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THE GENERAL ASSEMBLY OF PENNSYLVANIA

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SENATE BILL

No. 1262 Session of  
2024

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INTRODUCED BY BROWN, BAKER, VOGEL, BREWSTER, COSTA, FONTANA,  
J. WARD, SCHWANK, CAPPELLETTI, HAYWOOD, SAVAL AND COMITTA,  
JUNE 24, 2024

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REFERRED TO CONSUMER PROTECTION AND PROFESSIONAL LICENSURE,  
JUNE 24, 2024

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AN ACT

1 Amending the act of December 20, 1985 (P.L.457, No.112),  
2 entitled "An act relating to the right to practice medicine  
3 and surgery and the right to practice medically related acts;  
4 reestablishing the State Board of Medical Education and  
5 Licensure as the State Board of Medicine and providing for  
6 its composition, powers and duties; providing for the  
7 issuance of licenses and certificates and the suspension and  
8 revocation of licenses and certificates; provided penalties;  
9 and making repeals," further providing for definitions, for  
10 midwifery and for nurse-midwife license; and providing for  
11 certified midwife license.

12 The General Assembly of the Commonwealth of Pennsylvania  
13 hereby enacts as follows:

14 Section 1. The definitions of "medical training facility"  
15 and "midwife or nurse-midwife" in section 2 of the act of  
16 December 20, 1985 (P.L.457, No.112), known as the Medical  
17 Practice Act of 1985, are amended to read:

18 Section 2. Definitions.

19 The following words and phrases when used in this act shall  
20 have the meanings given to them in this section unless the  
21 context clearly indicates otherwise:

1 \* \* \*

2 "Medical training facility." A medical college, hospital or  
3 other institution which provides courses in the art and science  
4 of medicine and surgery and related subjects for the purpose of  
5 enabling a matriculant to qualify for a license to practice  
6 medicine and surgery, graduate medical training, [midwife]  
7 nurse-midwife certificate or physician assistant license.

8 \* \* \*

9 "Midwife [or nurse-midwife]." An individual who is licensed  
10 as a [midwife] nurse-midwife under section 35 or a certified  
11 midwife under section 35.1 by the board.

12 \* \* \*

13 Section 2. Section 12(b) of the act is amended to read:  
14 Section 12. Midwifery.

15 \* \* \*

16 (b) Use of title.--A [midwife may ] nurse-midwife and a  
17 certified midwife may also use the title midwife[, nurse-  
18 midwife] or an appropriate abbreviation of [those titles] the  
19 title.

20 \* \* \*

21 Section 3. Section 35(c) and (d) of the act are amended and  
22 the section is amended by adding subsections to read:  
23 Section 35. Nurse-midwife license.

24 \* \* \*

25 (c) Authorization.--

26 (1) A nurse-midwife is authorized to practice midwifery  
27 [pursuant to a collaborative agreement with a physician and  
28 regulations promulgated by the board.] under the following  
29 conditions:

30 (i) A nurse-midwife who is not an employee of a

1 public or private health system, hospital, licensed birth  
2 center or part of an interdisciplinary group practice in  
3 which at least one physician practices in the specialty  
4 area of the care the nurse-midwife will provide, shall  
5 practice pursuant to a collaborative agreement with a  
6 physician or physician interdisciplinary group practice  
7 in accordance with the regulations promulgated by the  
8 board.

9 (ii) A nurse-midwife who is an employee of a public  
10 or private health system, hospital, licensed birth center  
11 or part of an interdisciplinary group practice in which  
12 at least one physician practices in the specialty area of  
13 the care the nurse-midwife will provide, shall obtain and  
14 maintain clinical staff privileges at the public or  
15 private health system, hospital, licensed birth center  
16 and shall adhere to the established internal mechanisms  
17 at the facility of the public or private health system,  
18 hospital, licensed birth center for quality improvement,  
19 consultation, collaboration or referral in accordance  
20 with the nurse-midwife's clinical practice privileges and  
21 the facility's policies and procedures as approved by the  
22 Department of Health.

23 (2) A nurse-midwife who possesses a master's degree or  
24 its substantial equivalent and national certification may  
25 prescribe, dispense, order and administer drugs, including  
26 legend drugs and Schedule II through Schedule V controlled  
27 substances, as defined in the act of April 14, 1972 (P.L.233,  
28 No.64), known as The Controlled Substance, Drug, Device and  
29 Cosmetic Act, provided that the nurse-midwife demonstrates to  
30 the board that:

1 (i) The nurse-midwife has successfully completed at  
2 least 45 hours of coursework specific to advanced  
3 pharmacology at a level above that required by a  
4 professional nursing education program.

5 (ii) As a condition of biennial license renewal by  
6 the board, a nurse-midwife shall complete the continuing  
7 education requirement as required by the act of May 22,  
8 1951 (P.L.317, No.69), known as The Professional Nursing  
9 Law. In case of a nurse-midwife who has prescriptive  
10 authority under this act, the continuing education  
11 required by The Professional Nursing Law shall include at  
12 least 16 hours in pharmacology in that two-year period.

13 [(iii) The nurse-midwife acts in accordance with a  
14 collaborative agreement with a physician which shall at a  
15 minimum identify the categories of drugs from which the  
16 nurse-midwife may prescribe or dispense and the drugs  
17 which require referral, consultation or comanagement.]

18 (iv) The nurse-midwife acts in accordance with the  
19 following restrictions:

20 (A) A nurse-midwife shall not prescribe,  
21 dispense, order or administer a controlled substance  
22 except for a woman's acute pain[.], for a woman's  
23 medication-assisted treatment for opioid use disorder  
24 or for primary gynecologic health conditions.

25 (B) In the case of a Schedule II controlled  
26 substance for acute pain, the dose shall be limited  
27 to 72 hours and shall not be extended except with the  
28 approval of the collaborating physician.

29 (C) In the case of a Schedule III or IV  
30 controlled substance, the prescription shall be

1 limited to 30 days and shall only be refilled with  
2 the approval of [the] a collaborating physician.

3 [(B) A nurse-midwife shall prescribe, dispense,  
4 order or administer psychotropic drugs only after  
5 consulting with the collaborating physician.]

6 (D) A nurse-midwife when working with a  
7 physician or physician group prescribing medication  
8 treatment for opioid use disorder may prescribe,  
9 dispense, order and administer United States Food and  
10 Drug Administration-approved prescription drugs,  
11 including buprenorphine, methadone and naltrexone,  
12 for medication-assisted treatment for opioid use  
13 disorders consistent with Federal laws and  
14 regulations.

15 (3) A nurse-midwife may, [in accordance with a  
16 collaborative agreement with a physician and] consistent with  
17 the nurse-midwife's academic educational preparation and  
18 national certification, prescribe, dispense, order and  
19 administer:

20 (i) Medical devices.

21 (ii) Immunizing agents.

22 (iii) Laboratory tests.

23 (iv) Therapeutic, diagnostic and preventative  
24 measures.

25 [(d) Collaborative agreements.--The physician with whom a  
26 nurse-midwife has a collaborative agreement shall have hospital  
27 clinical privileges in the specialty area of the care for which  
28 the physician is providing collaborative services.]

29 (e) Consultation, collaboration or referral.--

30 (1) A nurse-midwife who is an employee of a public or

1 private health system, hospital, licensed birth center or  
2 part of an interdisciplinary group practice in which at least  
3 one physician practices in the specialty area of the care the  
4 nurse-midwife will provide, shall identify deviations from  
5 normal and appropriate interventions, including the  
6 management of complications and emergencies utilizing  
7 consultation, collaboration or referral to or with a  
8 physician as indicated by the health status of a patient. A  
9 consultation between a nurse-midwife and a physician shall  
10 not alone establish a physician-patient relationship or any  
11 other legal relationship with the physician. A nurse-midwife  
12 shall be solely responsible for the services the nurse-  
13 midwife provides to a patient.

14 (2) In order to maintain safe midwifery practice during  
15 a collaboration with a physician, a nurse-midwife shall, at a  
16 minimum, take all of the following actions:

17 (i) Maintain a medical record for each patient.

18 (ii) In the case of a transfer of care to another  
19 health care provider or facility, transfer a patient's  
20 medical records to the health care provider or facility.

21 (f) Disclosures.--A nurse-midwife who is not an employee of  
22 a public or private health system, hospital, licensed birth  
23 center or part of an interdisciplinary group practice in which  
24 at least one physician practices in the specialty area of the  
25 care the midwife will provide, shall disclose, verbally and in  
26 written form, the information specified in paragraphs (1) and  
27 (2) to a prospective patient at the beginning of the  
28 professional relationship between nurse-midwife and the patient.  
29 The discussion must be documented by the use of a disclosure  
30 form. The patient shall sign and date the disclosure under this

1 subsection at the same time the nurse-midwife and patient enter  
2 into an agreement for services. The nurse-midwife shall file  
3 this disclosure under this subsection in the patient's medical  
4 record. The disclosure shall include all the following  
5 information:

6 (1) The nurse-midwife's name.

7 (2) The patient's name, contact information and the name  
8 of the patient's primary care provider, if applicable.

9 (3) An individual emergency plan established between the  
10 nurse-midwife and patient. The plan shall include all of the  
11 following:

12 (i) The patient's name, address and telephone  
13 number.

14 (ii) The arrangements for transport from the  
15 delivery site to a nearby hospital with obstetric  
16 services.

17 (iii) The name, address and telephone number of the  
18 hospital with obstetric services that will be used for an  
19 emergency transfer.

20 (iv) The name, address and telephone number of the  
21 hospital with obstetric services that will be used for a  
22 nonemergency transfer.

23 (v) The name and telephone number of the  
24 collaborating physician or another physician, group  
25 practice, public or private health system or hospital  
26 with which the nurse-midwife has a collaborative  
27 agreement or which provides backup care or co-management  
28 care to the patient.

29 Section 4. The act is amended by adding a section to read:  
30 Section 35.1. Certified midwife license.

1 (a) General rule.--A certified midwife license shall empower  
2 the licensee to practice midwifery in this Commonwealth as  
3 provided in this act. The board shall issue rules and promulgate  
4 regulations as may be necessary for the examination, licensing  
5 and proper conduct of the practice of midwifery.

6 (b) Requirements.--An applicant for a certified midwife  
7 license must have completed an academic and clinical program of  
8 study in midwifery which has been approved by the board or an  
9 accrediting body recognized by the board.

10 (c) Authorization.--

11 (1) A certified midwife may practice midwifery under the  
12 following conditions:

13 (i) A certified midwife who is not an employee of a  
14 public or private health system, hospital, licensed birth  
15 center or part of an interdisciplinary group practice in  
16 which at least one physician practices in the specialty  
17 area of the care the midwife will provide, shall practice  
18 pursuant to a collaborative agreement with a physician or  
19 physician interdisciplinary group practice in accordance  
20 with the regulations promulgated by the board.

21 (ii) A certified midwife who is an employee of a  
22 public or private health system, hospital, licensed birth  
23 center or part of an interdisciplinary group practice in  
24 which at least one physician practices in the specialty  
25 area of the care the midwife will provide, shall obtain  
26 and maintain clinical staff privileges at the public or  
27 private health system, hospital or licensed birth center  
28 and shall adhere to the established internal mechanisms  
29 at the facility of the public or private health system,  
30 hospital or licensed birth center for quality



1 improvement, consultation, collaboration or referral in  
2 accordance with the certified midwife's clinical practice  
3 privileges and the facility's policies and procedures as  
4 approved by the Department of Health.

5 (2) A certified midwife who possesses a master's degree  
6 or its substantial equivalent and national certification may  
7 prescribe, dispense, order and administer drugs, including  
8 legend drugs and Schedule II through Schedule V controlled  
9 substances, as defined in the act of April 14, 1972 (P.L.233,  
10 No.64), known as The Controlled Substance, Drug, Device and  
11 Cosmetic Act, if the certified midwife demonstrates to the  
12 board that:

13 (i) The certified midwife has successfully completed  
14 at least 45 hours of coursework specific to advanced  
15 pharmacology during their midwifery education.

16 (ii) As a condition of biennial license renewal by  
17 the board, a certified midwife shall complete at least 16  
18 hours of continuing education in pharmacology in that  
19 two-year period. Beginning with the license period  
20 designated by regulation, licensees shall be required to  
21 attend and complete 30 hours of mandatory continuing  
22 education during each two-year license period. Nationally  
23 certified education courses shall be considered as  
24 creditable, in addition to any other courses the board  
25 deems creditable toward meeting the requirements for  
26 continuing education.

27 (iii) An individual applying for the first time for  
28 licensure in this Commonwealth shall be exempted from the  
29 continuing education requirement for the biennial renewal  
30 period following initial licensure.

1           (iv) The certified midwife acts in accordance with  
2 the following restrictions:

3           (A) A certified midwife shall not prescribe,  
4 dispense, order or administer a controlled substance  
5 except for a woman's acute pain, for a woman's  
6 medication assisted treatment for opioid use  
7 disorder, or for primary gynecologic health  
8 conditions.

9           (B) For a Schedule II controlled substance for  
10 acute pain, the dose shall be limited to 72 hours and  
11 shall not be extended except with the approval of a  
12 collaborating physician.

13           (C) For a Schedule III or IV controlled  
14 substance, the prescription shall be limited to 30  
15 days and shall only be refilled with the approval of  
16 the collaborating physician.

17           (D) A certified midwife, when working with a  
18 physician or physician group prescribing medication  
19 treatment for opioid use disorder, may prescribe,  
20 dispense, order and administer United States Food and  
21 Drug Administration-approved prescription drugs,  
22 including buprenorphine, methadone and naltrexone,  
23 for medication-assisted treatment for opioid use  
24 disorders consistent with Federal laws and  
25 regulations.

26           (3) A certified midwife may, consistent with the  
27 certified midwife's academic educational preparation and  
28 national certification, prescribe, dispense, order and  
29 administer:

30           (i) Medical devices.

1 (ii) Immunizing agents.

2 (iii) Laboratory tests.

3 (iv) Therapeutic, diagnostic and preventative  
4 measures.

5 (d) (Reserved).

6 (e) Consultation, collaboration or referral.--

7 (1) A certified midwife who is an employee of a public  
8 or private health system, hospital, licensed birth center or  
9 part of an interdisciplinary group practice in which at least  
10 one physician practices in the specialty area of the care the  
11 midwife will provide, shall identify deviations from normal  
12 and appropriate interventions, including the management of  
13 complications and emergencies utilizing consultation,  
14 collaboration or referral to or with a physician as indicated  
15 by the health status of a patient. A consultation between a  
16 certified midwife and a physician shall not alone establish a  
17 physician-patient relationship or any other legal  
18 relationship with the physician. A certified midwife shall be  
19 solely responsible for the services the certified midwife  
20 provides to a patient.

21 (2) In order to maintain safe midwifery practice during  
22 a collaboration with a physician, a certified midwife shall,  
23 at a minimum, take all of the following actions:

24 (i) Maintain a medical record for each patient.

25 (ii) In the case of a transfer of care to another  
26 health care provider or facility, transfer a patient's  
27 medical records to the health care provider or facility.

28 (f) Disclosures.--A certified midwife who is not an employee  
29 of a public or private health system, hospital, licensed birth  
30 center or part of an interdisciplinary group practice in which

1 at least one physician practices in the specialty area of the  
2 care the midwife will provide, shall disclose, verbally and in  
3 written form, the information specified in paragraphs (1) and  
4 (2) to a prospective patient at the beginning of the  
5 professional relationship between certified midwife and the  
6 patient. The discussion must be documented by the use of a  
7 disclosure form. The patient shall sign and date the disclosure  
8 under this subsection at the same time the nurse-midwife and  
9 patient enter into an agreement for services. The certified  
10 midwife shall file the disclosure under this subsection in the  
11 patient's medical record. The disclosure shall include all the  
12 following information:

13 (1) The certified midwife's name.

14 (2) The patient's name, contact information and the name  
15 of the patient's primary care provider, if applicable.

16 (3) An individual emergency plan established between the  
17 certified midwife and patient. The plan shall include all of  
18 the following:

19 (i) The patient's name, address and telephone  
20 number.

21 (ii) The arrangements for transport from the  
22 delivery site to a nearby hospital with obstetrics  
23 services.

24 (iii) The name, address and telephone number of the  
25 hospital with obstetric services that will be used for an  
26 emergency transfer.

27 (iv) The name, address and telephone number of the  
28 hospital with obstetric services that will be used for a  
29 nonemergency transfer.

30 (v) The name and telephone number of the

1 collaborating physician or another physician, group  
2 practice, public or private health system or hospital  
3 with which the certified midwife has a collaborative  
4 agreement or which provides backup care or co-management  
5 care to the patient.

6 (g) Mcare Act.--A certified midwife licensed under this  
7 section is subject to the same provisions as a certified nurse  
8 midwife is under the act of March 20, 2002 (P.L.154, No.13),  
9 known as the Medical Care Availability and Reduction of Error  
10 (Mcare) Act.

11 Section 5. This act shall take effect in 60 days.