

Insurance Committee
546-S
Topeka, Kansas 66612

February 16, 2022

Dear Chairman Longbine & Insurance Committee Members,

I am submitting testimony in support of SB 399.

The inclusion of “maternity center” as a defined healthcare provider is a technical update such that a qualified KDHE licensed maternity center licensee can access the availability plan and healthcare stabilization fund as a malpractice line of last resort. It is not a mandate.

After the closure of the badly needed Kansas City Kansas maternity center on July 1, 2021, we provided testimony at the Bob Bethel Oversight Committee on September 22, 2021 that facility malpractice coverage is required by KanCare and Commercial Healthcare Insurance companies in order to serve its members. Lack of access to affordable malpractice equals is a barrier to providing high value and affordable healthcare services for Kansas families and taxpayers.

SB 399 is the result of diligent work with the Healthcare Stabilization Fund Executive Director, its counsel and a hearing on its merits at the Healthcare Stabilization Fund Oversight Committee on Nov 12, 2021. At that time, there was general consensus that this small statute fix was needed. KMA noted its inclusion was consistent with the corporate practice of medicine statute.

Senator Holscher represents our Overland Park location and as a member of the HCSF Oversight Committee and Insurance Committee sponsored SB 399. Cathy Gordon, BOHA Certified Nurse Midwife Committee Member, New Birth Company Co-Founder and national maternity center regulatory expert supported language harmony with KDHE definitions.

Without this technical fix, my ability to continue to operate our remaining maternity center is uncertain at best.

Please pass SB 399 out of committee prior to turn around. Thank you and I welcome your questions.

Sincerely,



Kendra Wyatt, BSIE
Chief Executive Officer & Co-Founder
New Birth Company

*The term “Maternity Centers” has been used to reflect Kansas statute where as “Birth Centers” is more commonly used in public and healthcare settings. Birth Centers are recognized as a primary American Level of maternity care and is a federally mandated Medicaid service.

Levels of Maternity Care

TABLE 2
Levels of maternal care by services

Required service	Level of maternal care				
	Birth centers	Level I	Level II	Level III	Level IV
Nursing	Adequate numbers of qualified professionals with competence in level I care criteria	Continuously available RNs with competence in level I care criteria Nursing leadership has expertise in perinatal nursing care	Continuously available RNs with competence in level II care criteria Nursing leadership has formal training and experience in perinatal nursing care and coordinates with respective neonatal care services	Continuously available nursing leaders and RNs with competence in level III care criteria and have special training and experience in the management of women with complex maternal illnesses and obstetric complications	Continuously available RNs with competence in level IV care criteria Nursing leadership has expertise in maternal intensive and critical care
Minimum primary delivery provider to be available	CNMs, CMs, CPMs, and licensed midwives	Obstetric provider with privileges to perform emergency cesarean delivery	Ob-gyns or MFMs	Ob-gyns or MFMs	Ob-gyns or MFMs
Obstetrics surgeon		Available for emergency cesarean delivery	Ob-gyn available at all times	Ob-gyn onsite at all times	Ob-gyn onsite at all times
MFMs			Available for consultation onsite, by phone, or by telemedicine, as needed	Available at all times onsite, by phone, or by telemedicine with inpatient privileges	Available at all times for onsite consultation and management
Director of obstetric services			Board-certified ob-gyn with experience and interest in obstetrics	Board-certified ob-gyn with experience and interest in obstetrics	Board-certified MFM or board-certified ob-gyn with expertise in critical care obstetrics
Anesthesia		Anesthesia services available	Anesthesia services available at all times Board-certified anesthesiologist with special training or experience in obstetrics, available for consultation	Anesthesia services available at all times Board-certified anesthesiologist with special training or experience in obstetrics is in charge of obstetric anesthesia services	Anesthesia services available at all times Board-certified anesthesiologist with special training or experience in obstetrics is in charge of obstetric anesthesia services
Consultants	Established agreement with a receiving hospital for timely transport, including determination of conditions necessitating consultation and referral	Established agreement with a higher-level receiving hospital for timely transport, including determination of conditions necessitating consultation and referral	Medical and surgical consultants available to stabilize	Full complement of subspecialists available for inpatient consultation, including critical care, general surgery, infectious disease, hematology, cardiology, nephrology, neurology, and neonatology	Adult medical and surgical specialty and subspecialty consultants available onsite at all times, including those indicated in level III and advanced neurosurgery, transplant, or cardiac surgery

ACOG. Levels of maternal care. Am J Obstet Gynecol 2015. (continued)

