

WEST VIRGINIA LEGISLATURE

2026 REGULAR SESSION

Introduced

Senate Bill 993

FISCAL
NOTE

By Senator Woodrum

[Introduced February 19, 2026; referred
to the Committee on Health and Human Resources;
and then to the Committee on Finance]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding a new article,
 2 designated §30-44-1, §30-44-2, §30-44-3, §30-44-4, §30-44-5, §30-44-6, §30-44-7, §30-
 3 44-8, §30-44-9, §30-44-10, §30-44-11, §30-44-12, §30-44-13, §30-44-14, and §30-44-15,
 4 relating to licensing and regulation of professional midwives; defining terms; providing
 5 licensing requirements; setting license renewal and reinstatement requirements; requiring
 6 a license to contain certain information; permitting the use of certain titles; setting grounds
 7 for discipline and procedures for denying, revoking, or suspending a license; setting
 8 exceptions; creating prohibitions and penalties; permitting rulemaking; requiring certain
 9 tests, medications, and devices; setting responsibilities; providing for confidentiality;
 10 creating immunity; setting transitional provisions; and giving a client certain rights.

Be it enacted by the Legislature of West Virginia:

ARTICLE 44. PROFESSIONAL MIDWIFE LICENSING AND REGULATION.

§30-44-1. Definitions.

1 "Administer" means the direct provision of a prescription drug or device, whether by
 2 injection, ingestion, or any other means, to the body of a client.

3 "Client" means a person receiving midwife care and shall be considered synonymous with
 4 "patient."

5 "Collaboration" means the process by which a licensed midwife and an appropriate
 6 obstetrical provider jointly manage the care of a client.

7 "Consultation" means discussing the aspects of an individual client's circumstance with
 8 other professionals for the purpose of adjusting the client's treatment plan.

9 "CPM" means the Certified Professional Midwife credential issued by the North American
 10 Registry of Midwives (NARM).

11 "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, 42 USC
 12 1320d et seq.

13 "Licensing Authority" means the West Virginia Board of Registered Nurses.

14 "MEAC" means the Midwifery Education Accreditation Council.

15 "Midwife Care" means providing primary maternity care and routine gynecologic care that
16 is consistent with NARM essential competencies, NACPM Standards for Practice, and NACPM
17 Scope of the CPM Credential.

18 "NACPM" means the National Association of Certified Professional Midwives.

19 "NARM" means the North American Registry of Midwives.

20 "Referral" means the process by which a licensed midwife arranges for an accepting
21 obstetrical provider to assume primary responsibility for the condition requiring referral, which
22 shall not preclude the licensed midwife from continuing in the provision of care as mutually agreed
23 upon with the accepting provider.

24 "Transfer" means the act of transporting a client to a licensed healthcare facility providing a
25 higher level of care.

§30-44-2. License requirements.

1 (a) The Licensing Authority shall issue a license to practice midwifery to an applicant who
2 meets the following requirements:

3 (1) Is at least 18 years of age;

4 (2) Has achieved a high school diploma or equivalent;

5 (3) Has a current Certified Professional Midwife credential issued by NARM or a successor
6 organization;

7 (4) Has completed one of the following educational pathways: graduation from a MEAC
8 accredited midwifery program, or completion of the portfolio evaluation process with a midwifery
9 bridge certificate granted by NARM;

10 (5) Has filed with the Licensing Authority an application as established by the Licensing
11 Authority, demonstrating that they have met the qualifications outlined in this section, and paid an
12 application fee, as established by the Licensing Authority, not to exceed \$500; and

13 (6) If the applicant has been licensed in another jurisdiction, they shall provide information

14 on the status of each license and any disciplinary action taken or pending.

15 (b) An applicant who meets the requirements of §30-44-2 of this code may be issued a
16 license to practice as a licensed midwife. The license is valid for two years from the date of initial
17 licensure and may be renewed pursuant to §30-44-3 of this code.

§30-44-3. License renewal and reinstatement.

1 (a) License renewal. –

2 (1) A license to practice as a licensed midwife may be renewed by completing the
3 Licensure Renewal Application for a licensed midwife and paying the fee established in §30-44-2
4 of this code.

5 (2) The Licensing Authority may deny an application for renewal for any reason which
6 would justify the denial of an original application.

7 (3) The licensed midwife shall provide evidence of current certification with NARM at the
8 time of renewal.

9 (4) Renewal applicants will provide proof of participation in data submission on perinatal
10 outcomes to a national or state midwifery data registry or professional organization, in a manner
11 consistent with the requirements established by the Licensing Authority by rule;

12 (5) Upon approval of the renewal application for a licensed midwife, the license shall be
13 renewed for two years.

14 (b) License reinstatement. –

15 (1) If the license has lapsed, an applicant may file the application for licensure as a
16 licensed midwife to request reinstatement and pay the fee established in §30-44-2 of this code.
17 The licensed midwife shall provide evidence of current certification with NARM at the time of
18 application for reinstatement.

19 (2) A licensed midwife whose license has been suspended may apply for reinstatement
20 upon the expiration of the suspension period by:

21 (A) Submitting a reinstatement application;

22 (B) Providing proof of compliance with any terms or conditions of the suspension order;

23 (C) Demonstrating current certification with NARM; and

24 (D) Paying the reinstatement fee established by the Licensing Authority, not to exceed
25 \$500.

26 (3) A licensed midwife whose license has been revoked may apply for reinstatement after a
27 minimum of one year by:

28 (A) Submitting a reinstatement application to the Licensing Authority;

29 (B) Demonstrating evidence of rehabilitation, including completion of any required
30 corrective actions specified in the revocation order;

31 (C) Providing proof of current certification with NARM; and

32 (D) Paying the reinstatement fee established by the Licensing Authority, not to exceed
33 \$500.

34 (4) The Licensing Authority may expedite reinstatement applications for suspensions or
35 revocations if the applicant demonstrates urgency in returning to practice due to critical community
36 needs or exceptional circumstances.

§30-44-4. Contents of license.

1 (a) Each license issued by the Licensing Authority shall bear:

2 (1) A serial number;

3 (2) The full name of the applicant;

4 (3) The date of expiration;

5 (4) The date of issuance;

6 (5) The title of the Licensing Authority; and

7 (6) The signature of an authorized representative of the Licensing Authority.

§30-44-5. Use of titles.

1 An individual licensed by the Licensing Authority as a licensed midwife pursuant to the
2 provisions of this article shall be known as a licensed midwife in the state of West Virginia, and

3 may use the initials "LM" after his or her name. No other person may assume a title or use
4 abbreviations or any other words, letters, figures, signs, or devices to indicate that the person
5 using the same is a licensed midwife.

§30-44-6. Denial, revocation, or suspension of license; grounds for discipline.

1 (a) The Licensing Authority shall have the power to deny, revoke, or suspend any license to
2 provide midwife care issued or applied for in accordance with the provisions of this article, or to
3 otherwise discipline a licensee or applicant upon proof that he or she:

4 (1) Is or was guilty of fraud or deceit in procuring or attempting to procure a license to
5 provide midwife care;

6 (2) Has been convicted of a felony;

7 (3) Is unfit or incompetent by reason of negligence, habits, or other causes;

8 (4) Is habitually intemperate or is addicted to the use of habit-forming drugs;

9 (5) Is mentally incompetent;

10 (6) Is guilty of conduct derogatory to the morals or standing of the profession;

11 (7) Is calling themselves a licensed midwife without a current license;

12 (8) Has willfully or repeatedly violated any of the provisions of this article;

13 (9) Is providing or offering to provide services which are outside of the scope of practice as
14 defined by NACPM.

§30-44-7. Exceptions.

1 (a) This article shall not be construed to prohibit:

2 (1) An appropriate licensed health care provider or other person from providing emergency
3 care, including care of a precipitous delivery; or

4 (2) Any licensed midwife from delegating to personnel under his or her supervision so long
5 as such activities or functions are nondiscretionary and do not require the exercise of professional
6 judgment for their performance.

7 (b) Any person performing tasks related to midwife care under the direct and immediate

8 supervision of a licensed doctor of medicine or osteopathy, a certified nurse-midwife, or a licensed
9 midwife during completion of NARM requirements to achieve a CPM credential.

§30-44-8. Prohibitions and penalties.

1 (a) It shall be a misdemeanor for any person to:

2 (1) Refer to themselves as a licensed midwife while their license issued under the
3 provisions of this article is suspended or revoked;

4 (2) Use in connection with his or her name any designation tending to imply that he or she
5 is licensed to provide midwife care unless duly licensed to practice under the provisions of this
6 article; or

7 (3) Provide midwife care with an active CPM credential without being licensed as a
8 licensed midwife; or

9 (4) Otherwise violate any provisions of this article.

10 (b) Upon conviction, such misdemeanor shall be punishable by a fine of no more than
11 \$250.

§30-44-9. Regulations for providing midwife care.

1 (a) The Licensing Authority shall propose rules, pursuant to §29A-3-1 et seq. of this code,
2 necessary to implement this article that:

3 (1) Are consistent with NACPM standards of practice and scope of the credential;

4 (2) Do not require a written agreement with another health care professional or require
5 assessment by another health care professional as a condition of receiving midwife care services;
6 and

7 (3) Require continuing education as determined by the licensing authority and peer review.

8 The contents of such peer review shall be undiscoverable, however nothing in this section shall be
9 construed to prevent medical records or other documents from discovery during the course of
10 legal complaint.

§30-44-10. Medical tests, medications, and medical devices.

1 (a) A licensed midwife may order or request medical testing, obtain, carry, and administer
2 medications, and obtain and use medical devices within the midwife’s scope of practice for
3 providing midwife care.

4 (1) The licensed midwife shall not obtain or use any drug, in Schedule I through V of the
5 Drug Control Act.

6 (2) A licensed midwife may obtain medications and devices to treat conditions from entities
7 including a pharmacy, or a manufacturer, medical equipment supplier, outsourcing facility,
8 warehouser, or wholesale distributor.

9 (3) An entity that provides medication to a licensed midwife in accordance with this section,
10 and who relies in good faith upon the license information provided by the licensed midwife is not
11 subject to liability for providing the medication.

12 (4) All medication administered must be documented in the client's medical record.

§30-44-11. Licensed Midwife responsibilities.

1 (a) Risk assessment. –

2 (1) Upon initiation of care, a licensed midwife shall review the client's medical history and
3 identify indicators that require disclosure of risk for a planned out-of-hospital birth. If the client is
4 under the care of a licensed healthcare professional for any chronic medical condition, the
5 licensed midwife shall consult with an appropriate obstetrical healthcare provider as part of the risk
6 assessment for evaluating appropriateness of birth outside of a hospital.

7 (2) The licensed midwife shall offer standard tests and screenings for evaluating risks and
8 shall document client response to such recommendations. The licensed midwife shall continually
9 assess the pregnant woman and baby to recognize conditions that may arise during care that
10 require disclosure of risk for birth outside of a hospital.

11 (3) If, on initial or subsequent assessment, one of the conditions listed in this section exists
12 for the client seeking midwife care, the licensed midwife shall consult with an appropriate
13 obstetrical provider and shall consult, collaborate, or refer as appropriate and shall document that

14 recommendation in the client record:

15 (A) Complete placenta previa;

16 (B) Partial placenta previa persisting after 32 weeks;

17 (C) HIV infection;

18 (D) Cardiovascular disease, including hypertension;

19 (E) Severe psychiatric illness;

20 (F) Pre-eclampsia or eclampsia;

21 (G) Intrauterine growth restriction;

22 (H) Known potentially serious anatomic fetal abnormalities;

23 (I) Any type of diabetes not controlled by diet and exercise;

24 (J) Labor prior to 37 weeks;

25 (K) Substance use disorder with current or recent use; or

26 (L) Any other condition or symptom which may threaten the life of the client or fetus, as
27 assessed by the licensed midwife exercising reasonable skill and knowledge.

28 (4) If a client with a condition listed in this section declines to accept an indicated
29 consultation, collaboration, or referral, the licensed midwife shall document the refusal in writing.

30 In addition, the licensed midwife shall refer the client to an appropriate provider and document the
31 referral in writing, regardless of the client's refusal.

32 (b) Transfers. –

33 (1) Every licensed midwife shall have a written plan for emergency transfer, transport of an
34 infant to a newborn nursery or neonatal intensive care nursery, or transport of an individual to an
35 appropriate obstetrical department or patient care area. Transport via private vehicle is an
36 acceptable method of transport if it is the most expedient method for accessing medical services.

37 (2) When the maternal or fetal health status requires transfer to a health care facility for a
38 higher level of care, the licensed midwife shall:

39 (A) Initiate immediate transport according to the written plan for emergency transfer;

40 (B) Provide emergency stabilization until emergency medical services arrive or transfer is
41 completed; and,

42 (C) Notify the receiving provider or hospital, if possible, of:

43 (i) The reason for the transfer;

44 (ii) A brief relevant clinical history; and

45 (iii) The expected time of arrival

46 (3) The licensed midwife may continue to provide routine or urgent care in coordination
47 with any emergency services personnel and may address the psychosocial needs of the client
48 during the change of birth setting;

49 (c) Medical records. –

50 (1) The licensed midwife shall maintain a complete and accurate record for each client that
51 documents:

52 (A) The client's history;

53 (B) Physical examinations;

54 (C) Laboratory test results;

55 (D) Medications administered;

56 (E) Antepartum visits;

57 (F) Consultations, collaborations, and referrals;

58 (G) Labor and delivery;

59 (H) Postpartum visits; and

60 (I) Neonatal evaluations.

61 (2) The licensed midwife shall comply with all state and federal laws and regulations
62 regarding the confidentiality of the client's records such as pursuant to the Health Insurance
63 Portability and Accountability Act (HIPAA) of 1996, Pub.L. No. 104-191, 110 Stat. 1936.

64 (d) Newborn care. – The customary scope of care of a newborn up to six weeks of age by a
65 licensed midwife includes, but is not limited to clinical assessment, treatment, education, support,

66 and referral.

§30-44-12. Confidentiality

1 A licensed midwife may not willfully or negligently breach the confidentiality between a
2 licensed midwife and a client. A breach of confidentiality that is required or permitted by applicable
3 law or beyond the control of the practitioner shall not be considered negligent or willful.

§30-44-13. Immunity.

1 No person, other than the licensed midwife who provided care to the patient, shall be liable
2 for the licensed midwife's negligent, grossly negligent, or willful and wanton acts or omissions.

§30-44-14. Transitional provisions.

1 (a) Any individual who, on the effective date of this article, holds a valid Certified
2 Professional Midwife (CPM) credential issued by the North American Registry of Midwives
3 (NARM) and who is actively engaged in the practice of midwifery in West Virginia shall be eligible
4 for licensure under this article without meeting additional educational or clinical requirements,
5 provided that the individual:

6 (1) Submits an application for licensure to the Licensing Authority within 12 months of the
7 effective date of this article;

8 (2) Provides proof of current certification and good standing with NARM; and

9 (3) Pays the applicable application fee established by the Licensing Authority.

10 (b) After the expiration of the 12-month transition period, all applicants for licensure must
11 meet the requirements established in §30-44-2 of this code.

12 (c) The Licensing Authority shall issue a provisional or temporary license to qualified
13 applicants pending final review of their complete application under timelines established by rule,
14 provided that the applicant meets all minimum qualifications and submits proof of current NARM
15 certification.

16 (d) Nothing in this section shall be construed to limit the authority of the Licensing Authority
17 to deny or discipline an applicant for reasons enumerated in §30-44-6 of this code.

§30-44-15. Client rights and informed refusal.

1 (a) A client under the care of a licensed midwife retains the fundamental right to make
2 decisions regarding her pregnancy, labor, birth, and newborn care, including the right to refuse
3 recommended tests, treatments, procedures, or hospital transfer, consistent with the provisions of
4 §16-30-1 et seq. of this code, which affirms the right of an individual to direct her own maternal
5 health care, choose her birth setting, and decline any medical procedure.

6 (b) A licensed midwife shall provide full and accurate information about the benefits, risks,
7 and alternatives associated with any recommended intervention or transfer and shall document
8 the client's decision and reasoning in the client's medical record.

9 (c) A client's informed refusal of a recommendation or transfer does not, by itself, constitute
10 unprofessional conduct or negligence on the part of the licensed midwife, provided that:

11 (1) The licensed midwife exercised reasonable skill and judgment;

12 (2) The client's refusal was voluntary and informed; and

13 (3) The refusal and midwife's counseling were fully documented.

14 (d) If, during labor or delivery, a new or acute condition arises that places the client or fetus
15 in immediate jeopardy, the licensed midwife shall exercise professional judgment to initiate
16 emergency care, including activating emergency medical services, regardless of prior refusals,
17 and shall continue providing supportive care until an appropriate provider or facility assumes
18 responsibility.

NOTE: The purpose of this bill is to license and regulate the practice of midwifery in this state.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.