

**Second Regular Session  
Seventy-fourth General Assembly  
STATE OF COLORADO**

**PREAMENDED**

*This Unofficial Version Includes Committee  
Amendments Not Yet Adopted on Second Reading*

LLS NO. 24-0285.01 Yelana Love x2295

**HOUSE BILL 24-1262**

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**HOUSE SPONSORSHIP**

**Garcia and Jodeh,**

**SENATE SPONSORSHIP**

**Buckner and Michaelson Jenet,**

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**House Committees**

Health & Human Services  
Appropriations

**Senate Committees**

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**A BILL FOR AN ACT**

101 **CONCERNING MATERNAL HEALTH, AND, IN CONNECTION THEREWITH,**  
102 **MAKING AN APPROPRIATION.**

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)*

Current law requires "direct-entry midwives" to register with the division of professions and occupations in the department of regulatory agencies before practicing. **Sections 2 through 12** of the bill make changes within the direct-entry midwives practice act to update the title of these professionals to "certified professional midwives" and change the regulation from registration to licensure. **Sections 21 through 31** make

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
*Capital letters or bold & italic numbers indicate new material to be added to existing law.  
Dashes through the words or numbers indicate deletions from existing law.*

the same updates to current law in other statutes outside of the practice act.

Current law allows the state board for community colleges and occupational education to use unexpended resources from the in-demand short-term health-care credentials program (program) to expand the eligible programs that may receive support through the program. **Section 13** allows the board to expand the eligible programs to include certified professional midwives.

**Section 14** requires the civil rights commission to establish certain parameters when receiving reports for maternity care. **Section 15** adds pregnancy as a protected class for purposes of discrimination in places of public accommodation.

The bill adds a midwife to the environmental justice advisory board (**section 16**) and the governor's expert emergency epidemic response committee (**section 20**).

**Section 17** requires a health facility that provides maternal health services to notify certain individuals before eliminating or reducing the services.

**Section 18** adds midwifery as a preferred area of expertise for members of the health equity commission.

**Section 19** requires the maternal mortality review committee to:

- Study closures related to perinatal health-care practices and facilities and perinatal health-care deserts and assets related to perinatal health and health-care services across the state, not limited to obstetric providers;
- Identify major outcome categories that the department of public health and environment should track over time and identify risks and opportunities;
- Explore the effects of practice and facility closures (closures) on maternal and infant health outcomes and experiences;
- Identify recommendations during closures and resultant transfers of care;
- Identify best practice guidelines during closures and resultant transfers of care; and
- Create a maternal health desert and asset map.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1. Legislative declaration.** (1) The general assembly  
3 finds and declares that:

4 (a) With the increased demand for reproductive health-care

1 services in the state, it is important to support the full infrastructure of  
2 reproductive health-care providers. This includes:

3 (I) Integrating the services and expertise of certified professional  
4 midwives;

5 (II) Assessing and maintaining the level of reproductive  
6 health-care services needed in a community in a way that is accessible to  
7 the community;

8 (III) Understanding the assets and the gaps in services at the  
9 county level; and

10 (IV) Understanding and implementing best practices for when  
11 services are reduced or discontinued in a community, including providing  
12 notice and a transition plan to the state in order to recognize and monitor  
13 the ongoing impact to the community.

14 (b) Demand for community birth options jumped 30% from 2019  
15 to 2020, with the majority of demand coming from Black and Latinx  
16 birthing people;

17 (c) People are choosing community birth care because they find  
18 it supportive of not just their health needs but their social, spiritual, and  
19 community values and needs; however, community birth facilities and  
20 providers face barriers to providing care;

21 (d) The term "direct-entry midwife" has inconsistent meaning  
22 across states and causes confusion, whereas "Certified Professional  
23 Midwife" (CPM) more clearly communicates what these providers do in  
24 Colorado, and "Certified Professional Midwife" is consistent with the  
25 nationally recognized credential for midwives specializing in community  
26 birth. Colorado statutes should be updated to be consistent with other  
27 states and the national language.

1 (e) While not reflected in statute, CPM is the credential that  
2 direct-entry midwives have been required to have to practice in Colorado,  
3 as the director of the division of professions and occupations started  
4 accepting only this credential as proof of satisfying the educational  
5 requirements listed in statute;

6 (f) Over 95% of the direct-entry midwives actively practicing in  
7 the state hold the CPM credential, and those who don't have decades of  
8 experience;

9 (g) CPMs are considered licensed in other states, including in the  
10 surrounding states of Wyoming, New Mexico, Utah, and Arizona.  
11 Colorado statutes should be updated to reflect our alignment with national  
12 trends and neighboring states.

13 (h) Patients should have the ability to choose the provider that is  
14 right for them, regardless of the setting. Especially for underserved Black,  
15 Indigenous, Asian, rural, refugee, or immigrant communities or someone  
16 dealing with a substance use or mental health condition, the ability to  
17 choose a provider that can meet their needs isn't just important, it could  
18 be lifesaving.

19 (i) Facility and practice closures leave communities scrambling  
20 when they close suddenly and without guidance to patients. When  
21 closures occur, the state must ensure that vulnerable communities are  
22 protected.

23 (j) The preventable maternal mortality crisis is only growing  
24 worse in our state, disproportionately harming Black and Indigenous  
25 people; and

26 (k) The maternal mortality review committee has made several  
27 recommendations to combat this crisis, including:

1 (I) Increased access to a variety of health-care professionals, such  
2 as CPMs;

3 (II) Addressing critical maternal health workforce shortages, such  
4 as ensuring that CPMs can provide care at their full scope and preventing  
5 perinatal facility and practice closures as much as possible;

6 (III) Examining unintended consequences of policies and  
7 procedures, such as exploring the impact of facility and practice closures  
8 on Black, Indigenous, Latinx, Asian, rural, and immigrant and refugee  
9 communities; and

10 (IV) The Colorado department of public health and environment  
11 recommends that health-care providers be trained and prepared to provide  
12 a type of care that CPMs already specialize in. The midwifery model of  
13 care exemplifies certain recommendations such as dyad care,  
14 trauma-informed care, shared decision-making, and expertise in safe  
15 transitions, care navigation, and wraparound services.

16 **SECTION 2.** In Colorado Revised Statutes, 12-225-101, **amend**  
17 (1)(a), (1)(b), and (2) introductory portion as follows:

18 **12-225-101. Scope of article - exemptions - legislative**  
19 **declaration.** (1) (a) This article 225 applies only to ~~direct-entry~~  
20 CERTIFIED PROFESSIONAL midwives and does not apply to those persons  
21 who are otherwise licensed by the state of Colorado under this title 12 if  
22 the practice of midwifery is within the scope of that licensure.

23 (b) (I) A person who is a certified nurse midwife authorized  
24 pursuant to section 12-255-111, a certified midwife authorized pursuant  
25 to section 12-255-111.5, or a physician as provided in article 240 of this  
26 title 12 shall not simultaneously be so licensed and also be ~~registered~~  
27 LICENSED under this article 225. A physician, certified nurse midwife, or

1 certified midwife who holds a license in good standing may relinquish the  
2 license and subsequently be ~~registered~~ LICENSED under this article 225.

3 (II) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall not  
4 represent oneself as a nurse midwife, certified nurse midwife, or certified  
5 midwife.

6 (III) The fact that a ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife  
7 may hold a practical or professional nursing license does not expand the  
8 scope of practice of the ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife.

9 (IV) The fact that a practical or professional nurse may be  
10 ~~registered~~ LICENSED as a ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife  
11 does not expand the scope of practice of the nurse.

12 (2) Nothing in this article 225 shall be construed to prohibit, or to  
13 require ~~registration~~ LICENSURE under this article 225, with regard to:

14 **SECTION 3.** In Colorado Revised Statutes, **amend** 12-225-103  
15 as follows:

16 **12-225-103. Definitions.** As used in this article 225, unless the  
17 context otherwise requires:

18 (1) "Birth center" means a freestanding facility licensed by the  
19 department of public health and environment that:

20 (a) Is not a hospital, attached to a hospital, or located in a hospital;

21 (b) Provides prenatal, labor, delivery, and postpartum care to  
22 low-risk pregnant persons and newborns; and

23 (c) Provides care during delivery and immediately after delivery  
24 that is generally less than twenty-four hours in duration.

25 (2) "CERTIFIED PROFESSIONAL MIDWIFE" MEANS A PERSON WHO  
26 PRACTICES CERTIFIED PROFESSIONAL MIDWIFERY.

27 (3) "CERTIFIED PROFESSIONAL MIDWIFE CREDENTIAL" MEANS A

1 CERTIFIED PROFESSIONAL MIDWIFE CREDENTIAL ISSUED BY THE NORTH  
2 AMERICAN REGISTRY OF MIDWIVES, OR ITS SUCCESSOR ORGANIZATION.

3 (4) "CERTIFIED PROFESSIONAL MIDWIFERY" OR "PRACTICE OF  
4 CERTIFIED PROFESSIONAL MIDWIFERY" MEANS ADVISING, ATTENDING, OR  
5 ASSISTING AN INDIVIDUAL DURING PREGNANCY, LABOR AND NATURAL  
6 CHILDBIRTH AT HOME OR AT A BIRTH CENTER, AND THE POSTPARTUM  
7 PERIOD IN ACCORDANCE WITH THIS ARTICLE 225.

8 ~~(1.5)~~ (5) "Client" means a pregnant woman for whom a  
9 ~~direct-entry midwife~~ CERTIFIED PROFESSIONAL MIDWIFE performs  
10 services. For purposes of perinatal or postpartum care, "client" includes  
11 the woman's newborn.

12 ~~(2)~~ "Direct-entry midwife" means a person who practices  
13 ~~direct-entry midwifery.~~

14 ~~(3)~~ "Direct-entry midwifery" or "practice of direct-entry  
15 midwifery" means the advising, attending, or assisting of a woman during  
16 pregnancy, labor and natural childbirth at home or at a birth center, and  
17 the postpartum period in accordance with this article 225.

18 ~~(4)~~ (6) "Natural childbirth" means the birth of a child without the  
19 use of instruments, surgical procedures, or prescription drugs other than  
20 those for which the ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife has  
21 specific authority under this article 225 to obtain and administer.

22 ~~(5)~~ (7) "Perinatal" means the period from the twenty-eighth week  
23 of pregnancy through seven days after birth.

24 ~~(6)~~ (8) "Postpartum period" means the period of six weeks after  
25 birth.

26 **SECTION 4.** In Colorado Revised Statutes, 12-225-104, **amend**  
27 (1), (3), (4) introductory portion, (4)(f), (5), and (6); and **add** (1.5), (1.7),

1 and (5.5) as follows:

2 **12-225-104. Requirement for licensure by the division - annual**  
3 **fee - renewal - grounds for revocation - repeal.** (1) (a) PRIOR TO  
4 SEPTEMBER 1, 2024, every direct-entry midwife shall register with the  
5 division by applying to the director in the form and manner the director  
6 requires. The application shall include the information specified in  
7 section 12-225-105.

8 (b) THIS SUBSECTION (1) IS REPEALED, EFFECTIVE SEPTEMBER 1,  
9 2025.

10 (1.5) ON OR AFTER SEPTEMBER 1, 2024, EXCEPT AS OTHERWISE  
11 PROVIDED IN THIS ARTICLE 225, AN INDIVIDUAL IN THIS STATE WHO  
12 PRACTICES CERTIFIED PROFESSIONAL MIDWIFERY OR WHO REPRESENTS  
13 ONESELF AS BEING ABLE TO PRACTICE CERTIFIED PROFESSIONAL  
14 MIDWIFERY MUST POSSESS A VALID LICENSE ISSUED BY THE DIRECTOR  
15 PURSUANT TO THIS ARTICLE 225 AND RULES PROMULGATED PURSUANT TO  
16 THIS ARTICLE 225.

17 (1.7) (a) ON SEPTEMBER 1, 2024, EACH ACTIVE DIRECT-ENTRY  
18 MIDWIFE REGISTRATION BECOMES AN ACTIVE CERTIFIED PROFESSIONAL  
19 MIDWIFE LICENSE BY OPERATION OF LAW. THE CONVERSION FROM  
20 REGISTRATION TO LICENSURE AND DIRECT-ENTRY MIDWIFE TO CERTIFIED  
21 PROFESSIONAL MIDWIFE DOES NOT AFFECT ANY PRIOR DISCIPLINE,  
22 LIMITATION, OR CONDITION IMPOSED BY THE DIRECTOR ON A  
23 DIRECT-ENTRY MIDWIFE'S REGISTRATION; LIMIT THE DIRECTOR'S  
24 AUTHORITY OVER ANY REGISTRANT; OR AFFECT ANY PENDING  
25 INVESTIGATION OR ADMINISTRATIVE PROCEEDING. THE DIRECTOR SHALL  
26 TREAT ANY APPLICATION FOR A DIRECT-ENTRY MIDWIFE REGISTRATION  
27 PENDING AS OF AUGUST 31, 2024, INCLUDING ANY APPLICATION FOR



1 RENEWAL OR REINSTATEMENT OF A DIRECT-ENTRY MIDWIFE  
2 REGISTRATION, AS AN APPLICATION FOR A CERTIFIED PROFESSIONAL  
3 MIDWIFE LICENSE, WHICH APPLICATION IS SUBJECT TO THE REQUIREMENTS  
4 ESTABLISHED BY THE DIRECTOR.

5 (b) THIS SUBSECTION (1.7) IS REPEALED, EFFECTIVE SEPTEMBER 1,  
6 2026.

7 (3) Every applicant for ~~registration~~ LICENSURE shall pay a  
8 ~~registration~~ LICENSURE fee to be established by the director in the manner  
9 authorized by section 12-20-105. ~~Registrations~~ LICENSES issued pursuant  
10 to this article 225 are subject to the renewal, expiration, reinstatement,  
11 and delinquency fee provisions specified in section 12-20-202 (1) and (2).  
12 Any person whose ~~registration~~ LICENSE has expired ~~shall be~~ IS subject to  
13 the penalties provided in this article 225 or section 12-20-202 (1).

14 (4) To qualify to ~~register~~ FOR LICENSURE, a ~~direct-entry~~ CERTIFIED  
15 PROFESSIONAL midwife must have successfully completed an examination  
16 evaluated and approved by the director as an appropriate test to measure  
17 competency in the practice of ~~direct-entry~~ CERTIFIED PROFESSIONAL  
18 midwifery, which examination must have been developed by a ~~person~~ AN  
19 INDIVIDUAL or entity other than the director or the division and the  
20 acquisition of which shall require no expenditure of state funds. The  
21 national registry examination administered by the ~~Midwives Alliance of~~  
22 ~~North America~~ NORTH AMERICAN REGISTRY OF MIDWIVES, or its  
23 successor, must be among those evaluated by the director. The director is  
24 authorized to approve any existing test meeting all the criteria set forth in  
25 this subsection (4). In addition to successfully completing the  
26 examination, a ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife is qualified  
27 to ~~register~~ FOR LICENSURE if the ~~person~~ INDIVIDUAL has:

1 (f) Filed documentation with the director that the ~~direct-entry~~  
2 CERTIFIED PROFESSIONAL midwife is currently certified by the American  
3 Heart Association or the American Red Cross to perform adult and infant  
4 cardiopulmonary resuscitation ("CPR").

5 (5) ~~Effective July 1, 2003, in order to be deemed qualified to~~  
6 ~~register, a direct-entry~~ IN ORDER TO OBTAIN A LICENSE, A CERTIFIED  
7 PROFESSIONAL midwife must have graduated from an accredited  
8 midwifery educational program; OBTAINED A CERTIFIED PROFESSIONAL  
9 MIDWIFE CREDENTIAL FROM THE NORTH AMERICAN REGISTRY OF  
10 MIDWIVES, OR ITS SUCCESSOR ORGANIZATION; or obtained a substantially  
11 equivalent education approved by the director. The educational  
12 requirement does not apply to AN INDIVIDUAL INITIALLY REGISTERED AS  
13 A ~~direct-entry midwives who have registered with the division~~ MIDWIFE  
14 before July 1, 2003.

15 (5.5) THE DIRECTOR SHALL NOT RENEW A CERTIFIED PROFESSIONAL  
16 MIDWIFE'S LICENSE WITHOUT PROOF THAT THE INDIVIDUAL HAS AN ACTIVE  
17 CERTIFIED PROFESSIONAL MIDWIFE CREDENTIAL FROM THE NORTH  
18 AMERICAN REGISTRY OF MIDWIVES, OR ITS SUCCESSOR ORGANIZATION.

19 (6) For purposes of ~~registration~~ LICENSURE under this article 225,  
20 no credential, licensure, or certification issued by any other state meets  
21 the requirements of this article 225, and therefore there is no reciprocity  
22 with other states.

23 **SECTION 5.** In Colorado Revised Statutes, 12-225-105, **amend**  
24 (1) introductory portion, (1)(a), (1)(b), (1)(c), (1)(d), (1)(e), (1)(g), and  
25 (1)(h) as follows:

26 **12-225-105. Mandatory disclosure of information to clients.**

27 (1) Every ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall provide

1 the following information in writing to each client during the initial client  
2 contact:

3 (a) The name, business address, and business phone number of the  
4 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife;

5 (b) A listing of the ~~direct-entry~~ CERTIFIED PROFESSIONAL  
6 midwife's education, experience, degrees, membership in any professional  
7 organization whose membership includes not less than one-third of all  
8 ~~registrants~~ LICENSEES, certificates or credentials related to ~~direct-entry~~  
9 CERTIFIED PROFESSIONAL midwifery awarded by any such organization,  
10 and the length of time and number of contact hours required to obtain the  
11 degrees, certificates, or credentials;

12 (c) A statement indicating whether or not the ~~direct-entry~~  
13 CERTIFIED PROFESSIONAL midwife is covered under a policy of liability  
14 insurance for the practice of ~~direct-entry~~ CERTIFIED PROFESSIONAL  
15 midwifery;

16 (d) A listing of any license, certificate, or registration in the  
17 health-care field previously or currently held by the ~~direct-entry~~  
18 CERTIFIED PROFESSIONAL midwife and suspended or revoked by any local,  
19 state, or national health-care agency;

20 (e) A statement that the practice of ~~direct-entry~~ CERTIFIED  
21 PROFESSIONAL midwifery is regulated by the department. The statement  
22 must provide the address and telephone number of the office of  
23 midwifery ~~registration~~ LICENSURE in the division and shall state that  
24 violation of this article 225 may result in revocation of ~~registration~~  
25 LICENSURE and of the authority to practice ~~direct-entry~~ CERTIFIED  
26 PROFESSIONAL midwifery in Colorado.

27 (g) A statement indicating whether or not the ~~direct-entry~~

1 CERTIFIED PROFESSIONAL midwife will administer vitamin K to the  
2 client's newborn infant and, if not, a list of qualified health-care  
3 practitioners who can provide that service; and

4 (h) A statement indicating whether or not the ~~direct-entry~~  
5 CERTIFIED PROFESSIONAL midwife will administer Rho(D) immune  
6 globulin to the client if ~~she~~ THE CLIENT is determined to be Rh-negative  
7 and, if not, a list of qualified health-care practitioners who can provide  
8 that service.

9 **SECTION 6.** In Colorado Revised Statutes, 12-225-106, **amend**  
10 (1), (2), (3), (4), (5)(a) introductory portion, (5)(a)(I), (5)(a)(II), (5)(a)(III)  
11 introductory portion, (5)(a)(III)(A), (5)(a)(III)(C), (5)(a)(III)(E),  
12 (5)(a)(III)(F), (5)(a)(IV), (6), (7), (8), (9), (10), (11), (13), and (14) as  
13 follows:

14 **12-225-106. Prohibited acts - practice standards - informed**  
15 **consent - emergency plan - risk assessment - referral - rules.** (1) A  
16 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall not dispense or  
17 administer any medication or drugs except in accordance with section  
18 12-225-107.

19 (2) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall not  
20 perform any operative or surgical procedure; except that a ~~direct-entry~~  
21 CERTIFIED PROFESSIONAL midwife may perform sutures of perineal tears  
22 in accordance with section 12-225-107.

23 (3) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall not  
24 provide care to a pregnant woman who, according to generally accepted  
25 medical standards, exhibits signs or symptoms of increased risk of  
26 medical or obstetric or neonatal complications or problems during the  
27 completion of her pregnancy, labor, delivery, or ~~the~~ postpartum period.

1 Those conditions include but are not limited to signs or symptoms of  
2 diabetes, multiple gestation, hypertensive disorder, or abnormal  
3 presentation of the fetus.

4 (4) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall not  
5 provide care to a pregnant woman who, according to generally accepted  
6 medical standards, exhibits signs or symptoms of increased risk that her  
7 child may develop complications or problems during the first six weeks  
8 of life.

9 (5)(a) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall keep  
10 appropriate records of midwifery-related activity, including but not  
11 limited to the following:

12 (I) The ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall  
13 complete and file a birth certificate for every delivery in accordance with  
14 section 25-2-112.

15 (II) The ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall  
16 complete and maintain appropriate client records for every client.

17 (III) Before accepting a client for care, the ~~direct-entry~~ CERTIFIED  
18 PROFESSIONAL midwife shall obtain the client's informed consent, which  
19 shall be evidenced by a written statement in a form prescribed by the  
20 director and signed by both the ~~direct-entry~~ CERTIFIED PROFESSIONAL  
21 midwife and the client. The form shall MUST certify that full disclosure  
22 has been made and acknowledged by the client as to each of the following  
23 items, with the client's acknowledgment evidenced by a separate signature  
24 or initials adjacent to each item in addition to the client's signature at the  
25 end of the form:

26 (A) The ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife's  
27 educational background and training;

1 (C) A description of the available alternatives to ~~direct-entry~~  
2 CERTIFIED PROFESSIONAL midwifery care, including a statement that the  
3 client understands the client is not retaining a certified nurse midwife, a  
4 nurse midwife, or a certified midwife;

5 (E) A statement indicating whether or not the ~~direct-entry~~  
6 CERTIFIED PROFESSIONAL midwife is covered under a policy of liability  
7 insurance for the practice of ~~direct-entry~~ CERTIFIED PROFESSIONAL  
8 midwifery; and

9 (F) A statement informing the client that, if subsequent care is  
10 required resulting from the acts or omissions of the ~~direct-entry~~ CERTIFIED  
11 PROFESSIONAL midwife, any physician, nurse, certified midwife,  
12 prehospital emergency personnel, and health-care institution rendering  
13 subsequent care will be held only to a standard of gross negligence or  
14 willful and wanton ~~conduct~~ MISCONDUCT;

15 (IV) (A) Until the liability insurance required pursuant to section  
16 12-225-112 (2) is available, each ~~direct-entry~~ CERTIFIED PROFESSIONAL  
17 midwife shall, before accepting a client for care, provide the client with  
18 a disclosure statement indicating that the ~~direct-entry~~ CERTIFIED  
19 PROFESSIONAL midwife does not have liability insurance. To comply with  
20 this section, the ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall  
21 ensure that the disclosure statement is printed in at least twelve-point  
22 bold-faced type and shall read the statement to the client in a language the  
23 client understands. Each client shall sign the disclosure statement  
24 acknowledging that the client understands the effect of its provisions. The  
25 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall also sign the  
26 disclosure statement and provide a copy of the signed disclosure  
27 statement to the client.

1 (B) In addition to the information required in subsection  
2 (5)(a)(IV)(A) of this section, the ~~direct-entry~~ CERTIFIED PROFESSIONAL  
3 midwife shall include the following statement in the disclosure statement  
4 and shall display the statement prominently and deliver the statement  
5 orally to the client before the client signs the disclosure statement:  
6 "Signing this disclosure statement does not constitute a waiver of any  
7 right (insert client's name) has to seek damages or redress from the  
8 undersigned ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife for any act of  
9 negligence or any injury (insert client's name) may sustain in the course  
10 of care administered by the undersigned ~~direct-entry~~ CERTIFIED  
11 PROFESSIONAL midwife."

12 (6) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall prepare  
13 a plan, in the form and manner required by the director, for emergency  
14 situations. The plan must include procedures to be followed in situations  
15 in which the time required for transportation to the nearest facility  
16 capable of providing appropriate treatment exceeds limits established by  
17 the director by rule. A copy of the plan shall be given to each client as  
18 part of the informed consent required by subsection (5) of this section.

19 (7) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall prepare  
20 and transmit appropriate specimens for newborn screening in accordance  
21 with section 25-4-1004 and shall refer every newborn child for  
22 evaluation, within seven days after birth, to a licensed health-care  
23 provider with expertise in pediatric care.

24 (8) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall ensure  
25 that appropriate laboratory testing, as determined by the director, is  
26 completed for each client.

27 (9) (a) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall

1 provide eye prophylactic therapy to all newborn children in the  
2 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife's care in accordance with  
3 section 25-4-301.

4 (b) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall inform  
5 the parents of all newborn children in the ~~direct-entry~~ CERTIFIED  
6 PROFESSIONAL midwife's care of the importance of critical congenital  
7 heart defect screening using pulse oximetry in accordance with section  
8 25-4-1004.3. If a ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife is not  
9 properly trained in the use of pulse oximetry or does not have the use of  
10 or own a pulse oximeter, the ~~direct-entry~~ CERTIFIED PROFESSIONAL  
11 midwife shall refer the parents to a health-care provider who can perform  
12 the screening. If a ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife is  
13 properly trained in the use of pulse oximetry and has the use of or owns  
14 a pulse oximeter, the ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall  
15 perform the critical congenital heart defect screening on newborn children  
16 in the ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife's care in accordance  
17 with section 25-4-1004.3.

18 (10) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife shall be  
19 knowledgeable and skilled in aseptic procedures and the use of universal  
20 precautions and shall use them with every client.

21 (11) To assure that proper risk assessment is completed and that  
22 clients who are inappropriate for ~~direct-entry~~ CERTIFIED PROFESSIONAL  
23 midwifery are referred to other health-care providers, the director shall  
24 establish, by rule, a risk assessment procedure to be followed by a  
25 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife for each client and  
26 standards for appropriate referral. The assessment shall be MADE a part of  
27 each client's record as required in subsection (5)(a)(II) of this section.



1 (13) A ~~registered direct-entry~~ LICENSED CERTIFIED PROFESSIONAL  
2 midwife may purchase, possess, carry, and administer oxygen. The  
3 department shall promulgate rules concerning minimum training  
4 requirements for ~~direct-entry~~ CERTIFIED PROFESSIONAL midwives with  
5 respect to the safe administration of oxygen. Each ~~registrant~~ LICENSEE  
6 shall complete the minimum training requirements and submit proof of  
7 having completed the requirements to the director before administering  
8 oxygen to any client.

9 (14) A ~~registrant~~ LICENSEE shall not practice beyond the scope of  
10 the ~~registrant's~~ LICENSEE'S education and training.

11 **SECTION 7.** In Colorado Revised Statutes, 12-225-107, **amend**  
12 (1), (2) introductory portion, (3), (4), (5), (6), (7), and (8) as follows:

13 **12-225-107. Limited use of certain medications - emergency**  
14 **medical procedures - rules.** (1) A ~~registrant~~ LICENSEE may obtain  
15 prescription medications to treat conditions specified in this section from  
16 a registered prescription drug outlet, registered manufacturer, or  
17 registered wholesaler. An entity that provides a prescription medication  
18 to a ~~registrant~~ LICENSEE in accordance with this section, and who relies  
19 in good faith upon the ~~registration~~ LICENSE information provided by the  
20 ~~registrant~~ LICENSEE, is not subject to liability for providing the  
21 medication.

22 (2) Except as otherwise provided in subsection (3) of this section,  
23 a ~~registrant~~ LICENSEE may obtain and administer:

24 (3) (a) If a client refuses a medication listed in subsection (2)(a)  
25 or (2)(b) of this section, the ~~registrant~~ LICENSEE shall provide the client  
26 with an informed consent form containing a detailed statement of the  
27 benefits of the medication and the risks of refusal and shall retain a copy

1 of the form acknowledged and signed by the client.

2 (b) If a client experiences uncontrollable postpartum hemorrhage  
3 and refuses treatment with antihemorrhagic drugs, the ~~registrant~~ LICENSEE  
4 shall immediately initiate the transportation of the client in accordance  
5 with the emergency plan REQUIRED BY SECTION 12-225-106 (6).

6 (4) A ~~registrant~~ LICENSEE shall, as part of the emergency medical  
7 plan required by section 12-225-106 (6), inform the client that:

8 (a) If she experiences uncontrollable postpartum hemorrhage, the  
9 ~~registrant~~ LICENSEE is required by Colorado law to initiate emergency  
10 medical treatment, which may include the administration of an  
11 antihemorrhagic drug by the ~~registrant~~ LICENSEE to mitigate the  
12 postpartum hemorrhaging while initiating the immediate transportation  
13 of the client in accordance with the emergency plan.

14 (b) If she experiences postpartum hemorrhage, the ~~registrant~~  
15 LICENSEE is prepared and equipped to administer intravenous fluids to  
16 restore volume lost due to excessive bleeding.

17 (5) The director shall promulgate rules to implement this section.  
18 In promulgating the rules, the director shall seek the advice of  
19 knowledgeable medical professionals to set standards for education,  
20 training, and administration that reflect current generally accepted  
21 professional standards for the safe and effective use of the medications,  
22 methods of administration, and procedures described in this section.  
23 ~~including a requirement that, to administer intravenous fluids, the~~  
24 ~~registrant complete an intravenous therapy course or program approved~~  
25 ~~by the director. The director shall establish a preferred drug list that~~  
26 ~~displays the medications that a registrant can obtain.~~

27 (6) (a) ~~Subject to subsection (6)(b) of this section, a registrant A~~

1 LICENSEE may perform sutures of first-degree and second-degree perineal  
2 tears, as defined by the director by rule, on a client and may administer  
3 local anesthetics to the client in connection with suturing perineal tears.

4 (b) ~~In order to perform sutures of first-degree and second-degree~~  
5 ~~perineal tears, the registrant shall apply to the director, in the form and~~  
6 ~~manner required by the director, and pay any application fee the director~~  
7 ~~may impose, for an authorization to perform sutures of first-degree and~~  
8 ~~second-degree perineal tears. As part of the application, the registrant~~  
9 ~~shall demonstrate to the director that the registrant has received education~~  
10 ~~and training approved by the director on suturing of perineal tears within~~  
11 ~~the year immediately preceding the date of the application or within such~~  
12 ~~other time the director, by rule, determines to be appropriate. The director~~  
13 ~~may grant the authorization to the registrant only if the registrant has~~  
14 ~~complied with the education and training requirement specified in this~~  
15 ~~subsection (6)(b).~~

16 (7) A ~~registered direct-entry~~ LICENSED CERTIFIED PROFESSIONAL  
17 midwife who was initially registered AS A DIRECT-ENTRY MIDWIFE prior  
18 to January 1, 2000, must apply to the director and pay any applicable fees  
19 before obtaining or administering group B streptococcus (GBS)  
20 prophylaxis as part of the ~~registrant's~~ LICENSEE'S practice of ~~direct-entry~~  
21 CERTIFIED PROFESSIONAL midwifery. The director shall verify the  
22 qualifications of a ~~registrant~~ LICENSEE applying pursuant to this  
23 subsection (7) before granting the ~~registrant~~ LICENSEE the authority to  
24 obtain and administer group B streptococcus (GBS) prophylaxis.

25 (8) A ~~registrant~~ LICENSEE who is granted authority to act pursuant  
26 to this section is not required to apply for renewal of the authority or pay  
27 any renewal fees pertaining to the authority granted in this section.

1           **SECTION 8.** In Colorado Revised Statutes, 12-225-108, **amend**  
2 (1)(b), (1)(c), (1)(d), (1)(f), (1)(g), and (1)(h) as follows:

3           **12-225-108. Director - powers and duties - rules.** (1) In  
4 addition to any other powers and duties conferred on the director by law,  
5 the director has the following powers and duties:

6           (b) To establish the fees for ~~registration~~ LICENSURE and renewal  
7 of ~~registration~~ LICENSURE in the manner authorized by section 12-20-105;

8           (c) To prepare or adopt suitable education standards for applicants  
9 and to adopt a ~~registration~~ LICENSURE examination;

10           (d) To accept applications for ~~registration~~ LICENSURE that meet the  
11 requirements set forth in this article 225, and to collect the annual  
12 ~~registration~~ LICENSURE fees authorized by this article 225;

13           (f) To summarily suspend a ~~registration~~ LICENSE upon the failure  
14 of the ~~registrant~~ LICENSEE to comply with any condition of a stipulation  
15 or order imposed by the director until the ~~registrant~~ LICENSEE complies  
16 with the condition, unless compliance is beyond the control of the  
17 ~~registrant~~ LICENSEE;

18           (g) To develop policies and protocols, by rule, for ~~direct-entry~~  
19 CERTIFIED PROFESSIONAL midwives in training that reflect the  
20 requirements of the North American Registry of Midwives, or its  
21 successor organization;

22           (h) To order the physical or mental examination of a ~~direct-entry~~  
23 CERTIFIED PROFESSIONAL midwife if the director has reasonable cause to  
24 believe that the ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife is subject  
25 to a physical or mental disability that renders the ~~direct-entry~~ CERTIFIED  
26 PROFESSIONAL midwife unable to treat patients with reasonable skill and  
27 safety or that may endanger a patient's health or safety. The director may

1 order a physical or mental examination regardless of whether there is  
2 injury to a patient.

3 **SECTION 9.** In Colorado Revised Statutes, 12-225-109, **amend**  
4 (1), (3)(b), (3)(d), (3)(g), (3)(h), (3)(i), (3)(m), (3)(n)(I), (3)(n)(II), (4),  
5 (5), (7), and (8) as follows:

6 **12-225-109. Disciplinary action authorized - grounds for**  
7 **discipline - injunctions - rules.** (1) If a ~~direct-entry~~ CERTIFIED  
8 PROFESSIONAL midwife has violated ~~any of the provisions of~~ section  
9 12-225-104, 12-225-105, 12-225-106, or 12-225-112 (2), the director may  
10 take disciplinary or other action as authorized by section 12-20-404 or  
11 seek an injunction against a ~~direct-entry~~ THE CERTIFIED PROFESSIONAL  
12 midwife in accordance with section 12-20-406 to enjoin the ~~direct-entry~~  
13 CERTIFIED PROFESSIONAL midwife from practicing midwifery or  
14 committing a violation specified in this subsection (1).

15 (3) The director may take disciplinary action as authorized by  
16 section 12-20-404 (1)(a), (1)(b), or (1)(d) for any of the following acts or  
17 omissions:

18 [REDACTED]  
19 (b) Failing to provide any information required pursuant to, or to  
20 pay any fee assessed in accordance with, section 12-225-104 or providing  
21 false, deceptive, or misleading information to the division that the  
22 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife knew or should reasonably  
23 have known was false, deceptive, or misleading;

24 [REDACTED]  
25 (d) Failing to comply with an order of the director, including an  
26 order placing conditions or restrictions on the ~~registrant's~~ LICENSEE'S  
27 practice;

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(g) Procuring or attempting to procure a ~~registration~~ LICENSE in this or any other state or jurisdiction by fraud, deceit, misrepresentation, misleading omission, or material misstatement of fact;

(h) Having had a license or registration to practice ~~direct-entry~~ CERTIFIED PROFESSIONAL midwifery or any other health-care profession or occupation suspended or revoked in any jurisdiction;

(i) Violating any law or regulation governing the practice of ~~direct-entry~~ CERTIFIED PROFESSIONAL midwifery in another state or jurisdiction. A plea of nolo contendere or its equivalent accepted by any state agency of another state or jurisdiction may be considered to be the same as a finding of violation for purposes of a proceeding under this article 225.

(m) Advertising through newspapers, magazines, circulars, direct mail, directories, radio, television, website, e-mail, text message, or otherwise that the ~~registrant~~ LICENSEE will perform any act prohibited by this article 225; or

(n) (I) Failing to notify the director, as required by section 12-30-108 (1), of a physical illness, physical condition, or behavioral, mental health, or substance use disorder that renders the ~~registrant~~ LICENSEE unable, or limits the ~~registrant's~~ LICENSEE'S ability, to practice ~~direct-entry~~ CERTIFIED PROFESSIONAL midwifery with reasonable skill and safety to the client;

(II) Failing to act within the limitations created by a physical illness, physical condition, or behavioral, mental health, or substance use disorder that renders the ~~registrant~~ LICENSEE unable to practice

1 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwifery with reasonable skill and  
2 safety or that may endanger the health or safety of persons under the  
3 ~~registrant's~~ LICENSEE'S care; or

4 [REDACTED]

5 (4) Any proceeding to deny, suspend, or revoke a ~~registration~~  
6 LICENSE or place a ~~registrant~~ LICENSEE on probation shall be conducted  
7 pursuant to sections 12-20-403, 24-4-104, and 24-4-105. Section  
8 12-20-408 governs judicial review of any final decision of the director.

9 (5) The director [REDACTED] may accept as prima facie evidence of  
10 grounds for disciplinary action any disciplinary action taken against a  
11 ~~registrant~~ LICENSEE by another jurisdiction if the violation that prompted  
12 the disciplinary action would be grounds for disciplinary action under this  
13 article 225.

14 (7) The director may issue and send a letter of admonition to a  
15 ~~registrant~~ LICENSEE under the circumstances specified in and in  
16 accordance with section 12-20-404 (4).

17 (8) The director may send a confidential letter of concern to a  
18 ~~registrant~~ LICENSEE under the circumstances specified in section  
19 12-20-404 (5).

20 **SECTION 10.** In Colorado Revised Statutes, **amend** 12-225-110  
21 as follows:

22 **12-225-110. Unauthorized practice - penalties.** Any person  
23 INDIVIDUAL who practices or offers or attempts to practice ~~direct-entry~~  
24 CERTIFIED PROFESSIONAL midwifery OR USES THE TITLE "CERTIFIED  
25 PROFESSIONAL MIDWIFE" without an active ~~registration~~ LICENSE issued  
26 under this article 225 is subject to penalties pursuant to section 12-20-407  
27 (1)(a).

1           **SECTION 11.** In Colorado Revised Statutes, **amend** 12-225-112  
2 as follows:

3           **12-225-112. Assumption of risk - no vicarious liability -**  
4 **professional liability insurance required.** (1) It is the policy of this  
5 state that ~~registrants~~ LICENSEES are liable for their acts or omissions in the  
6 performance of the services that they provide, and that no licensed  
7 physician, nurse, certified midwife, prehospital emergency medical  
8 personnel, or health-care institution is liable for any act or omission  
9 resulting from the administration of services by any ~~registrant~~ LICENSEE.  
10 This subsection (1) does not relieve any physician, nurse, certified  
11 midwife, prehospital emergency personnel, or health-care institution from  
12 liability for any willful and wanton act or omission or any act or omission  
13 constituting gross negligence or under circumstances where a ~~registrant~~  
14 LICENSEE has a business or supervised relationship with the physician,  
15 nurse, certified midwife, prehospital emergency personnel, or health-care  
16 institution. A physician, nurse, certified midwife, prehospital emergency  
17 personnel, or health-care institution may provide consultation or  
18 education to the ~~registrant~~ LICENSEE without establishing a business or  
19 supervisory relationship and is encouraged to accept referrals from  
20 ~~registrants~~ LICENSEES pursuant to this article 225.

21           (2) If the director finds that liability insurance is available at an  
22 affordable price, ~~registrants~~ LICENSEES shall be required to carry liability  
23 insurance.

24           **SECTION 12.** In Colorado Revised Statutes, **amend** 12-225-114  
25 as follows:

26           **12-225-114. Repeal of article - subject to review.** This article  
27 225 is repealed, effective September 1, 2028. Before the repeal, the



1 ~~registering of direct-entry~~ LICENSURE OF CERTIFIED PROFESSIONAL  
2 midwives by the division is scheduled for review in accordance with  
3 section 24-34-104.

4

5 **SECTION 13.** In Colorado Revised Statutes, 24-34-305, **amend**  
6 (1)(k) as follows:

7 **24-34-305. Powers and duties of commission.** (1) The  
8 commission has the following powers and duties:

9 (k) (I) To receive reports from people alleging MISTREATMENT IN  
10 THE CONTEXT OF maternity care, INCLUDING CARE that is not organized  
11 for, and provided to, a person who is pregnant or in the postpartum period  
12 AS DEFINED IN SECTION 12-225-103, in a manner that is culturally  
13 congruent; ~~maintains~~ THAT FAILS TO MAINTAIN the person's dignity,  
14 privacy, and confidentiality; ~~ensures~~ THAT FAILS TO ENSURE freedom from  
15 harm and mistreatment; and ~~enables~~ THAT FAILS TO ENABLE informed  
16 choices and continuous support.

17 (II) REPORTS SHALL BE COLLECTED IN A WAY TO ENSURE THAT:

18 (A) CONFIDENTIAL INFORMATION CAN BE DE-IDENTIFIED;

19 (B) INDIVIDUALS CAN IDENTIFY MISTREATMENT THEY  
20 EXPERIENCED BASED ON THE FOLLOWING MISTREATMENT INDEX  
21 CATEGORIES: PHYSICAL ABUSE, SEXUAL ABUSE, VERBAL ABUSE, STIGMA  
22 AND DISCRIMINATION, FAILURE TO MEET PROFESSIONAL STANDARDS OF  
23 CARE, OR POOR RAPPORT BETWEEN PATIENTS OR CLIENTS AND PROVIDERS;  
24 POOR CONDITIONS AND CONSTRAINTS PRESENTED BY THE HEALTH-CARE  
25 SYSTEM; AND OBSTETRIC RACISM;

26 (C) NUMBERS OF REPORTS BASED ON **TYPOLOGY** CAN BE  
27 GENERATED AND SHARED WITH THE PUBLIC AND OTHER AGENCIES;

1 (D) AN INDIVIDUAL MAY IDENTIFY ANY PROTECTED CLASS THE  
2 INDIVIDUAL MAY BE PART OF AND THAT MAY HAVE FACTORED INTO THE  
3 INDIVIDUAL'S MISTREATMENT;

4 (E) AN INDIVIDUAL MAY INDICATE WHAT MIGHT HAVE BEEN DONE  
5 DIFFERENTLY TO IMPROVE THE INDIVIDUAL'S SITUATION;

6 (F) AN INDIVIDUAL MAY ENTER NARRATIVE INFORMATION IN THE  
7 INDIVIDUAL'S OWN WORDS; AND

8 (G) AN INDIVIDUAL MAY VOLUNTARILY SHARE THE INDIVIDUAL'S  
9 CONTACT INFORMATION AND INDICATE WHETHER THE INDIVIDUAL  
10 CONSENTS TO BEING CONTACTED BY THE DEPARTMENT OF REGULATORY  
11 AGENCIES OR THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT.

12 (III) THE COMMISSION SHALL GENERATE DE-IDENTIFIED  
13 COMPOSITE INFORMATION BASED ON REPORTS SUBMITTED PURSUANT TO  
14 THIS SUBSECTION (1)(k). NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I),  
15 NO LATER THAN JULY 1, 2025, AND NO LATER THAN JULY 1 EVERY THREE  
16 YEARS THEREAFTER, THE COMMISSION SHALL SHARE THE GENERATED  
17 DE-IDENTIFIED COMPOSITE INFORMATION WITH:

18 (A) THE COLORADO MATERNAL MORTALITY REVIEW COMMITTEE  
19 CREATED IN SECTION 25-52-104 (1);

20 (B) THE HOUSE OF REPRESENTATIVES HEALTH AND HUMAN  
21 SERVICES COMMITTEE AND THE SENATE HEALTH AND HUMAN SERVICES  
22 COMMITTEE, OR THEIR SUCCESSOR COMMITTEES; AND

23 (C) THE MATERNITY ADVISORY COMMITTEE DEFINED IN SECTION  
24 25.5-4-506 (1)(b).

25 (IV) REPORTS MAY BE SHARED INTERNALLY WITH STAFF FOR  
26 STUDY, INVESTIGATION, REPORTS, PUBLICATIONS, OR HEARINGS.

27



1           **SECTION 14.** In Colorado Revised Statutes, 25-1-134, **amend**  
2 (2)(c)(IV) as follows:

3           **25-1-134. Environmental justice - ombudsperson - advisory**  
4 **board - grant program - definitions - repeal. (2) Environmental**  
5 **justice advisory board.** (c) The advisory board consists of the following  
6 twelve members who, to the extent practicable, must reside in different  
7 geographic areas of the state, reflect the racial and ethnic diversity of the  
8 state, and have experience with a range of environmental issues, including  
9 air pollution, water contamination, and public health impacts:

10           (IV) Four voting members appointed by the executive director of  
11 the department, AT LEAST ONE OF WHOM MUST BE A MIDWIFE WHO IS  
12 PRACTICING IN A FREESTANDING BIRTH CENTER, IN A RURAL AREA, OR AS  
13 A HOME BIRTH PROVIDER.

14           **SECTION 15.** In Colorado Revised Statutes, **add** 25-3-131 as  
15 follows:

16           **25-3-131. Maternal health-care services - reduction or**  
17 **discontinuation - required notifications - definition.** (1) AT LEAST  
18 NINETY DAYS BEFORE A HOSPITAL PROVIDING MATERNAL HEALTH-CARE  
19 SERVICES OR A BIRTH CENTER MAY REDUCE SUCH SERVICES, THE FACILITY  
20 SHALL PROVIDE NOTICE TO:

21           (a) THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT  
22 RESPONSIBLE FOR LICENSING HEALTH FACILITIES PURSUANT TO SECTION  
23 25-3-101;

24           (b) THE PRIMARY CARE OFFICE, CREATED IN SECTION 25-1.5-403;

25           (c) THE GOVERNOR;

26           (d) ALL PATIENTS RECEIVING MATERNAL HEALTH-CARE SERVICES  
27 AT THE FACILITY AS OF THE DATE OF THE NOTICE;

1 (e) ALL HEALTH-CARE PROVIDERS THAT PROVIDE MATERNAL  
2 HEALTH-CARE SERVICES FOR THE FACILITY AS OF THE DATE OF THE  
3 NOTICE; AND

4 (f) THE GENERAL PUBLIC.

5 (2) THE NOTICE REQUIRED IN SUBSECTION (1) OF THIS SECTION  
6 MUST INCLUDE:

7 (a) A DESCRIPTION OF THE MATERNAL HEALTH-CARE SERVICES  
8 BEING REDUCED OR DISCONTINUED;

9 (b) THE RATE THE MATERNAL HEALTH-CARE SERVICES HAD BEEN  
10 PROVIDED AT IN THE PREVIOUS YEAR;

11 (c) THE NUMBER AND TYPE OF HEALTH-CARE PROVIDERS  
12 IMPACTED;

13 (d) THE PROPOSED PLAN FOR TRANSITIONING PATIENTS TO NEW  
14 HEALTH-CARE PROVIDERS; AND

15 (e) THE PROPOSED PLAN FOR TRANSITIONING THE HEALTH-CARE  
16 PROVIDERS TO NEW POSITIONS.

17 (3) AS USED IN THIS SECTION, "MATERNAL HEALTH-CARE  
18 SERVICES" MEANS HEALTH-CARE SERVICES PROVIDED TO AN INDIVIDUAL  
19 REGARDING CARE RELATED TO THE INDIVIDUAL'S PREGNANCY,  
20 CHILDBIRTH, AND POSTPARTUM PERIOD.

21 **SECTION 16.** In Colorado Revised Statutes, 25-4-2206, **amend**  
22 (2)(a)(III) introductory portion and (2)(a)(III)(J); and **add** (2)(a)(III)(J.5)  
23 as follows:

24 **25-4-2206. Health equity commission - creation - repeal.**

25 (2) (a) The commission consists of the following twenty-three members,  
26 who are as follows:

27 (III) The executive director of the department shall appoint ten

1 members who represent, to the extent practical, Colorado's diverse ethnic,  
2 racial, sexual orientation, gender identity, gender expression, disability,  
3 aging population, socioeconomic, and geographic backgrounds. Each  
4 ~~person~~ INDIVIDUAL appointed to the commission must have demonstrated  
5 expertise in at least one, and preferably two, of the following areas:

6 (J) Behavioral health; ~~or~~

7 (J.5) MIDWIFERY; OR

8 **SECTION 17.** In Colorado Revised Statutes, 25-52-104, **amend**  
9 **(2)(b)(II); and add (5.5) as follows:**

10 **25-52-104. Colorado maternal mortality review committee -**  
11 **creation - members - duties - report to the general assembly - repeal.**

12 (2) (b) In appointing members to the committee, the executive director  
13 shall:

14 (II) Ensure that committee members represent diverse  
15 communities and a variety of clinical, forensic, and psychosocial  
16 specializations and community perspectives, INCLUDING  
17 COMMUNITY-BASED MIDWIFERY; and

18 (5.5) THE DEPARTMENT MAY CONTRACT WITH AN INDEPENDENT  
19 THIRD-PARTY EVALUATOR TO:

20 (a) STUDY CLOSURES, CONSOLIDATIONS, AND ACQUISITIONS  
21 RELATED TO PERINATAL HEALTH-CARE PRACTICES AND FACILITIES AND  
22 PERINATAL STATE-DESIGNATED HEALTH PROFESSIONAL SHORTAGE AREAS,  
23 AS DEFINED IN SECTION 25-1.5-402 (11), AND ASSETS AND DEFICITS  
24 RELATED TO PERINATAL HEALTH AND HEALTH-CARE SERVICES ACROSS THE  
25 STATE, NOT LIMITED TO OBSTETRIC PROVIDERS;

26 (b) IDENTIFY MAJOR OUTCOME CATEGORIES AT THE CLINICAL,  
27 FAMILY, COMMUNITY, AND PROVIDER LEVELS THAT THE DEPARTMENT

1 SHOULD TRACK OVER TIME AND IDENTIFY RISKS AND OPPORTUNITIES  
2 RELATED TO CLOSURES, CONSOLIDATIONS, AND ACQUISITIONS OF  
3 PERINATAL HEALTH-CARE PRACTICES AND FACILITIES;

4 (c) EXPLORE THE EFFECTS OF PRACTICE AND FACILITY CLOSURES  
5 ON MATERNAL AND INFANT HEALTH OUTCOMES AND EXPERIENCES, TO  
6 ILLUSTRATE STRUCTURAL NEEDS AROUND CLOSURES, WHEN APPLICABLE;

7 (d) IDENTIFY RECOMMENDATIONS DURING PRACTICE AND FACILITY  
8 CLOSURES AND RESULTANT TRANSFERS OF CARE. THE DEPARTMENT OR  
9 THIRD PARTY EVALUATOR MAY USE BOTH PRIMARY AND SECONDARY DATA  
10 IN MAKING THE RECOMMENDATIONS. THE DEPARTMENT OR THIRD PARTY  
11 EVALUATOR SHALL USE THE MAP CREATED PURSUANT TO SUBSECTION  
12 (5.5)(f) OF THIS SECTION IN DEVELOPING THE RECOMMENDATIONS. THE  
13 RECOMMENDATIONS MUST:

14 (I) INCLUDE SOLUTIONS AT THE FACILITY LEVEL, THE PRACTICE  
15 LEVEL, THE WORKFORCE LEVEL, THE COMMUNITY LEVEL, AND THE  
16 PATIENT LEVEL;

17 (II) INCLUDE MINIMUM REQUIREMENTS FOR REPORTING ON  
18 CLOSURES, INCLUDING METRICS ON TIMELINES AND GEOGRAPHIC AREA,  
19 INCLUDING WHETHER THE TIMELINE CREATED IN SECTION 25-3-131 IS  
20 APPROPRIATE;

21 (III) DEVELOP RECOMMENDATIONS ON PRIMARY AND SECONDARY  
22 DATA COLLECTION RELATED TO CLOSURES AND RESULTANT TRANSFERS OF  
23 CARE.

24 (e) IDENTIFY BEST PRACTICE GUIDELINES DURING PRACTICE AND  
25 FACILITY CLOSURES AND RESULTANT TRANSFERS OF CARE. THE THIRD  
26 PARTY EVALUATOR MAY USE BOTH PRIMARY AND SECONDARY DATA IN  
27 IDENTIFYING THE BEST PRACTICE GUIDELINES. THE THIRD PARTY

1 EVALUATOR SHALL USE THE MAP CREATED PURSUANT TO SUBSECTION  
2 (5.5)(f) OF THIS SECTION IN DEVELOPING THE GUIDELINES. THE GUIDELINES  
3 MUST CONSIDER THE FOLLOWING AREAS: RISKS AND OPPORTUNITIES;  
4 TRANSFERS OF CARE; COMMUNITY NOTICE NEEDS AND OPPORTUNITIES;  
5 NOTIFICATION TO THE DEPARTMENT; CLOSURE TIMELINE; AND RESOURCES  
6 NEEDED BY FACILITIES, PROVIDERS, AND FAMILIES.

7 (f) CREATE A HEALTH PROFESSIONAL SHORTAGE AREA AND  
8 PERINATAL HEALTH SERVICES ASSETS AND DEFICITS ASSET MAP THAT  
9 IDENTIFIES BY PERINATAL SERVICE AREA:

10 (I) PRIMARY HEALTH-CARE PROVIDERS, INCLUDING PHYSICIANS  
11 AND MIDWIVES OF ALL CREDENTIAL TYPES WHO PROVIDE OR COULD BE  
12 PROVIDING PERINATAL HEALTH CARE;

13 (II) THE TYPE AND LOCATION OF PERINATAL HEALTH CARE  
14 OFFERED BY THE PROVIDERS LISTED PURSUANT TO SUBSECTION (5.5)(f)(I)  
15 OF THIS SECTION;

16 (III) COMMUNITY-BASED PERINATAL HEALTH-CARE WORKERS,  
17 SUCH AS DOULAS, CHILDBIRTH EDUCATORS, AND LACTATION SUPPORT  
18 CONSULTANTS; AND

19 (IV) RESOURCES SUCH AS COMMUNITY ADVOCATES, GATHERING  
20 PLACES, AND EDUCATIONAL HUBS;

21 (g) BY JULY 1, 2026, DELIVER THE BEST PRACTICES AND  
22 RECOMMENDATIONS CREATED PURSUANT TO THIS SUBSECTION (5.5) TO  
23 THE HOUSE OF REPRESENTATIVES HEALTH AND HUMAN SERVICES  
24 COMMITTEE AND THE SENATE HEALTH AND HUMAN SERVICES COMMITTEE,  
25 OR THEIR SUCCESSOR COMMITTEES.

26 **SECTION 18.** In Colorado Revised Statutes, 24-33.5-704.5,  
27 **amend** (1)(b)(II)(G) and (1)(b)(II)(H); and **add** (1)(b)(II)(I) as follows:

1           **24-33.5-704.5. Governor's expert emergency epidemic**  
2 **response committee - creation.** (1) (b) (II) In addition to the state  
3 members of the committee, the governor shall appoint to the committee  
4 an individual from each of the following categories:

5           (G) A wildlife disease specialist with the division of wildlife; ~~and~~

6           (H) A pharmacist member of the state board of pharmacy; AND

7           (I) A MIDWIFE WITH EXPERIENCE IN OUT-OF-HOSPITAL BIRTHS.

8           **SECTION 19.** In Colorado Revised Statutes, 12-20-202, **amend**  
9 (3)(e)(X) as follows:

10           **12-20-202. Licenses, certifications, and registrations - renewal**  
11 **- reinstatement - fees - occupational credential portability program**  
12 **- temporary authority for military spouses - exceptions for military**  
13 **personnel - rules - consideration of criminal convictions or driver's**  
14 **history - executive director authority - definitions.** (3) **Occupational**  
15 **credential portability program.** (e) Subsections (3)(a) to (3)(d) of this  
16 section do not apply to the following professions or occupations:

17           (X) ~~Direct-entry~~ CERTIFIED PROFESSIONAL midwives, regulated  
18 pursuant to article 225 of this title 12; or

19           **SECTION 20.** In Colorado Revised Statutes, 12-20-404, **amend**  
20 (1)(d)(II)(H) as follows:

21           **12-20-404. Disciplinary actions - regulator powers -**  
22 **disposition of fines - mistreatment of at-risk adult - exceptions -**  
23 **definitions.** (1) **General disciplinary authority.** If a regulator  
24 determines that an applicant, licensee, certificate holder, or registrant has  
25 committed an act or engaged in conduct that constitutes grounds for  
26 discipline or unprofessional conduct under a part or article of this title 12  
27 governing the particular profession or occupation, the regulator may:



1 (d) (II) A regulator is not authorized under this subsection (1)(d)  
2 to refuse to renew the license, certification, or registration of a licensee,  
3 certificate holder, or registrant regulated under the following:

4 (H) Article 225 of this title 12 concerning ~~direct-entry~~ CERTIFIED  
5 PROFESSIONAL midwives;

6 **SECTION 21.** In Colorado Revised Statutes, 12-20-407, **amend**  
7 (1)(a)(V)(K) and (1)(e)(V) as follows:

8 **12-20-407. Unauthorized practice of profession or occupation**  
9 **- penalties - exclusions.** (1) (a) A person commits a class 2 misdemeanor  
10 and shall be punished as provided in section 18-1.3-501 if the person:

11 (V) Practices or offers or attempts to practice any of the following  
12 professions or occupations without an active license, certification, or  
13 registration issued under the part or article of this title 12 governing the  
14 particular profession or occupation:

15 (K) ~~Direct-entry~~ CERTIFIED PROFESSIONAL midwifery, as regulated  
16 under article 225 of this title 12;

17 (e) A person commits a class 6 felony and shall be punished as  
18 provided in section 18-1.3-401 if the person practices or offers or  
19 attempts to practice any of the following professions or occupations and  
20 intentionally and fraudulently represents oneself as a licensed, certified,  
21 or registered professional or practitioner pursuant to a part or article of  
22 this title 12 governing the particular profession or occupation:

23 (V) ~~Direct-entry~~ CERTIFIED PROFESSIONAL midwifery, as regulated  
24 pursuant to article 225 of this title 12;

25 **SECTION 22.** In Colorado Revised Statutes, 12-20-408, **amend**  
26 (1)(c) as follows:

27 **12-20-408. Judicial review.** (1) Except as specified in subsection

1 (2) of this section, the court of appeals has initial jurisdiction to review  
2 all final actions and orders of a regulator that are subject to judicial  
3 review and shall conduct the judicial review proceedings in accordance  
4 with section 24-4-106 (11); except that, with regard only to  
5 cease-and-desist orders, a district court of competent jurisdiction has  
6 initial jurisdiction to review a final action or order of a regulator that is  
7 subject to judicial review and shall conduct the judicial review  
8 proceedings in accordance with section 24-4-106 (3) for the following:

9 (c) Article 225 of this title 12 concerning ~~direct-entry~~ CERTIFIED  
10 PROFESSIONAL midwives;

11 **SECTION 23.** In Colorado Revised Statutes, 12-30-102, **amend**  
12 (3)(a)(X) as follows:

13 **12-30-102. Medical transparency act of 2010 - disclosure of**  
14 **information about health-care providers - fines - rules - short title -**  
15 **legislative declaration - review of functions - definition - repeal.**

16 (3) (a) As used in this section, "applicant" means a person applying for  
17 a new, active license, certification, or registration or to renew, reinstate,  
18 or reactivate an active license, certification, or registration to practice:

19 (X) ~~Direct-entry~~ CERTIFIED PROFESSIONAL midwifery pursuant to  
20 article 225 of this title 12;

21 **SECTION 24.** In Colorado Revised Statutes, 12-30-122, **amend**  
22 (6)(d)(III) and (6)(d)(IV) as follows:

23 **12-30-122. Intimate examination of sedated or unconscious**  
24 **patient - informed consent required - definitions.** (6) As used in this  
25 section:

26 (d) "Licensee" means:

27 (III) An advanced practice registered nurse, as defined in section

1 12-255-104 (1); a registered nurse, as defined in section 12-255-104 (11);  
2 or a midwife, other than a ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife  
3 or certified nurse midwife, practicing in this state whose scope of practice  
4 includes performing intimate examinations; or

5 (IV) A ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife registered  
6 pursuant to article 225 of this title 12.

7 **SECTION 25.** In Colorado Revised Statutes, 13-21-115.5,  
8 **amend** (3)(c)(II)(C) as follows:

9 **13-21-115.5. Volunteer service act - immunity - exception for**  
10 **operation of motor vehicles - short title - legislative declaration -**  
11 **definitions.** (3) As used in this section, unless the context otherwise  
12 requires:

13 (c) (II) "Volunteer" includes:

14 (C) A ~~registered direct-entry~~ LICENSED CERTIFIED PROFESSIONAL  
15 midwife governed by article 225 of title 12 performing the practice of  
16 ~~direct-entry~~ CERTIFIED PROFESSIONAL midwifery, as defined in section  
17 ~~12-225-103~~ (3) 12-225-103 (4), as a volunteer for a nonprofit  
18 organization, a nonprofit corporation, a governmental entity, or a hospital;

19 **SECTION 26.** In Colorado Revised Statutes, 24-34-104, **amend**  
20 (29)(a)(XV) as follows:

21 **24-34-104. General assembly review of regulatory agencies**  
22 **and functions for repeal, continuation, or reestablishment - legislative**  
23 **declaration - repeal.** (29) (a) The following agencies, functions, or both,  
24 are scheduled for repeal on September 1, 2028:

25 (XV) The ~~registration of direct-entry~~ LICENSURE OF CERTIFIED  
26 PROFESSIONAL midwives by the division of professions and occupations  
27 in accordance with article 225 of title 12;

1           **SECTION 27.** In Colorado Revised Statutes, 25-2-112, **amend**  
2 (7)(b) as follows:

3           **25-2-112. Certificates of birth - filing - establishment of**  
4 **parentage - notice to collegeinvest.** (7) The state registrar shall revise  
5 the birth certificate worksheet form used for the preparation of a  
6 certificate of live birth to include:

7           (b) A requirement to report whether the live birth occurred after  
8 a transfer to a hospital by a ~~direct-entry midwife registered~~ CERTIFIED  
9 PROFESSIONAL MIDWIFE LICENSED pursuant to article 225 of title 12; and

10           **SECTION 28.** In Colorado Revised Statutes, 25-1-802, **amend**  
11 (1)(a) and (1)(b)(II) as follows:

12           **25-1-802. Patient records in custody of individual health-care**  
13 **providers.** (1) (a) Every patient record in the custody of a podiatrist,  
14 chiropractor, dentist, doctor of medicine, doctor of osteopathy, nurse,  
15 certified midwife, optometrist, occupational therapist, audiologist,  
16 acupuncturist, ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife, or physical  
17 therapist required to be licensed under title 12; a naturopathic doctor  
18 required to be registered pursuant to article 250 of title 12; or a person  
19 practicing psychotherapy under article 245 of title 12, except records  
20 withheld in accordance with 45 CFR 164.524 (a), must be available to the  
21 patient or the patient's personal representative upon submission of a valid  
22 authorization for inspection of records, dated and signed by the patient,  
23 at reasonable times and upon reasonable notice. A summary of records  
24 pertaining to a patient's mental health problems may, upon written request  
25 accompanied by a signed and dated authorization, be made available to  
26 the patient or the patient's personal representative following termination  
27 of the treatment program.

1 (b) (II) If a licensed health-care professional determines that a  
2 copy of a radiographic study, including an X ray, mammogram, CT scan,  
3 MRI, or other film, is not sufficient for diagnostic or other treatment  
4 purposes, the podiatrist, chiropractor, dentist, doctor of medicine, doctor  
5 of osteopathy, nurse, certified midwife, optometrist, audiologist,  
6 acupuncturist, ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife, or physical  
7 therapist required to be licensed under title 12, or, subject to the  
8 provisions of section 25-1-801 (1)(a) and subsection (1)(a) of this section,  
9 the person practicing psychotherapy under article 245 of title 12, shall  
10 make the original of any radiographic study available to the patient, the  
11 patient's personal representative, a person authorized by the patient, or  
12 another health-care professional or facility as specifically directed by the  
13 patient, personal representative, authorized person, or health-care  
14 professional or facility pursuant to a HIPAA-compliant authorization and  
15 upon the payment of the reasonable fees for the radiographic study. If a  
16 practitioner releases an original radiographic study pursuant to this  
17 subsection (1)(b)(II), the practitioner is not responsible for any loss,  
18 damage, or other consequences as a result of the release. Any original  
19 radiographic study made available pursuant to this subsection (1)(b)(II)  
20 must be returned upon request to the lending practitioner within thirty  
21 days.

22 **SECTION 29.** In Colorado Revised Statutes, 25-3-130, **amend**  
23 (6)(c)(III) and (6)(c)(IV) as follows:

24 **25-3-130. Intimate examination of sedated or unconscious**  
25 **patient - informed consent required - rules - definitions.** (6) As used  
26 in this section:

27 (c) "Licensed health-care provider" means:

1 (III) An advanced practice registered nurse, as defined in section  
2 12-255-104 (1); a registered nurse, as defined in section 12-255-104 (11);  
3 or a midwife, other than a ~~direct-entry~~ CERTIFIED PROFESSIONAL midwife  
4 or certified nurse midwife, practicing in this state whose scope of practice  
5 includes performing intimate examinations; or

6 (IV) A ~~direct-entry midwife registered~~ CERTIFIED PROFESSIONAL  
7 MIDWIFE LICENSED pursuant to article 225 of title 12.

8 **SECTION 30. Appropriation.** (1) For the 2024-25 state fiscal  
9 year, \$328,946 is appropriated to the department of public health and  
10 environment for use by the prevention services division. This  
11 appropriation is from the general fund. To implement this act, the division  
12 may use this appropriation for maternal and child health related to  
13 community health, which amount is based on an assumption that the  
14 division will require an additional 0.8 FTE.

15 (2) For the 2024-25 state fiscal year, \$118,771 is appropriated to  
16 the department of regulatory agencies. This appropriation consists of  
17 \$111,072 from the general fund and \$7,699 from the division of  
18 professions and occupations cash fund created in 12-20-105 (3), C.R.S.  
19 To implement this act, the department may use this appropriation as  
20 follows:

21 (a) \$54,717 from general fund for use by the civil rights division  
22 for personal services, which amount is based on an assumption that the  
23 division will require an additional 1.0 FTE;

24 (b) \$7,950 from general fund for use by the civil rights division  
25 for operating expenses;

26 (c) \$7,669 from the division of professions and occupations cash  
27 fund for use by the division of professions and occupations, which

1 amount is based on an assumption that the division will require an  
2 additional 0.1 FTE;

3 (d) \$32,005 from general fund for the purchase of legal services;  
4 and

5 (e) \$16,400 from general fund for the purchase of information  
6 technology services.

7 (3) For the 2024-25 state fiscal year, \$32,005 is appropriated to  
8 the department of law. This appropriation is from reappropriated funds  
9 received from the department of regulatory agencies under subsection  
10 (2)(d) of this section and is based on an assumption that the department  
11 of law will require an additional 0.1 FTE. To implement this act, the  
12 department of law may use this appropriation to provide legal services for  
13 the department of regulatory agencies.

14 (4) For the 2024-25 state fiscal year, \$16,400 is appropriated to  
15 the office of the governor for use by the office of information technology.  
16 This appropriation is from reappropriated funds received from the  
17 department of regulatory agencies under subsection (2)(e) of this section.  
18 To implement this act, the office may use this appropriation to provide  
19 information technology services for the department of regulatory  
20 agencies.

21 **SECTION 31. Safety clause.** The general assembly finds,  
22 determines, and declares that this act is necessary for the immediate  
23 preservation of the public peace, health, or safety or for appropriations for  
24 the support and maintenance of the departments of the state and state  
25 institutions.