURIE JINKINS
Speaker of the House of Representatives

Approved March 31, 2022 4:56 PM

CERTIFICATE

I, Sarah Bannister, Secretary of the Senate of the State of Washington, do hereby certify that the attached is SUBSTITUTE SENATE BILL 5765 as passed by the Senate and the House of Representatives on the dates hereon set forth.

SARAH BANNISTER
Secretary

FILED

April 1, 2022

JAY INSLEE
Governor of the State of Washington

Secretary of State
State of Washington
AN ACT Relating to the practice of midwifery; and amending RCW 18.50.005, 18.50.010, 18.50.040, 18.50.102, 18.50.108, and 18.50.115.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

Sec. 1. RCW 18.50.005 and 1991 c 3 s 102 are each amended to read as follows:

Unless the context clearly requires otherwise, the definitions in this section apply throughout this chapter:

(1) "Advanced registered nurse practitioner" means an advanced registered nurse practitioner licensed under chapter 18.79 RCW.

(2) "Department" means the department of health.

(3) "Secretary" means the secretary of health.

(4) "Midwife" means a midwife licensed under this chapter.

(5) "Naturopath" means a naturopath licensed under chapter 18.36A RCW.

(6) "Physician" means a physician licensed under chapter 18.57 or 18.71 RCW.

(7) "Physician assistant" means a physician assistant licensed under chapter 18.71A RCW.
Sec. 2. RCW 18.50.010 and 2014 c 187 s 1 are each amended to read as follows:

Any person shall be regarded as practicing midwifery within the meaning of this chapter who shall render medical aid for a fee or compensation to (a woman) individuals during prenatal, intrapartum, and postpartum stages or to (her) the individual's newborn up to two weeks of age or who shall advertise as a midwife by signs, printed cards, or otherwise. Nothing shall be construed in this chapter to prohibit gratuitous services. It shall be the duty of a midwife to consult with a physician whenever there are significant deviations from normal in either the (mother) gestational parent or the newborn.

Sec. 3. RCW 18.50.040 and 1994 sp.s. c 9 s 705 are each amended to read as follows:

(1) Any person seeking to be examined shall present to the secretary, at least (forty-five) 45 days before the commencement of the examination, a written application on a form or forms provided by the secretary setting forth under affidavit such information as the secretary may require and proof the candidate has received a high school degree or its equivalent; that the candidate is (twenty-one) 21 years of age or older; that the candidate has received a certificate or diploma from a midwifery program accredited by the secretary and licensed under chapter 28C.10 RCW, when applicable, or a certificate or diploma in a foreign institution on midwifery of equal requirements conferring the full right to practice midwifery in the country in which it was issued. The diploma must bear the seal of the institution from which the applicant (was) graduated. Foreign candidates must present with the application a translation of the foreign certificate or diploma (made by and under the seal of the consulate of the country in which the certificate or diploma was issued).

(2) The candidate shall meet the following conditions:

(a) Obtaining a minimum period of midwifery training for at least three years including the study of the basic nursing skills that the department shall prescribe by rule. However, if the applicant is a registered nurse or licensed practical nurse under chapter 18.79 RCW, or has had previous nursing education or practical midwifery experience, the required period of training may be reduced depending upon the extent of the candidate's qualifications as determined under
rules adopted by the department. In no case shall the training be reduced to a period of less than two years.

(b) Meeting minimum educational requirements which shall include studying midwifery; obstetrics; neonatal pediatrics; basic sciences; ((female)) reproductive anatomy and physiology; behavioral sciences; childbirth education; community care; obstetrical pharmacology; epidemiology; gynecology; family planning; genetics; embryology; neonatology; the medical and legal aspects of midwifery; nutrition during pregnancy and lactation; ((breastfeeding)) lactation; nursing skills, including but not limited to injections, administering intravenous fluids, catheterization, and aseptic technique; and such other requirements prescribed by rule.

(c) For a student midwife during training, undertaking the care of not less than ((fifty women)) 50 individuals in each of the prenatal, intrapartum, and early postpartum periods, but the same ((women)) individuals need not be seen through all three periods. A student midwife may be issued a permit upon the satisfactory completion of the requirements in (a), (b), and (c) of this subsection and the satisfactory completion of the licensure examination required by RCW 18.50.060. The permit permits the student midwife to practice under the supervision of a midwife licensed under this chapter, a physician, or a certified nurse-midwife licensed under the authority of chapter 18.79 RCW. The permit shall expire within one year of issuance and may be extended as provided by rule.

(d) Observing an additional ((fifty women)) 50 individuals in the intrapartum period before the candidate qualifies for a license.

(e) For candidates seeking a limited prescriptive license extension, completion of additional study and training requirements as prescribed by the department, in collaboration with the Washington medical commission and the midwifery advisory committee, in rule. Such rules shall provide requirements for:

(i) The number of additional obstetrical pharmacology training hours consistent with the training hours required for other similar prescribers; and

(ii) Additional training consistent with guidelines commensurate with other professions providing family planning and treating common prenatal and postpartum conditions and any other relevant sources.

(f) For candidates seeking a licensing extension to include medical devices and implants, completion of the requirements listed in (e) of this subsection and additional study and training
requirements as prescribed by the department, in collaboration with the Washington medical commission and the midwifery advisory committee, in rule. Such rules shall provide requirements for:

(i) The minimum number of completed procedures under supervision;
(ii) Completing trainings as required by the device manufacturers or an equivalent; and
(iii) Additional training consistent with guidelines commensurate with other professions providing family planning and treating common prenatal and postpartum conditions and any other relevant sources.

(g) The license extensions referenced in (e) and (f) of this subsection do not apply to newborn care.

(3) Notwithstanding subsections (1) and (2) of this section, the department shall adopt rules to provide credit toward the educational requirements for licensure before July 1, 1988, of (nonlicensed) midwives who are not licensed in Washington, including rules to provide:

(a) Credit toward licensure for documented deliveries;
(b) The substitution of relevant experience for classroom time; and
(c) That experienced lay midwives may sit for the licensing examination without completing the required coursework.

The training required under this section shall include training in (either hospitals or alternative birth settings or both) any birth setting with particular emphasis on learning the ability to differentiate between low-risk and high-risk pregnancies.

Sec. 4. RCW 18.50.102 and 2014 c 187 s 3 are each amended to read as follows:

(1) A licensed midwife must renew (his or her) the individual's license according to the following requirements:

(a) Completion of a minimum of (thirty) 30 hours of continuing education, approved by the secretary, every three years;
(b) Proof of participation in a Washington state coordinated quality improvement program as detailed in rule;
(c) Proof of participation in data submission on perinatal outcomes to a national or state research organization, as detailed in rule; and
(d) Fees determined by the secretary as provided in RCW 43.70.250 and 43.70.280.
(2) The secretary shall write rules regarding the renewal requirements and the department's process for verification of the third-party data submission.

Sec. 5. RCW 18.50.108 and 1981 c 53 s 14 are each amended to read as follows:

Every licensed midwife shall develop a written plan for consultation with other health care providers, emergency transfer, transport of an infant to a newborn nursery or neonatal intensive care nursery, and transport of (a woman) an individual to an appropriate obstetrical department or patient care area. The written plan shall be submitted annually together with the license renewal fee to the department.

Sec. 6. RCW 18.50.115 and 2019 c 55 s 1 are each amended to read as follows:

(1) A midwife licensed under this chapter may obtain and administer prophylactic ophthalmic medication, postpartum oxytocic, vitamin K, Rho immune globulin (human), and local anesthetic and may administer such other drugs or medications as prescribed by a physician, an advanced registered nurse practitioner, a naturopath, or a physician assistant acting within the practitioner's scope of practice. A pharmacist who dispenses such drugs to a licensed midwife shall not be liable for any adverse reactions caused by any method of use by the midwife.

(2) A midwife licensed under this chapter who has been granted a limited prescriptive license extension by the secretary may prescribe, obtain, and administer:

(a) Antibiotic, antiemetic, antiviral, antifungal, low-potency topical steroid, and antipruritic medications and therapies, and other medications and therapies as defined in the midwifery legend drugs and devices rule for the prevention and treatment of conditions that do not constitute a significant deviation from normal in pregnancy or postpartum; and

(b) Hormonal and nonhormonal family planning methods.

(3) A midwife licensed under this chapter who has been granted an additional license extension to include medical devices and implants by the secretary may prescribe, obtain, and administer hormonal and nonhormonal family planning medical devices, as prescribed in rule.

p. 5 SSB 5765.SL
(4) The secretary, after collaboration with representatives of the midwifery advisory committee, the pharmacy quality assurance commission, and the Washington medical commission, may adopt rules that authorize licensed midwives to prescribe, obtain, and administer legend drugs and devices in addition to the drugs authorized in this chapter.

Passed by the Senate February 14, 2022.  
Passed by the House March 3, 2022.  
Approved by the Governor March 31, 2022.  
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