

## Conceptual Amendment to AB 387

### Submitted by Assemblywoman Monroe-Moreno Prepared for Assembly Ways and Means Hearing Friday, May 21, 2021

#### The main goals of the conceptual amendment are:

- 1) Remove the permitting of certified professional midwife student midwife and instead allow for imposition of administrative monetary penalties for failure to comply with provisions of section 24 and revises the definition of a certified professional midwife student.
- 2) Instead of requiring the Division to approve training programs for certified professional midwife birthing assistants have the Board approve a list of certified professional midwife birth assistant training programs, such as trainings given by nationally recognized midwifery certification organizations, that can be used to meet training requirements and the Division will post on its website. Additional training for licensed certified professional midwives has been removed as they will already have to complete the required training to become certified and meet continuing education requirements established by the North American Registry of Midwives.
- 3) The only training requirements to become a licensed certified professional midwife are established in Section 19. No additional training requirements are required to be established in regulations.
- 4) The removal of the option to obtain a license by endorsement. Since licensure to practice midwifery in Nevada is optional a license by endorsement would not provide any additional protections compared to someone applying for a license through the regular process.
- 5) Make conforming changes by removing permit or permitting of a certified professional midwife student midwife where applicable.
- 6) Removes the educational requirement for licensure: "Holds a Midwifery Bridge Certificate issued by the North American Registry of Midwives, or its successor organization, and has completed the Portfolio Evaluation Process prescribed by that organization." required pursuant to section 19 beginning January 1, 2025 in Section 101.
- 7) Requires the Division to reduce a licensing fee, if the criteria in this bill is met, and to promote applicants from marginalized identities through increasing the numbers of such applicants and reducing barriers that such applicants face, if the Division has funds to support such activities after it is able to pay for its operating costs. It also allows the Division to collect funds for the purposes of carrying out the provisions of this bill.
- 8) Make specific additional corrections to certain sections of the bill.

#### Proposed amendments/corrections to sections requesting to be amended are shown in track changes as follows:

**Section 1.** Title 54 of NRS is hereby amended by adding 1 thereto a new chapter to consist of the provisions set forth as 2 sections 2 to 32, inclusive, of this act.

**Sec. 5.7.** *"Certified professional midwife student midwife" means a person who performs midwifery under the direct supervision of a preceptor pursuant to section 24. ~~holds a permit as a certified professional & midwife student midwife issued pursuant to section 21 of this act.~~*

**Sec. 16. 1. The Board of Licensed Certified Professional Midwives is hereby created.**

**2. The Administrator of the Division shall appoint to the Board:**

**(a) Four voting members who are licensed certified professional midwives currently practicing in this State;**

**(b) One voting member who is an advanced practice registered nurse, certified nurse-midwife or physician currently practicing in the area of obstetrics in this State ~~and who has experience working in a home setting;~~**

**(c) One voting member who is a provider of health care, other than a provider of health care described in paragraph (a) or (b), who is currently providing neonatal or pediatric care in this State;**

**(d) Two voting members who are representatives of the general public and who have received care from a certified professional ~~nurse~~-midwife; and**

**(e) One nonvoting member to serve as a liaison with the Division.**

**3. Each member of the Board must be a resident of this State.**

**4. The Administrator of the Division:**

**(a) May solicit nominations for appointment to the Board from interested persons and entities.**

**(b) Shall give preference when appointing the members of the Board to candidates who have experience collaborating with licensed certified professional midwives or providing or utilizing midwifery services outside of a hospital.**

**5. The Board shall adopt regulations prescribing the terms of its members. Such terms must not exceed 4 years. The Administrator of the Division may:**

**(a) Reappoint a member at the expiration of his or her term; or**

**(b) Terminate a member before the expiration of his or her term for cause.**

**6. A vacancy on the Board must be filled in the same manner as the initial appointment.**

**7. Except as otherwise provided in this subsection, members of the Board serve without compensation. The State Board of Health may, by regulation, provide for compensation of the members of the Board.**

**8. The Board shall develop regulations outlining the provisions by which a member of the Board established pursuant to this Section may work for the Division of Public and Behavioral Health as an employee or on contractor.**

**Sec. 17. 1. A majority of the voting members of the Board constitutes a quorum for the transaction of business, and a majority of a quorum present at any meeting is sufficient for any official action taken by the Board.**

**2. The Board shall:**

**(a) At its first meeting and annually thereafter, elect a Chair from among its members;**

**(b) Meet ~~regularly~~ at least annually and more often at the call of the Chair if Division resources are available to support additional meetings;**

**and**

**(c) Recommend to the Legislature any statutory changes to improve the practice of certified professional midwifery in this State.**

**3. To the extent practicable, any advice or recommendations made by the Board concerning the practice of certified professional midwifery must be guided by current, peer-reviewed scientific research.**

**Sec. 18. 1. The Board shall adopt any regulations necessary or convenient for carrying out the provisions of this chapter. Those regulations must include, without limitation:**

**~~(a) Requirements concerning the approval by the Division of <sup>17</sup> programs of training for licensed certified professional midwives <sup>18</sup> and certified professional midwife birth assistants, including, <sup>19</sup> without limitation, the required training and instruction that must <sup>20</sup> be provided by such a program and the procedure for obtaining <sup>21</sup> such approval. <sup>22</sup>~~**

*(b) Requirements governing the issuance and renewal of a <sup>23</sup> license as a licensed certified professional midwife, including, <sup>24</sup> without limitation: <sup>25</sup>*

*(1) For initial licensure, evidence of completion of ~~The~~ educational qualifications that, ~~except as otherwise <sup>26</sup> provided~~ are required pursuant to in section 19 of this act and in addition to the ~~27~~ qualifications prescribed by that section, ~~that~~ are necessary to obtain a <sup>28</sup> license pursuant to that section. <sup>29</sup>*

*(b) A list of training programs approved by the Board, such as training programs approved by a nationally recognized midwifery organization, that a certified professional midwife birth assistant must take in order to work as a certified professional midwife birth assistant in accordance to the provisions of this Chapter.*

*(b) The list of the training programs approved by the Board shall be posted on the Division's website.*

*(2) The period for which a license is valid that does not exceed two years.*

*(3) A requirement that an applicant for the renewal of a license must have completed continuing education in cultural humility or the elimination of racism or bias.*

*(c) The procedure for filing a complaint with the Division concerning a licensed certified professional midwife or certified professional midwife student midwife.*

*(d) Grounds for the Division to impose disciplinary action against a licensed certified professional midwife or certified professional midwife student midwife and the procedure by which the Division will impose such disciplinary action.*

*(e) Requirements governing the reinstatement of a license that has been revoked, including, without limitation, the procedure to apply for reinstatement.*

*(f) Regulations governing the ordering, usage and administration of drugs, vaccines, chemicals, solutions and devices pursuant to section 26 of this act.*

*(g) Regulations concerning the management by a licensed certified professional midwife of a client who may have a condition that puts the client at a moderate or high risk of an adverse outcome for the client or the fetus or newborn infant of the client. The regulations must, to the extent practicable, be guided by current, peer-reviewed scientific research and must include, without limitation:*

*(1) A list of conditions or symptoms associated with a risk of serious permanent harm or death to a client or the fetus or newborn infant of a client;*

*(2) A list of conditions or symptoms associated with a risk of greater than minimal harm to a client or the fetus or newborn infant of a client that do not pose a risk of serious permanent harm or death; and*

*(3) Specific requirements for each condition or symptom listed pursuant to subparagraphs (1) and (2) governing:*

*(I) The circumstances under which a licensed certified professional midwife must arrange for the client to consult with another provider of health care, co-manage the care of the client with another provider of health care, refer primary responsibility for the care of a client to another provider of health care or transfer the care of the client to a medical facility, procedures for such consultation, co-management, referral or transfer and requirements to ensure that a provider of health care who is consulted, with whom a client's condition or symptom is co-managed or to whom primary responsibility for the care of a client is referred is appropriately qualified; and*

*(II) The information that must be included on the form for providing informed refusal to consent to consultation, co-management, referral or transfer pursuant to section 27 of this act and the management of a client who provides such informed refusal to consent.*

*(h) Requirements governing the screening of clients in accordance with chapter 442 of NRS and necessary measures for the prevention of communicable diseases.*

*(i) Requirements concerning the records of treatment and outcomes that must be kept by a licensed certified professional midwife.*

*(j) Any other requirements necessary to optimize obstetrical and neonatal outcomes for clients of licensed certified professional midwives.*

*2. The Board may, by regulation, require an applicant for a license as a licensed certified professional midwife, including, ~~2~~ without limitation, an applicant for a license by endorsement ~~3~~ pursuant to*

~~section 20 of this act, to submit to the Division a complete set of his or her fingerprints and written permission authorizing the Division to forward the fingerprints to the Central Repository for Nevada Records of Criminal History a complete set of his or her fingerprints for submission to the Federal Bureau of Investigation for its report.~~

**Sec. 19. 1.** ~~An applicant for a license as a licensed certified professional midwife, other than a license by endorsement pursuant to section 20 of this act, must submit to the Division an application pursuant to this section in the form prescribed by the Division. The application must be accompanied by a fee in the amount prescribed by regulation of the State Board of Health pursuant to NRS 439.150, which must not exceed \$1,000. The application must include, without limitation, proof that the applicant is certified as a midwife by the North American Registry of Midwives, or its successor organization, and:~~

~~(a) Has completed an educational program accredited by the Midwifery Education Accreditation Council, or its successor organization; or~~

~~(b) Holds a Midwifery Bridge Certificate issued by the North American Registry of Midwives, or its successor organization, and has completed the Portfolio Evaluation Process prescribed by that organization.~~

~~2. A license as a licensed certified professional midwife may be renewed upon submission to the Division of a renewal application in the form prescribed by the Division. The renewal application must:~~

~~(a) Be accompanied by a renewal fee in the amount prescribed by regulation of the State Board of Health pursuant to NRS 439.150, which must not exceed \$1,000; and~~

~~(b) Include any information required by the regulations adopted by the Board pursuant to section 18 of this act.~~

~~3. The State Board of Health shall establish by regulation a procedure through which:~~

~~(a) An applicant may petition the State Board Division to reduce the fees imposed pursuant to this section. An applicant may qualify for such a reduction if the applicant demonstrates, to the satisfaction of the State Board Division, that the fees imposed pursuant to this section are an economic hardship on the applicant.~~

~~(b) The State Board Division allocates a portion of the fees imposed and collected pursuant to this section to programs that promote applicants from marginalized identities through increasing the numbers of such applicants and reducing barriers that such applicants face.~~

~~4. The regulations shall prescribe that only if the Division has remaining funds available after utilizing the fees collected pursuant to this chapter to pay for its operating expenses to carry out the provisions of this chapter, the provision of subsection 3 shall be carried out.~~

~~4.5. As used in this section, "marginalized identity" means an identity or expression that causes or has historically caused a person of such identity or expression to be disproportionately discriminated against, harassed or otherwise negatively treated or affected as a result of the identity or expression.~~

~~6. The Division may accept gifts, grants or any other funds to carry out the provisions of this bill.~~

~~Sec. 20. 1. The Division shall issue a license by endorsement as a licensed certified professional midwife to an applicant who meets the requirements set forth in this section. An applicant may submit to the Division an application for such a license if the applicant holds a corresponding valid and unrestricted license as a licensed certified professional midwife in the District of Columbia or any state or territory of the United States.~~

~~2. An applicant for a license by endorsement pursuant to this section must submit to the Division with his or her application:~~

~~(a) Proof satisfactory to the Board that the applicant:~~

~~(1) Satisfies the requirements of subsection 1;~~

~~(2) Has not been disciplined or investigated by the 20 corresponding regulatory authority of the District of Columbia or 21 any state or territory in which the applicant currently holds or has 22 held a license as a licensed certified professional midwife or any 23 other type of midwife; 24~~

~~(3) Has not been held civilly or criminally liable for 25 malpractice in the District of Columbia or any state or territory of 26 the United States; 27~~

~~(4) Is certified as a certified professional midwife by the 28 North American Registry of Midwives, or its successor 29 organization; and 30~~

~~(5) Holds a Midwifery Bridge Certificate issued by the 31 North American Registry of Midwives, or its successor 32 organization, and has completed the Portfolio Evaluation Process 33 prescribed by that organization or meets the educational 34 requirements prescribed by the Board pursuant to section 18 of 35 this act; 36~~

~~(b) An affidavit stating that the information contained in the 37 application and any accompanying material is true and correct; 38~~

~~(c) The fee prescribed by the State Board of Health pursuant 39 to NRS 439.150, which must not exceed \$1,000; and 40~~

~~(d) Any other information required by the Division. 41~~

~~3. Not later than 15 business days after receiving an 42 application for a license by endorsement as a licensed certified 43 professional midwife pursuant to this section, the Division shall 44 provide written notice to the applicant of any additional 45 11~~

~~information required by the Division to consider the application. 1 Unless the Division denies the application for good cause, the 2 Division shall approve the application and issue a license by 3 endorsement as a licensed certified professional midwife to the 4 applicant not later than: 5~~

~~(a) Forty five days after receiving the application; or 6~~

~~(b) If the Board requires the applicant to submit his or her 7 fingerprints pursuant to section 18 of this act, 10 days after the 8 Board receives a report on the applicant's background based on 9 the submission of the applicant's fingerprints, 10~~

~~Sec. 21. 1. An applicant for a permit as a certified 12 professional midwife student midwife must submit to the Division 13 an application in the form prescribed by the Division. The 14 application must be accompanied by a fee of \$100 and must 15 include, without limitation: 16~~

~~(a) A copy of an agreement with at least one preceptor to 17 supervise the applicant and proof that each preceptor meets the 18 requirements of section 24 of this act; and 19~~

~~(b) Proof that the applicant is enrolled in a program of 20 training for licensed certified professional midwives approved by 21 the Division. 22~~

~~2. A permit as a certified professional midwife student 23 midwife is valid for 2 years after the date of issuance and may be 24 renewed upon submission to the Division of: 25~~

~~(a) A renewal application in the form prescribed by the 26 Division; and 27~~

~~(b) A renewal fee of \$100. 28~~

~~3. Upon approving an application for the issuance or renewal 29 of a permit as a certified professional midwife student midwife, the 30 Division shall provide to the applicant a written copy of the 31 provisions of section 24 of this act and any regulations adopted 32 pursuant to section 18 of this act that apply to certified 33 professional midwife student midwives. 34~~

**Sec. 22. 1. A licensed certified professional midwife may utilize a certified professional midwife birth assistant to perform the tasks and procedures authorized by subsection 3. Except as otherwise provided in subsection 2, a certified professional midwife birth assistant, including, without limitation, a provider of health care serving as a certified professional midwife birth assistant, must:**

**(a) Be at least 18 years of age;**

**(b) Have completed the a training for certified professional midwife birth assistants approved by the Division Board pursuant to subsection (1)(a) of Section 18 ;**

**(c) Have completed training in cultural humility or the elimination of racism or bias;**

(d) ~~Hold~~ Is a current certification-Neonatal Resuscitation Program Provider trained in the techniques of administering neonatal resuscitation issued by an instructor certified by the American Academy of Pediatrics, or its successor organization; and

(e) Hold current certification in the techniques of administering cardiopulmonary resuscitation.

2. A certified professional midwife birth assistant who is a licensed certified professional midwife or who is a certified nurse- midwife is not required to possess the qualifications set forth in subsection 1.

3. A certified professional midwife birth assistant may perform routine clinical tasks and procedures under the direct supervision of a licensed certified professional midwife who is present on the premises and able to intervene if necessary unless it is urgent to perform a life-saving measure or birth is imminent and Emergency Medical Services has been called. Such tasks include, without limitation:

(a) Administering medications, including, without limitation and to the extent applicable, any medication described in subsection 2 of section 26 of this act, intradermally, subcutaneously and intramuscularly and performing skin tests;

(b) Providing medication, including, without limitation and to the extent applicable, any medication described in subsection 2 of section 26 of this act, to a patient to self-administer orally, sublingually, topically or rectally;

(c) Administering oxygen;

(d) Assisting in the care of a newborn infant immediately after birth;

(e) Placing a device used for auscultation of fetal heart tones;

(f) Assisting a client with activities of daily living and assisting the client in moving between the bed and bathroom;

(g) Performing cardiopulmonary or neonatal resuscitation; and

(h) Checking vital signs.

4. A certified professional midwife birth assistant shall not assess clinical information or make clinical decisions.

5. A certified professional midwife shall ensure that a birth assistant meets the requirements outlined in this section prior to utilizing a certified professional midwife birth assistant.

Sec. 23. 1. In addition to any other requirements set forth in this chapter:

(a) An applicant for the issuance of a license as a licensed certified professional midwife ~~or a permit as a certified professional midwife student midwife~~ in this State shall include the social security number of the applicant in the application submitted to the Division.

(b) An applicant for the issuance of a license as a licensed certified professional midwife ~~or a permit as a certified professional midwife student midwife~~ in this State shall submit to the Division of Public and Behavioral Health of the Department of Health and Human Services the statement prescribed by the Division of Welfare and Supportive Services of the Department of Health and Human Services pursuant to NRS 425.520. The statement must be completed and signed by the applicant.

2. The Division of Public and Behavioral Health of the Department of Health and Human Services shall include the statement required pursuant to subsection 1 in:

(a) The application or any other forms that must be submitted for the issuance or renewal of the license ~~or permit~~; or

(b) A separate form prescribed by the Division.

3. A license as a licensed certified professional midwife ~~or a 13 permit as a certified professional midwife student midwife~~ may not be issued or renewed by the Division if the applicant:

(a) Fails to submit the statement required pursuant to subsection 1; or

(b) Indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

4. If an applicant indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan

approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, the Division shall advise the applicant to contact the district attorney or other public agency enforcing the order to determine the actions that the applicant may take to satisfy the arrearage.

**Sec. 24. 1.** A certified professional midwife student midwife may engage in the practice of certified professional midwifery, including, without limitation, by using or administering any drug, vaccine, device, chemical or solution described in subsection 1, 2 or 3 of section 26 of this act, under the direct supervision of a preceptor who is present on the premises and able to intervene if necessary unless it is urgent to perform a life-saving measure or birth is imminent and Emergency Medical Services has been called. The preceptor is responsible for each client to whom the certified professional midwife student midwife provides midwifery services.

2. A preceptor must be a person engaged in the practice of certified professional midwifery who is approved by the North American Registry of Midwives, or its successor organization, to serve as a preceptor.

3. A preceptor shall:

(a) Provide to each client ~~in the form prescribed by the 2-Division~~ notice that a certified professional midwife student midwife may be involved in the care of the client;

(b) Explain the scope of the activities that the certified professional midwife student midwife may perform under the supervision of the preceptor; and

(c) Review and evaluate all care provided by a certified professional midwife student midwife under his or her supervision and attend every clinical encounter between the certified professional midwife student midwife and a client.

~~4. Not later than 10 days after the preceptor of a certified 12 professional midwife student midwife ceases to serve as his or her 13 preceptor, the certified professional midwife student midwife shall 14 notify the Division. If the certified professional midwife student 15 midwife has no additional preceptor, the certified professional 16 midwife student midwife must cease engaging in the practice of 17 certified professional midwifery.~~

4. A certified professional midwife student midwife that continues to engage in the practice of a certified professional midwife without a preceptor is subject to administrative monetary penalties as outlined in regulations.

~~until he or she submits to the 18-Division a written agreement with a new preceptor who meets the 19 requirements of this section. 20~~

**Sec. 25.** Upon accepting a client:

1. All midwives, including, without limitation, a licensed certified professional midwife and a certified nurse-midwife, shall provide the client with a Community Birth Disclosure. The Community Birth Disclosure must inform the client regarding:

(a) The type of midwife that the midwife is;

(b) The level of education that the midwife has received; and

(c) The care to be provided by the midwife.

↪ The Board shall create the Community Birth Disclosure in collaboration with all types of midwives practicing in this State.

2. A midwife must sign and date, and obtain the signature of the client with a notation of the date of the signature upon, the Community Birth Disclosure provided pursuant to subsection 1. The midwife shall retain a copy of the Community Birth Disclosure for 5 years.

3. In addition to providing the Community Birth Disclosure pursuant to subsection 1, a licensed certified professional midwife shall obtain from the client informed written consent regarding the care to be provided by the licensed certified professional midwife. Informed written consent requires that the licensed certified professional midwife provide to the client:

- (a) A description of the educational background and credentials of the licensed certified professional midwife;
- (b) A description of the practice of certified professional midwifery as set forth in section 11 of this act and the limitations on the practice of a licensed certified professional midwife; 3
- (c) Instructions for obtaining a copy of the provisions of sections 2 to 32, inclusive, of this act and the regulations adopted 5 pursuant to section 18 of this act; 6
- (d) Instructions for filing a complaint with the Division in 7 accordance with the regulations adopted pursuant to section 18 of 8 this act; 9
- (e) A description of the actions that the licensed certified 10 professional midwife will take in an emergency, including, without 11 limitation, the conditions under which the licensed certified 12 professional midwife will recommend the transfer of the client to a 13 medical facility and the procedure that the licensed certified 14 professional midwife will follow when making such a transfer;
- (f) A description of the procedures that will be used during the 16 birth in the client's chosen setting, the risks and benefits of birth 17 in that setting and the conditions that may arise during delivery; 18
- (g) A disclosure of whether the licensed certified professional 19 midwife holds liability insurance; 20
- (h) A summary of the provisions of section 27 of this act and 21 the regulations adopted pursuant to section 18 of this act 22 governing consultation, co-management, referral and transfer and 23 a description of the procedures established by the licensed certified 24 professional midwife for consultation, co-management, referral 25 and transfer; and 26
- (i) Any other information required by regulation of the Board.

**Sec. 26. 1. A licensed certified professional midwife may use the following devices: 29**

- (a) Dopplers, syringes, needles, phlebotomy equipment, 30 sutures, urinary catheters, intravenous equipment, amnihooks, 31 airway suction devices, electronic fetal monitors, 32 tocodynamometer monitors, equipment for administering oxygen, 33 glucose monitoring systems and testing strips, neonatal and adult 34 oximetry equipment, centrifuges and equipment for conducting 35 screenings of hearing ability;
- (b) Equipment for administering nitrous oxide, including, 37 without limitation, scavenging systems, ~~only in the setting where 38 the birth is taking place in the birthing center setting only;~~ 39
- (c) Neonatal and adult resuscitation equipment, including, 40 without limitation, airway devices; and 4
- (d) Any other device authorized by regulation of the Board. 42

**2. A licensed certified professional midwife may possess and 43 administer: 44 – 16 –**

- (a) Oxytocin, misoprostol, methylergonovine, tranexamic acid, 1 lidocaine, penicillin, ampicillin, cefazolin, clindamycin, 2 epinephrine, diphenhydramine, ondansetron, phylloquinone, 3 erythromycin ointment, terbutaline and nitrous oxide; 4
- (b) Influenza vaccine, COVID-19 vaccine, hepatitis B vaccine and diphtheria, 5 tetanus and pertussis vaccine; 6
- (c) Rho (D) immune globulin and hepatitis B immune 7 globulin; 8
- ~~(d) Terbutaline only in the setting where the birth is taking 9 place; and 10~~
- ~~(e) (d)~~ Any other drugs or vaccines authorized by regulation of the 11 Board. 12

**3. A licensed certified professional midwife may possess and 13 administer: 14**

- (a) Oxygen, lactated Ringers solution, 5 percent dextrose in 15 lactated Ringers solution, 0.9 percent sodium chloride solution 16 and sterile water; and 17
  - (b) Any other chemicals or solutions authorized by regulation 18 of the Board. 19
- 4. A licensed certified professional midwife may order for a 20 client: 21**
- (a) Breast pumps, compression stockings and belts, maternity 22 belts, diaphragms, cervical caps, glucometers, glucose testing 23 strips, iron supplements and prenatal vitamins; and 24
  - (b) Any vaccine described in paragraph (b) of subsection 2.

**Sec. 27. 1. Except as otherwise provided in subsections 4 26 and 5, a licensed certified professional midwife must recommend 27 and, with the consent of the client, arrange for consultation or co-28**



management with or referral to a qualified provider of health care 29 or transfer to an appropriate medical facility if the licensed 30 certified professional midwife determines that any of the following 31 conditions or symptoms exist: 32

(a) Complete placenta previa; 33

(b) Partial placenta previa after the 27th week of gestation; 34

(c) Infection with the human immunodeficiency virus; 35

(d) Cardiovascular disease; 36

(e) Severe mental illness that may cause the client to cause 37 harm to themselves or others; 38

(f) Pre-eclampsia or eclampsia; 39

(g) Fetal growth restriction, oligohydramnios or moderate or 40 severe polyhydramnios in the pregnancy; 41

(h) Potentially serious anatomic fetal abnormalities; 42

(i) Diabetes that requires insulin or other medication for 43 management; 44

(j) Gestational age of greater than 43 weeks; or—

(k) Any other condition or symptom which, in the judgment of 1 the licensed certified professional midwife, could threaten the life 2 of the client or the fetus or newborn infant of the client. 3

2. Except as otherwise provided in subsections 4 and 5, a 4 licensed certified professional midwife must recommend and, with 5 the consent of the client, arrange for consultation or co-6 management with or referral to a qualified provider of health care 7 if the licensed certified professional midwife determines that any 8 of the following conditions or symptoms exist: 9

(a) Prior cesarean section or other surgery resulting in a 10 uterine scar; 11

(b) Multifetal gestation; or 12

(c) Non-cephalic presentation after 36 weeks of gestation. 13

3. A licensed certified professional midwife who recommends 14 to a client consultation, co-management, referral or transfer shall document in the record of the client: 16

(a) The contents of the recommendation; 17

(b) The condition or symptom for which the recommendation 18 was made; 19

(c) Whether the client consented to the consultation, co-20 management, referral or transfer; and 21

(d) If the client provides consent, the name, profession and 22 specialty of the provider of health care with whom the licensed 23 certified professional midwife consulted or co-managed or to 24 whom the client was referred or the medical facility to which the 25 client was transferred. 26

4. A client may provide informed refusal to consent to 27 consultation, co-management, referral or transfer in writing on a form prescribed by the ~~Division~~ Board. If a client provides informed 29 refusal to consent to: 30

(a) Consultation, co-management, referral or transfer after the 31 licensed certified professional midwife has determined that a 32 condition or symptom described in subsection 1 exists, the licensed 33 certified professional midwife must attempt to locate a qualified 34 provider of health care for which the client consents to 35 consultation, co-management or referral or an appropriate 36 medical facility for which the client consents to transfer. If the 37 licensed certified professional midwife is unable to locate such a 38 provider of health care who is willing to consult, co-manage or 39 accept the referral or such a medical facility which is willing to 40 accept the transfer, the licensed certified professional midwife is 41 not liable for any damages resulting from the failure to consult, 42 co-manage, refer or transfer. If the condition or symptom 43 threatens the life or health of the client or the fetus or the 44 newborn infant of the client during labor or delivery, the licensed certified professional midwife must call 911 and provide care until 1 relieved by a qualified provider of health care. 2

(b) Consultation, co-management or referral after the licensed 3 certified professional midwife has determined that a condition or symptom described in subsection 2 exists, the licensed certified 5 professional midwife: 6

(1) May continue to serve as the primary provider of health 7 care for the client until the client provides such consent; and 8

(2) Is not liable for any damages resulting from the failure 9 to consult, co-manage or refer. 10

5. If, after determining that a condition or symptom described 11 in: 12

(a) Subsection 1 exists and making a reasonable effort to 13 arrange for consultation with, co-management of the condition or 14 symptom with or referral of the client to a qualified provider of 15 health care or the transfer of the client to an appropriate medical 16 facility, a licensed certified professional midwife is unable to 17 locate a qualified provider of health care who is willing to consult, 18 co-manage or accept the referral or an appropriate medical 19 facility willing to accept the transfer, the licensed certified 20 professional midwife shall be deemed to be in compliance with the 21 requirements of this section and is not liable for any damages 22 resulting from the inability of the licensed certified professional 23 midwife to consult, co-manage, refer or transfer. If the condition 24 or symptom threatens the life or health of the client or the fetus or 25 newborn infant of the client during labor or delivery, the licensed 26 certified professional midwife must call 911 and provide care until 27 relieved by a qualified provider of health care. 28

(b) Subsection 2 exists and making a reasonable effort to 29 arrange for consultation with, co-management of the condition or 30 symptom with or referral of the client to a qualified provider of 31 health care, a licensed certified professional midwife is unable to 32 locate a qualified provider of health care who is willing to consult, 33 co-manage or accept the referral, the licensed certified 34 professional midwife shall be deemed to be in compliance with the 35 requirements of this section and is not liable for any damages 36 resulting from the inability of the licensed certified professional 37 midwife to arrange for consultation, co-manage or refer. 38

6. A provider of health care who is not a licensed certified 39 professional midwife is not liable for any damages resulting from 40 any act or omission of a licensed certified professional midwife 41 and is not required to adhere to any standards of care governing 42 the practice of certified professional midwifery. Such a provider of 43 health care is only liable for the damages resulting from his or her 44 own acts or omissions in accordance with the standards of care 1 governing his or her profession.

**Sec. 28. 1. ~~On or before January 31 of each year, With each renewal~~ a licensed certified professional midwife shall submit to the Division a report that includes, for the ~~immediately~~ preceding calendar year or years, as applicable, from their most current renewal, but not to include data already reported in previous renewals:**

(a) The total number of clients who, when accepted by the licensed certified professional midwife as clients, intended to deliver their babies outside of a hospital;

(b) The number of live births attended by the licensed certified professional midwife outside of a hospital;

(c) The number of cases of fetal demise, deaths of newborns and maternal deaths attended by the licensed certified professional midwife;

(d) The number of clients transferred to a medical facility during the antepartum, intrapartum or immediate postpartum periods and the reason for and outcome of each such transfer;

(e) A brief description of any complications resulting in maternal or infant morbidity or mortality;

(f) The planned location and actual location of each delivery; and

(g) Any other information required by regulation of the Board.

2. Not later than 30 days after attending a maternal or newborn infant death, a licensed certified professional midwife shall report the death to the Division and the Board.

**Sec. 30. 1. The Division shall keep a record of its 5 proceedings relating to licensing, disciplinary actions and 6 investigations. Except as otherwise provided in this chapter, the 7 record must be open to public inspection at all reasonable times. 8**

2. Except as otherwise provided in this section and NRS 9 239.0115, a complaint filed with the Division, all documents and 10 other information filed with the complaint and all documents and 11 other information compiled as a result of an investigation 12 conducted to determine whether to initiate disciplinary action 13 against a person are confidential and privileged, ~~unless the person 14 submits a~~

~~written statement to the Division requesting that such documents and information be made public records.~~<sup>16</sup>

3. A complaint or other document filed by the Division to<sup>17</sup> initiate disciplinary action, any written opinion rendered by the<sup>18</sup> Division and all documents and information considered by the<sup>19</sup> Division when determining whether to impose discipline are public<sup>20</sup> records.<sup>21</sup>

4. An order that imposes discipline and the findings of fact<sup>22</sup> and conclusions of law supporting that order are public records.<sup>23</sup>

5. The provisions of this section do not prohibit the Division<sup>24</sup> from communicating or cooperating with or providing any<sup>25</sup> documents or other information to any other licensing board or<sup>26</sup> any other agency that is investigating a person, including, without<sup>27</sup> limitation, a law enforcement agency.

**Sec. 31. 1.** Except as otherwise provided in subsection 2, a person who is not licensed as a licensed certified professional midwife ~~or does not hold a permit as a certified professional~~<sup>31</sup> ~~midwife student midwife~~ or a person whose license as a licensed certified professional midwife ~~or permit as a certified professional~~<sup>33</sup> ~~midwife student midwife~~ has been suspended or revoked by the Division shall not:

(a) Use in connection with his or her name the words “licensed certified professional midwife,” ~~“certified professional midwife,”~~ “licensed midwife” ~~or “certified professional midwife~~<sup>38</sup> ~~student midwife”~~ or any other letters, words or insignia indicating or implying that he or she is licensed ~~or holds a permit to engage~~ in the practice of licensed certified professional midwifery, or in any other way, orally, or in writing or print, or by sign, directly or by implication, represent himself or herself as licensed ~~or holding a permit to engage~~ in the practice of licensed certified professional midwifery in this State; or

(b) List or cause to have listed in any directory, including, without limitation, a telephone directory, his or her name or the name of his or her company under the heading “licensed certified professional midwife,” ~~“certified professional midwife,”~~ “licensed midwife” or any other term that indicates or implies that he or she is licensed ~~or holds a permit to engage~~ in the practice of a licensed certified professional midwifery in this State.

2. A person who is not licensed as a licensed certified professional midwife ~~or does not hold a permit as a certified~~<sup>9</sup> ~~professional midwife student midwife~~ or a person whose license as ~~10 a licensed certified professional midwife or permit as a certified~~<sup>11</sup> ~~professional midwife student midwife~~ has been suspended or<sup>12</sup> revoked by the Division may use or list the words or headings described in paragraph (a) or (b) of subsection 1 if the person is licensed ~~or holds a permit~~ in the District of Columbia or any state or territory of the United States. If the person uses or lists the words or headings pursuant to this section, the person shall disclose the district, state or territory, as applicable, in which he or she is licensed ~~or permitted~~.

3. A person who is licensed as a licensed certified professional midwife ~~or holds a permit as a certified professional~~<sup>21</sup> ~~midwife student midwife~~ and who is also licensed ~~or holds a~~<sup>22</sup> ~~permit~~ in the District of Columbia or any state or territory of the United States shall disclose each additional district, state or territory, as applicable, in which he or she is currently licensed or permitted and all instances in which he or she has been previously licensed in all circumstances described in paragraphs (a) and (b) of subsection 1.

4. A certified professional midwife student midwife shall not use in connection with his or her name the words “licensed certified professional midwife,” “certified professional midwife,” “licensed midwife” or any other letters, words or insignia indicating or implying that he or she is licensed to engage in the practice of certified professional midwifery without supervision, or in any other way, orally, or in writing or print, or by sign, directly or by implication, represent himself or herself as licensed to engage in the practice of certified professional midwifery without supervision in this State.

5. A person or entity shall not operate a program of training<sup>38</sup> for licensed certified professional midwives or certified<sup>39</sup> professional midwife birth assistants or advertise or otherwise<sup>40</sup> represent that the person or entity is authorized to operate such a<sup>41</sup> program unless the person or entity has been approved to offer<sup>42</sup> such a program by the ~~Division~~ Board pursuant to Section 18.<sup>43</sup>

5. A certified professional midwife student midwife shall not practice midwifery unless authorized to do so pursuant to this Chapter.

*6. If the Division has reason to believe that a person has repeatedly violated any provision of this section or the Division .*

*has received complaints that a person has repeatedly violated any provision of this section, the Division may certify the facts to the Attorney General, or other appropriate enforcement officer, who 3 may, in his or her discretion, cause appropriate proceedings to be brought.*

~~7. A person who violates any provision of this section is guilty of a misdemeanor.~~

**Sec. 34. NRS 622.520 is hereby amended to read as follows:**

622.520 1. A regulatory body that regulates a profession 12 pursuant to chapters 630, 630A, 632 to 641C, inclusive, *and 13 sections 2 to 32, inclusive, of this act*, 644A or 653 of NRS in this 14 State may enter into a reciprocal agreement with the corresponding 15 regulatory authority of the District of Columbia or any other state or 16 territory of the United States for the purposes of: 17

(a) Authorizing a qualified person licensed in the profession in 18 that state or territory to practice concurrently in this State and one or 19 more other states or territories of the United States; and 20

(b) Regulating the practice of such a person. 21

2. A regulatory body may enter into a reciprocal agreement 22 pursuant to subsection 1 only if the regulatory body determines that: 23

(a) The corresponding regulatory authority is authorized by law 24 to enter into such an agreement with the regulatory body; and 25

(b) The applicable provisions of law governing the practice of 26 the respective profession in the state or territory on whose behalf the 27 corresponding regulatory authority would execute the reciprocal 28 agreement are substantially similar to the corresponding provisions 29 of law in this State. 30

3. A reciprocal agreement entered into pursuant to subsection 1 31 must not authorize a person to practice his or her profession 32 concurrently in this State unless the person: 33

(a) Has an active license to practice his or her profession in 34 another state or territory of the United States. 35

(b) ~~[Has]~~ *Except as otherwise provided in this paragraph, has 36 been in practice for at least the 5 years immediately preceding the 37 date on which the person submits an application for the issuance of 38 a license pursuant to a reciprocal agreement entered into pursuant to 39 subsection 1. If the person seeks to practice as a licensed certified 40 professional midwife in this State pursuant to sections 2 to 32, 41 inclusive, of this act, the person must have been in practice for at 42 least the 3 years immediately preceding the date on which the 43 person submits an application for the issuance of a license pursuant to a reciprocal agreement entered into pursuant to 1 subsection 1. 2*

(c) Has not had his or her license suspended or revoked in any 3 state or territory of the United States. 4

(d) Has not been refused a license to practice in any state or 5 territory of the United States for any reason. 6

(e) Is not involved in and does not have pending any 7 disciplinary action concerning his or her license or practice in any 8 state or territory of the United States. 9

(f) Pays any applicable fees for the issuance of a license that are 10 otherwise required for a person to obtain a license in this State. 11

(g) Submits to the applicable regulatory body the statement 12 required by NRS 425.520. 13

4. If the regulatory body enters into a reciprocal agreement 14 pursuant to subsection 1, the regulatory body must prepare an 15 annual report before January 31 of each year outlining the progress 16 of the regulatory body as it relates to the reciprocal agreement and 17 submit the report to the Director of the Legislative Counsel Bureau 18 for transmittal to the next session of the Legislature in odd-19 numbered years or to the Legislative Committee on Health Care in 20 even-numbered years.

**Sec. 100.** Section 18 of this act is hereby amended to read as 39 follows: 40

Sec. 18. 1. The Board shall adopt any regulations 41 necessary or convenient for carrying out the provisions of this 42 chapter. Those regulations must include, without limitation: 43

~~(a) Requirements concerning the approval by the Division of 17 programs of training for licensed certified professional midwives 18 and certified professional midwife birth assistants, including, 19 without limitation, the required training and instruction that must 20 be provided by such a program and the procedure for obtaining 21 such approval. 22~~

(b) Requirements governing the issuance and renewal of a 5 license as a licensed certified professional midwife, 6 including, without limitation: 7

(1) ~~For initial licensure, evidence of completion of~~ The educational qualifications ~~that, [except as 8 otherwise provided in section 19 of this act and] in addition to 9 the qualifications prescribed by [that] section [,],~~ required pursuant to Section 19 of this 10 act that, are necessary to obtain a license pursuant to that section. 11

~~(a) A list of existing training programs approved by the Board that a certified professional midwife birth assistant must take in order to work as a certified professional midwife birth assistant in accordance to the provisions of this Chapter.~~

~~(b) The list of the existing training programs approved by the Board shall be posted on the Division's website.~~

(2) The period for which a license is valid. 12

(3) A requirement that an applicant for the renewal of 13 a license must have completed continuing education in 14 cultural humility or the elimination of racism or bias. 15

(c) The procedure for filing a complaint with the Division 16 concerning a licensed certified professional midwife or 17 certified professional midwife student midwife. 18

(d) Grounds for the Division to impose disciplinary action 19 against a licensed certified professional midwife or certified 20 professional midwife student midwife and the procedure by 21 which the Division will impose such disciplinary action. 22

(e) Requirements governing the reinstatement of a license 23 that has been revoked, including, without limitation, the 24 procedure to apply for reinstatement. 25

(f) Regulations governing the ordering, usage and 26 administration of drugs, vaccines, chemicals, solutions and 27 devices pursuant to section 26 of this act; 28

(g) Regulations concerning the management by a licensed 29 certified professional midwife of a client who may have a 30 condition that puts the client at a moderate or high risk of an 31 adverse outcome for the client or the fetus or newborn infant 32 of the client. The regulations must, to the extent practicable, 33 be guided by current, peer-reviewed scientific research and 34 must include, without limitation: 35

(1) A list of conditions or symptoms associated with a 36 risk of serious permanent harm or death to a client or the fetus 37 or newborn infant of a client; 38

(2) A list of conditions or symptoms associated with a 39 risk of greater than minimal harm to a client or the fetus or 40 newborn infant of a client that do not pose a risk of serious 41 permanent harm or death; and 42

(3) Specific requirements for each condition or 43 symptom listed pursuant to subparagraphs (1) and (2) 44 governing:

(I) The circumstances under which a licensed 1 certified professional midwife must arrange for the client to 2 consult with another provider of health care, co-manage the 3 care of the client with another provider of health care, refer 4 primary responsibility for the care of a client to another 5 provider of health care or transfer the care of the client to a 6 medical facility, procedures for such consultation, co-7 management, referral or transfer and requirements to ensure 8 that a provider of health care who is consulted, with whom a 9 client's condition or symptom is co-managed or to whom 10 primary responsibility for the care of a client is referred is 11 appropriately qualified; and 12

(II) The information that must be included on the 13 form for providing informed refusal to consent to 14 consultation, co-management, referral or transfer pursuant to 15 section 27 of this act and the management of a client who 16 provides such informed refusal to consent. 17

- (h) Requirements governing the screening of clients in 18 accordance with chapter 442 of NRS and necessary measures 19 for the prevention of communicable diseases. 20
- (i) Requirements concerning the records of treatment and 21 outcomes that must be kept by a licensed certified 22 professional midwife. 23
- (j) Any other requirements necessary to optimize 24 obstetrical and neonatal outcomes for clients of licensed 25 certified professional midwives. 26

2. The Board may, by regulation, require an applicant for a license as a licensed certified professional midwife, to submit to the Central 6 Repository for Nevada Records of Criminal History a complete set of his or her fingerprints for submission to the Federal Bureau of Investigation for its report.

**Sec. 101.** Section 19 of this act is hereby amended to read as 36 follows: 37

Sec. 19. 1. An applicant for a license as a licensed 38 certified professional midwife ~~other than a license by 39 endorsement pursuant to section 20 of this act,~~ must submit to 40 the Division an application pursuant to this section in the form prescribed by the Division. The application must be 42 accompanied by a fee in the amount prescribed by regulation 43 of the State Board of Health pursuant to NRS 439.150, which 44 must not exceed \$1,000. The application must include, 45 – 80 – without limitation, proof that the applicant is certified as a 1 midwife by the North American Registry of Midwives, or its successor organization, and: 3

- (a) ~~[Has] Except as otherwise provided in subsection 2, 4 has~~ completed an educational program accredited by the 5 Midwifery Education Accreditation Council, or its successor 6 organization; ~~or 7~~
- ~~(b) Holds a Midwifery Bridge Certificate issued by the 8 North American Registry of Midwives, or its successor 9 organization, and has completed the Portfolio Evaluation 10 Process prescribed by that organization. 11~~

~~2. If the Division determines it to be necessary to 12 address shortages in the number of midwives practicing in 13 rural or underserved areas in this State, the Division may, 14 on a case-by-case basis, exempt an applicant from 15 complying with paragraph (a) of subsection 1 if the 16 applicant complies with paragraph (b) of subsection 1. 17~~

~~. "Secondary to current barriers that affect students with marginalized identities or those in rural communities attempting to receive their Certified Professional Midwife credential, as well as no option for in-state MEAC education, the Licensed Certified Professional Midwifery Board will have the authority to provide an extension to this deadline (Section 107.3) on a case-by-case basis."~~

3. A license as a licensed certified professional midwife 18 may be renewed upon submission to the Division of a 19 renewal application in the form prescribed by the Division. 20 The renewal application must: 21

- (a) Be accompanied by a renewal fee in the amount 22 prescribed by regulation of the State Board of Health 23 pursuant to NRS 439.150, which must not exceed \$1,000; and 24
- (b) Include any information required by the regulations 25 adopted by the Board pursuant to section 18 of this act. 26

~~[3.] 4. The State Board of Health shall establish by 27 regulation a procedure through which: 28~~

~~(a) An applicant may petition the State Board Division to reduce 29 the fees imposed pursuant to this section. An applicant may 30 qualify for such a reduction if the applicant demonstrates, to 31 the satisfaction of the State Board Division, that the fees imposed 32 pursuant to this section are an economic hardship on the 33 applicant. 34~~

~~(b) The State Board Division allocates a portion of the fees 35 imposed and collected pursuant to this section to programs 36 that promote applicants from marginalized identities through 37 increasing the numbers of such applicants and reducing 38 barriers that such applicants face. 39~~

~~[4.] 5. As used in this section, "marginalized identity" 40 means an identity or expression that causes or has historically 41 caused a person of such identity or expression to be 42 disproportionately discriminated against, harassed or 43 otherwise negatively treated or affected as a result of the 44 identity or expression.~~

6. The regulations shall prescribe that only if the Division has remaining funds available after utilizing the fees collected pursuant to this chapter to pay for its operating expenses to carry out the provisions of this chapter, the provision of subsection 3 shall be carried out.

7. The Division may accept gifts, grants or any other funds to carry out the provisions of this bill.

- Sec. 105.** 1. The Collaboration and Transfer Guidelines 14 Workgroup is hereby created. 15
2. The Administrator of the Division of Public and Behavioral 16 Health of the Department of Health and Human Services shall 17 appoint to the Workgroup: 18
- (a) One voting member who is a physician who practices in the 19 area of obstetrics or a certified nurse-midwife in Northern Nevada; 20
  - (b) One voting member who is a physician who practices in the 21 area of obstetrics or a certified nurse-midwife in Southern Nevada; 22
  - (c) One voting member who is a nurse manager of a labor and 23 delivery ward or a registered nurse with similar duties who is 24 responsible for coordinating transfers of pregnant women from a 25 home or birth center to a hospital and who practices in Northern 26 Nevada; 27
  - (d) One voting member who is a nurse manager of a labor and 28 delivery ward or a registered nurse with similar duties who is 29 responsible for coordinating transfers of pregnant women from a 30 home or birth center to a hospital and who practices in Southern 31 Nevada; 32
  - (e) One voting member who represents a provider of emergency 33 medical services in Northern Nevada; 34
  - (f) One voting member who represents a provider of emergency 35 medical services in Southern Nevada; and 36
  - (g) One nonvoting member to serve as a liaison with the State 37 Board of Health. 38
3. The Nevada Chapter of the National Association of Certified 39 Professional Midwives, or its successor organization, shall appoint considering the recommendation of the Nevada Association of Professional Midwives 40 to the Workgroup four voting members who are midwives who reside and 41 practice in Nevada. To the extent practicable, two of those members 42 must practice in Northern Nevada and two of those members must 43 practice in Southern Nevada. 44 – 86 –
4. The Nevada Hospital Association, or its successor 1 organization, may appoint to the Workgroup one member who is a 2 representative of that organization. 3
5. A vacancy on the Workgroup must be filled in the same 4 manner as the initial appointment. 5
6. Members of the Workgroup serve without compensation and 6 are not entitled to receive the per diem allowance and travel 7 expenses provided for state officers and employees generally. 8
7. A member of the Workgroup who is an officer or employee 9 of this State or a political subdivision of this State must be relieved 10 from his or her duties without loss of regular compensation to 11 prepare for and attend meetings of the Workgroup and perform any 12 work necessary to carry out the duties of the Workgroup in the most 13 timely manner practicable. A state agency or political subdivision of 14 this State shall not require an officer or employee who is a member 15 of the Workgroup to: 16
- (a) Make up the time he or she is absent from work to carry out 17 his or her duties as a member of the Workgroup; or 18
  - (b) Take annual leave or compensatory time for the absence. 19
8. The Workgroup may divide into one subcommittee of 20 members from Northern Nevada and one subcommittee of members 21 from Southern Nevada. 22
9. A majority of the voting members of the Workgroup or a 23 subcommittee thereof constitutes a quorum for the transaction of 24 business, and a majority of a quorum present at any meeting is 25 sufficient for any official action taken by the Workgroup or a 26 subcommittee thereof. 27
10. The Workgroup and each subcommittee thereof shall: 28
- (a) At its first meeting and annually thereafter, elect a Chair 29 from among its members; and 30
  - (b) Meet at the call of the Chair. 31

11. Not later than July 1, 2022, the Workgroup or, if the 32 Workgroup divides into subcommittees pursuant to subsection 8, 33 each subcommittee of the Workgroup, shall make recommendations 34 to the Board of Licensed Certified Professional Midwives created by 35 section 16 of this act concerning the regulations required by 36 paragraph (g) of subsection 1 of section 18 of this act governing the 37 transfer of the client of a licensed certified professional midwife to a 38 medical facility. Those recommendations must, to the extent 39 practicable, be guided upon peer-reviewed scientific evidence and 40 widely accepted best practices and include, without limitation, 41 provisions for the transmission of all information necessary for the 42 care of the client from the licensed certified professional midwife to 43 the medical facility. The Workgroup ceases to exist upon submission of those recommendations unless the Board requests that 1 the Workgroup continue to meet. 2

12. As used in this section: 3

(a) “Certified nurse-midwife” means an advanced practice 4 registered nurse who is certified as a nurse-midwife by the 5 American Midwifery Certification Board, or its successor 6 organization. 7

(b) “Licensed certified professional midwife” has the definition ascribed to in Section 9. ~~means a person 8 who is certified as a certified professional midwife by the North 9 American Registry of Midwives.~~ 10

(c) “Medical facility” has the meaning ascribed to it in 11 NRS 449.0151. 12

(d) “Northern Nevada” means Carson City and the counties of 13 Churchill, Elko, Eureka, Douglas, Humboldt, Lander, Lyon, 14 Pershing, Storey, Washoe and White Pine. 15

(e) “Southern Nevada” means the counties of Clark, Esmeralda, 16 Lincoln, Mineral and Nye.