

Written Testimony to Health Care Stabilization Fund Oversight Committee  
Nurse-midwife participation in Health Care Provider Liability Insurance

October 15, 2014

Mr. Chairman and Members of the Committee:

Thank you for the opportunity to provide an update on the transition of nurse-midwives into the HCSF.

My name is Sharon Foster and I am the president of the Kansas Affiliate of the American College of Nurse-Midwives (ACNM). The ACNM is the official professional organization of nurse-midwives across the United States with 60 Kansas members. The ninety nurse-midwives in Kansas are licensed professional nurses and Advanced Practice Registered Nurses (APRNs) whose practice is regulated by the Board of Nursing. Certified Nurse-midwives (CNMs) are certified by the American Midwifery Certification Board and the majority hold a Master's degree or higher education. There is a graduate program in nurse-midwifery at the University of Kansas. Kansas nurse-midwives practice in a variety of settings including: hospitals, group practices, 3 freestanding birth centers, homes, military bases, health departments and health centers.

I am providing testimony because the Kansas Affiliate ACNM members desired inclusion in the definition of "health care provider". The Kansas Affiliate supports the legislative intent of the fund in ensuring health care professionals have access to liability insurance. A stable market environment for the commercial insurance companies, provision for efficient administration of the HCSF, and timely payment when it is decided a patient should be compensated are other benefits of the act.

I have received some input from our organizations' members. Nurse-midwives employed by hospitals or physician owned groups are in the process of completing applications and choosing their fund coverage option. The costs of policies and prior acts coverage are not available at this time.

One nurse-midwife, who is employed at a Federally Qualified Health Center, reports that the health department where she also works one day a month has

told her they will not be purchasing medical liability insurance for her. The health department did not feel it was worth their time in filling out the paperwork or money to participate in the fund for her to continue working there.

An area of concern for nurse-midwives is for those who are employed at birth centers or have a home birth business. There are only 2 insurance companies listed on the HCSF web page that offer basic coverage to “all health care providers” and one that has added “other eligible KS defined health care providers”. However, this company requires the provider to be employed by a physician. The one insurance company that lists “nurse-midwives” as covered providers is the National Union Fire Insurance Company. This company is new to Kansas upon the request of nurse-midwives who have worked with them in the past. While the HCPIA plan is an option, the application for the plan is not yet available.

I am concerned that the lack of insurance companies offering basic policies to nurse-midwives limits competition and may drive up the price of coverage. There are 15 plans available to physicians in the state.

Our organization and the HCSF Executive Director have been in communication with the Kansas Board of Nursing about how nurse-midwives should handle their license if they are not currently rendering professional services in Kansas. An affidavit process will be available for nurse-midwives who do not desire to participate in the HCSF due to the above situation. When their license expires they will need to let their license lapse as there is not an “inactive” license option in the statutes for Kansas APRNs.

Thank you for your consideration.

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