

March 13, 2009

Mr. Chairman, members of the committee, my name is Ann Kron and I am speaking in favor of House Bill 390.

Like many women here today, I have had a number of different birth experiences, and from them I have learned the value and necessity of my freedom to choose the safest and best birth option for each of my pregnancies.

I have three children, ranging in age from 5 years to 8 months. My first child was born via c-section. I had really hoped and planned for a natural delivery, but being a first-time mom whose baby was in the breech position, I didn't feel that I had any other option for delivering my son safely.

During my second pregnancy I researched whether another c-section or a vaginal delivery would be best for me and my second son. I discussed the options and the risks with my doctor and we both agreed a vaginal delivery was a safe birthing option given my circumstances. However, I began to hear rumors that many hospitals were limiting or banning what are called vaginal births after cesarean, or VBACs – the delivery option that I was choosing in consultation with my doctor. This did not make sense to me from the research I had conducted regarding the safety of VBAC. However, my husband and I were not in the financial position to look at birthing options that our insurance would not cover – we felt we had no choice but to deliver in a hospital.

Despite the growing resistance of the local hospital, I was successful in a vaginal delivery of my second child. Three years later I was set to deliver my third child vaginally with the same doctor and same hospital. However, in the interim between my pregnancies, my local hospital had since banned VBAC even if you had previous safe and successful vaginal deliveries.

We worked tirelessly find other birthing options that would be safe for the birth of my daughter and also be covered by insurance. Eventually I felt utterly defeated by the control of the insurance company. We decided we had to stop worrying about the money and just do what we needed to have a safe delivery. I found a midwife who was well trained in attending VBACs and we were thrilled to have her deliver our daughter. Our midwife was knowledgeable, professional, and provided better service than we ever had at the doctor's office or hospital. We felt completely safe in her hands and had a beautiful, safe, birth of our daughter this past June.

We are still fighting and appealing with our insurance company to cover the expense of my daughter's delivery. It has been very discouraging. House Bill 390 will help women have more access to safe birthing options in this state and hopefully have more access to midwives. I also hope that licensing birth centers will help insurance companies cover the expense of birthing options outside of the monopoly of the hospital.

Thank you.

March 11, 2009

Senate Committee on Business, Labor, and Economic Affairs
HB 390
Helena, MT

Greetings Montana Senators,

I'm writing to urge you to support HB 390 concerning the licensure of birth centers.

My name is Jennifer Belitz. I am a South Dakota resident who has traveled twice to your state seeking the skilled and legal care of you Montana midwives.

I do not believe HB 390 "lowers" the standard for licensure of outpatient birth centers as stated to me by Senator Greg Barkus. It "changes" the standard to allow women financial access to choices in childbirth, a choice which is legal and recommended by many of your state licensed physicians.

A dilemma was presented to a mother who lived too far from her midwife. They decided to birth at a campground because no other "facility"/ "home" was available.

This bill does not alter a standard for a "specific" case. This bill allows a birth center to meet current state regulations like any other facility. Basically, I can have a mid-wife attended home birth in your state under current regulations. But, it would be against regulation for the same mother and same midwife to have a birth in a "facility". This law seems to impede the practice of a midwife.

A Yes vote for HB390 will not only benefit Montana women but will give your Montana midwives a facility which would allow them to care for out of state mothers that seek their expertise.

Sincerely

Jennifer Belitz
28233 Cascade Rd
Hot Springs, SD 57747

March 8, 2009

TO THE SENATE COMMITTEE - 2009 MONTANA LEGISLATURE

To the Business, Labor, and Economic Affairs Committee

Dear Committee Secretary Linda Keim,

I am writing to you today to express my support of HB 390, which is concerned with the licensing of "outpatient birth centers". As you may know from reading the current law, licensed birth centers presently come under "outpatient centers for primary care". Which means, a facility that provides care under the direction of a licensed physician. As it stands, this law makes it nearly impossible to open and maintain a licensed birth center, as there are very few, if any, physicians that will agree to direct an out of hospital birth center. Of the few that have opened up around the state, most have had to close down due to the lack of physician backup.

Although we are allowed by law to open and run birth centers, even without a licensed facility, we can not receive payment from private insurance or state Medicaid for services rendered there, if we are not licensed, therefore making it harder for the families that we serve. Access to private insurance and Medicaid is very important to these families, especially in these very hard economical times. In truth, we actually save the state and the private insurance companies money, as our fees are considerable less than a hospital delivery.

As far as needing direction from a physician, as stated in the current law, this is quite contradictory to our licensing, as from the very beginning the state approved

our practice as, independent practitioners. We were given a license to practice without the direction of a physician, and outside of the confines of the hospital setting. The state clearly approves of our scope of practice and supports our abilities to give safe and responsible maternity care to the citizens of Montana, under their guidelines, set down by their own state operated, health care board.

Yet, under the present law, we are denied the right to practice as we are licensed, as independent practitioners. In short, unless we can get out from under the confines of needing the direction of a physician (a physician that simply does not exist) we will continue to be denied the right to practice as we are licensed under our own licensing board.

Committee members, I myself am a practicing, licensed midwife in the state of Montana, and thinking back on all the families that I have served, who have sought my services to the present day, I am certain that they must have had the same degree of trust and regard for me as their health care provider, as they would have for any physician of choice. Even though there was no doctor directing the care that they received from me, they still trusted that I was a qualified midwife, licensed by the state of Montana, following a set of protocols, determined by my scope of practice, as a licensed midwife.

So, if we can be trusted to work in the home setting independently, without the direction of a physician, then why can we not be trusted to work independently in a birth center, as well? Are we independent practitioners or are we not ? Our licensing board says we are, so then why can we not apply for a license to run a birth center without the direction of a physician ?

Because the law presently lumps birthing centers under the "out patient center for primary care" category, we are not able to practice as independent practitioners, who do not need the direction of a doctor. This is just not consistent with our scope of practice, and with our very licensing, as granted to us by the State of Montana.

Committee members, our bill does not want to make huge changes to the present law, only to allow for the licensing of out patient birth centers, and make this a separate category so that it no longer falls under the category of, "outpatient center for primary care".

I ask for your support with this effort, and help us pass HB390. In doing so, you will not only show your support to the many families that choose to give birth with a licensed midwife in this state, but you will also be protecting the rights of the licensed midwife to practice as she was licensed, an independent practitioner.

Thank you so much members of the Committee for taking the time to read my letter, for all your hard work, and for your careful discernment in this matter.

Again, I ask you to vote yes on HB 390.

Victoria Cain

