



April 6, 2020

Dear Governor Newsom and Health and Human Services Secretary Ghaly,

We are writing on behalf of the half-million mothers who will give birth in our state this year, who are frightened about the risk of contracting COVID-19 in a hospital setting and concerned about the Governor's predicted shortages of hospital beds, nursing staff, and medical doctors.

We urge you to provide swift orders as noted below to our state's hospitals and health insurers regarding how birth should be managed during the COVID crisis.

1. As nursing staff are already overburdened and no one should ever be asked to birth without the support person of her choice, direct hospitals (and licensed and/or accredited birth centers and any COVID Auxiliary Maternity Units¹ that may be

created), as New York Governor Cuomo has², that one support person without a fever be allowed to be present while women are in labor. The Los Angeles Times has recently reported incidents of mothers being required to birth alone.³

2. As pregnant women are often not aware of their option to deliver in non-hospital settings through licensed midwives⁴, direct private and public insurers/health plans including administrators of ASO Non-ERISA and ERISA plans to immediately:
 - a. Disclose to all enrollees who reside in California and group policy holders whose policies cover California residents:
 - i. That non-hospital births (performed in licensed and/or accredited birth centers⁵ or home births and any COVID Auxiliary Maternity Units) are a covered benefit including the services of licensed midwives.
 - ii. The website links to names, locations and contact information for all licensed and/or accredited birth centers (if all licensed and/or accredited birth centers are not already in the insurer's network and provider directory) and any COVID Auxiliary Maternity Units in the state.
 - iii. The following summary of a California Licensed Midwife's scope of practice as described by the California Medical Board⁶:

"The holder of a midwifery license may attend cases of normal pregnancy and childbirth (see definition below) and provide prenatal, intrapartum, and postpartum care, including family-planning care, for the mother, and immediate care for the newborn.

The practice of midwifery does not include the assisting of childbirth by any artificial, forcible, or mechanical means, nor the performance of any version of these means.

Midwives are not authorized to practice medicine or to perform surgery.

Licensed midwives are authorized to directly obtain supplies and devices, obtain and administer drugs and diagnostic tests, order testing, and receive reports that are necessary to the practice of midwifery and consistent with his or her scope of practice.

Normal pregnancy and childbirth is defined as meeting all of the following conditions:

There is an absence of any preexisting maternal disease or condition likely to affect the pregnancy.

There is an absence of significant disease arising from the pregnancy.

There is a singleton fetus.

There is a cephalic presentation.

The gestational age of the fetus is greater than 37 0/7 weeks and less than 42 0/7 completed weeks of pregnancy.

Labor is spontaneous or induced in an outpatient setting."

- b. Cover/Reimburse contracted and non-contracted licensed and/or accredited birth center facility and COVID Auxiliary Maternity Unit fees, applicable professional services, including coverage of a primary and secondary attending midwife; and medically necessary supplies including personal protective equipment.
 - c. Cover/Reimburse contracted and non-contracted licensed midwives including coverage of a primary and secondary attending midwife; and medically necessary supplies including personal protective equipment.
 - d. Cover/Reimburse contracted and non-contracted licensed Ob/Gyns and Family Practice Physicians who serve as obstetricians for consultation (including telehealth consultation) with licensed midwives regarding maternal care.
 - e. Cover/Reimburse contracted and non-contracted licensed Pediatricians and Family Practice Physicians to consult with licensed midwives regarding pediatric care.
3. Given the increased risk of anxiety and depression due to the COVID-19 pandemic, urge private and public insurers/health plans including administrators of ASO Non-ERISA and ERISA plans covering enrollees who reside in California, to:
 - a. Cover a minimum of six (6) mental health outpatient office visits and/or support group sessions (via telehealth or in-person as in-person services become available) for pregnant or postpartum women who have screened positive for a maternal mental health disorder. Mental health services shall be provided by licensed behavioral health providers or peer support specialists practicing under the supervision of a licensed behavioral health provider and trained by an agency contracted by the California Office of Statewide Health Planning and Development (OSHPD)⁷
 - b. Disclose to all enrollees who reside in California and group policy holders whose policies cover California residents the availability of the covered benefit.

We look forward to working with you on these and other issues in the future.

With much urgency,



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¹https://docs.google.com/document/d/1_hhXrx dihUxJ7uVWqjaSYw0XOAwqD21MODNaEZ-L7cc/edit?usp=sharing

Available soon at: <https://www.birthcenters.org/>

²<https://www.governor.ny.gov/news/no-20212-continuing-temporary-suspension-and-modification-laws-relating-disaster-emergency>

³<https://www.latimes.com/california/story/2020-04-01/coronavirus-labor-delivery-los-angeles-hospitals>

⁴<https://www.law.cornell.edu/cfr/text/42/438.12>

⁵ <https://drive.google.com/file/d/1q0JfKgAjY6TTelHd0MCuHqpbW0aber0M/view?usp=sharing>

Available via search function: <https://www.birthcenters.org/search/custom.asp?id=2926>

⁶https://www.mbc.ca.gov/Licensees/Midwives/Midwives_Practice_Act.aspx

⁷<https://oshpd.ca.gov/loans-scholarships-grants/grants/wet/>