2005 Wisconsin Act 292
[2005 Senate Bill 477]

Licensed Midwives

2005 Wisconsin Act 292 allows the Department of Regulation and Licensing (DRL) to license as midwives those persons who submit evidence satisfactory to DRL of either of the following: (1) the person holds a valid certified professional midwife credential granted by the North American Registry of Midwives or a successor organization; or (2) the person holds a valid certified nurse-midwife credential granted by the American College of Nurse Midwives or a successor organization.

The Act requires DRL to promulgate rules necessary to administer the statutes dealing with midwives. The rules need to be consistent with the standards regarding the practice of midwifery established by the National Association of Certified Professional Midwives or a successor organization, except that: (1) the rules must allow a licensed midwife to administer oxygen; (2) the rules must provide for the granting of temporary permits pending qualification for licensure; and (3) the rules may allow a licensed midwife to administer oxytocin (Pitocin) as a postpartum antihemorrhagic agent, intravenous fluids for stabilization, vitamin K, eye prophylactics, and other drugs or procedures as determined by DRL. DRL rules may not do any of the following: (1) require a licensed midwife to have a nursing degree or diploma; (2) require a licensed midwife to practice under the supervision of, or in collaboration with, another health care provider; (3) require a licensed midwife to enter into an agreement with another health care provider; (4) limit the location where a licensed midwife may practice; or (5) permit a licensed midwife to use forceps or vacuum extraction.

The Act states that no person may practice midwifery unless the person is granted a license or a temporary permit by DRL or is licensed as a nurse-midwife. In addition, no person may use the title “licensed midwife,” describe or imply that he or she is a licensed midwife, or represent himself or herself as a licensed midwife unless the person is granted a license by DRL or is a licensed nurse-midwife.

A licensed midwife must, at an initial consultation with a client, provide a copy of the DRL rules and disclose to the client orally and in writing all of the following: (1) the licensed midwife’s experience and training; (2) whether the licensed midwife has malpractice liability insurance coverage.
and the policy limits of any such coverage; (3) a protocol for medical emergencies, including transportation to a hospital, particular to each client; and (4) any other information required by DRL rule.

DRL is authorized to conduct investigations and hearings to determine whether the statutes or rules related to midwifery have been violated. In addition, DRL may reprimand a licensed midwife or deny, limit, suspend, or revoke a license if it finds that specified actions have occurred.

Under the Act, if DRL appoints an advisory committee to advise it on midwifery matters, the advisory committee must consist of only two licensed midwives (with a transitional provision for initial appointees), one nurse midwife who practices in an out-of-hospital setting, one physician who specializes in obstetrics and gynecology, and one public member who has received midwifery care in an out-of-hospital setting.

The Act also states that no health care provider is liable for an injury resulting from an act or omission of a licensed midwife, even if the provider has consulted with or accepted a referral from the licensed midwife.

**Effective Date:** The Act generally takes effect on May 1, 2007. However, the provisions relating to the advisory committee take effect on April 21, 2006.

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