



February 12, 2025

Rep. William Sutton, Chair
Kansas House Insurance & Pension Committee
219-N

Dear Chairman Sutton & Members of the Insurance and Pensions Committee,

I am submitting testimony in support of HB2335. New Birth Company Maternity Center* was a KDHE licensed and nationally accredited birth center providing natural childbirth services to Kansas mothers. It closed in August, 2024 due to low KanCare reimbursement. It had zero medical malpractice claims over its 14 year history.

HB2335 is the result of four years of diligent work with the Healthcare Stabilization Fund (HCSF). Last session, the bill language was included into the budget for the third time. This bill is consistent with the HCSF Oversight Committee 2025 report to the Legislature recommending inclusion of all APRNs into the HCSF fund; eg all licensed healthcare facility types should also be included in the HCSF. This bill is not a mandate. It allows the other birth centers to operate exactly as they have been operating. With this bill, accredited birth centers will gain access to the private malpractice market and remove the bulk of its liability out of the taxpayer funded Availability Plan.

Without passing this technical fix, the barrier remains to meet KanCare Managed Care Malpractice requirements. It is relevant to note that KanCare just received 17M over 10 years, the "Transforming Maternal Health" CMS/CMMI grant to improve rural access to maternal health providers, including Midwives and Birth Centers.

HB2335 provides required market access to high quality birth affirming facility service for KanCare Members and Kansas families, saving tax payer dollars. Please support the passage of HB2335.

Sincerely,

Kendra Wyatt, Chief Executive Officer (retired)
New Birth Company
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*The term “Maternity Centers” has been used to reflect Kansas statute whereas “Birth Centers” is more commonly used in public and healthcare settings. Kansas Maternity Center’s license nexus is the Childcare statute, which is why this technical addition is necessary. Birth Centers are recognized as a primary American Level of Maternity Care, a CMS federally mandated Medicaid service and are listed in the Social Security Act.

Levels of Maternity Care

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)

The closure of the Kansas City Kansas maternity center on July 1, 2021, was due to the emergency lack of access to facility malpractice when the last private insurer to birth centers left the market. Lack of access to affordable professional malpractice is a barrier to providing high value and affordable healthcare services for Kansas families and taxpayers. HB2335 provides access via the Healthcare Stabilization Fund to the required minimum coverage of facility malpractice. Being included in the HCSF enables the private carriers to provide coverage, enabling accredited birth centers to get out of the Availability Plan.