Illinois physicians respectfully request your “NO” vote on House Bill 4364, which would license “certified midwives” and allow them to provide unsupervised home birthing services.

The purpose of any law licensing and regulating health care professionals is to protect the public by ensuring that the professional has the necessary education and training to safely deliver the care they are seeking to provide. Any consumer preference needs to be balanced by safety standards to ensure that all people in Illinois have access to the highest quality care and trained professionals.

That is the essential reason why the physician members of the groups signed on to this position paper are opposed to House Bill 4364. House Bill 4364 would license certified midwives and allow them to not only perform home births, but a whole host of other services that go hand in hand with caring for a pregnant woman and a newborn, including some services that are distinctly medical in nature, such as using pharmaceuticals to control hemorrhaging. While the bill would allow midwives to perform these services in Illinois, House Bill 4364 simply does not have adequate educational requirements to create a newly licensed profession. The legislation seems to require that candidates obtain “accredited” training by the Midwifery Education and Accreditation Council. However, there are loopholes in the bill that allow a midwife to be apprentice-trained with a minimal amount of “continuing education” hours and still seek licensure.

The certified midwives described in this legislation do not have the minimum education to screen out those women who may have complications arise later in pregnancy.

The low educational requirements in House Bill 4364 are problematic starting in the early months of pregnancy. Women may develop complications with pregnancy should be “screened out” from having a home birth in order to preserve the safety of both the mother and the child. Without adequate training, the certified midwife will not be able to tell when a home birth may be too risky for the mother and child. House Bill 4364 also does not require midwives to maintain a collaborative agreement with a physician, which means that there will be no required collaboration with a physician to ensure that high-risk pregnancies are identified at all stages of pregnancy.

The certified midwives described in this legislation do not have the minimum education to address emergencies that may arise in home birth settings.

Complications become more significant when they occur in the home birth setting, especially when the nearest medical facility can be an hour, or even precious minutes, away. Calling 911 is not enough to address the complications that may arise in childbirth. Again, while House Bill 4364 seems to require that candidates obtain training from what is referred to as a pathway accredited by the Midwifery Education and Accreditation Council, the actual education and training requirements in the bill are inconsistent and unclear. Inconsistent educational requirements will mean that a midwife will not have the training or experience to address medical complications that may arise.

We urge your “NO” vote on House Bill 4364