

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

PART 207
FREESTANDING BIRTH CENTERS

333.20701 General definitions and principles of construction.

Sec. 20701. (1) As used in this part:

(a) "Certified nurse midwife" means an individual who is licensed as a registered professional nurse under part 172 who has been granted a specialty certification in the health profession specialty field of nurse midwifery by the Michigan board of nursing under section 17210.

(b) "Freestanding birth center" means a facility that provides midwifery care for normal deliveries, well-person reproductive and sexual health care, extended postpartum care, and newborn care, that is within the scope of practice of the health care provider. Freestanding birth center does not include a hospital or freestanding surgical outpatient facility.

(c) "Health care provider" means any of the following:

(i) A physician.

(ii) A physician's assistant licensed under part 170 or 175.

(iii) A certified nurse midwife.

(iv) A midwife.

(d) "Midwife" means that term as defined in section 17101.

(e) "Midwifery care" means the practice of midwifery as that term is defined in section 17101 by a midwife and the practice of nursing by a certified nurse midwife.

(f) "Physician" means that term as defined in section 17001 or 17501.

(g) "Social determinants of health" means the social and economic conditions that influence individual and group differences in health status.

(2) In addition, article 1 contains general definitions and principles of construction applicable to all articles in this code and part 201 contains definitions applicable to this part.

History: Add. 2024, Act 252, Eff. Apr. 2, 2025.

Compiler's note: Former MCL 333.20701-333.20773 Expired. 1981, Act 79, Eff. Sept. 30, 1989;—Repealed, 1990, Act 179, Imd. Eff. July 2, 1990.

Popular name: Act 368

333.20711 License required; use of term "freestanding birth center".

Sec. 20711. (1) A freestanding birth center must be licensed under this article.

(2) "Freestanding birth center" or a similar term or abbreviation must not be used to describe or refer to a health facility or agency unless it is licensed by the department under this article.

History: Add. 2024, Act 252, Eff. Apr. 2, 2025.

Popular name: Act 368

333.20713 Owner, operator, governing body of freestanding birth center; responsibilities and duties.

Sec. 20713. The owner, operator, and governing body of a freestanding birth center licensed under this article:

(a) Are responsible for all phases of the operation of the freestanding birth center, selection of health care providers, and quality of care rendered in the freestanding birth center.

(b) Shall cooperate with the department in the enforcement of this article and require that the health care providers and other personnel working in the freestanding birth center and for whom a state license or registration is required be currently licensed or registered.

(c) Subject to sections 20719 and 20721, shall ensure that health care providers are of a sufficient number to maintain safety and quality of care and have the qualifications, training, and skills necessary to meet operational needs and the needs of a patient, considering the caseload and size of the freestanding birth center.

History: Add. 2024, Act 252, Eff. Apr. 2, 2025.

Popular name: Act 368

333.20715 Compliance requirements.

Sec. 20715. Subject to this part, part 171, and any rules promulgated for purposes of this part and part 171, a freestanding birth center shall comply with all of the following:

(a) Have a plan to identify needs caused by social determinants of health and, with the consent of a patient, refer the patient to a support service to address the patient's needs. For purposes of this subdivision, "support service" includes, but is not limited to, a food assistance program, a counseling service, an early childhood development resource, a housing assistance program, or an intimate partner violence support group.

(b) Develop, implement, and enforce written policies and procedures for the freestanding birth center's operations. The policies and procedures must be made available to health care providers and other personnel who are employed by or under contract with the freestanding birth center and must comply with all of the following:

(i) Be administered in a manner that provides quality health care services in a safe environment.

(ii) Identify a process for hiring, credentialing, and training staff.

(iii) Ensure that the right of a patient to informed consent and to refuse treatment is upheld at every stage of care.

(iv) Include a process by which health care providers who are employed by or under contract with the freestanding birth center comply with all of the following:

(A) Refer a patient to services that are not directly provided by the freestanding birth center, including, but not limited to, outside laboratory testing services, lactation support services, and childbirth education.

(B) Consult with another health care provider.

(C) Refer a patient to another health care provider.

(D) Transfer the care of a patient to another health care provider with the informed consent of the patient.

(E) Initiate patient transport to a hospital described under subdivision (e) when needed by calling 9-1-1 or an ambulance operation or by arranging other means for patient transport.

(F) Notify a hospital described under subdivision (e) of the freestanding birth center's license.

(v) Include a process by which a patient's medical record is provided to another health care provider upon the patient's request or if the patient is transferred as described in subparagraph (iv)(D) or (E).

(c) Ensure that services are provided in a community setting with adequate space for furnishings, equipment, supplies, and accommodations for patients and the families of patients.

(d) Ensure that a patient is notified of each health care provider within the freestanding birth center who maintains a malpractice liability insurance policy and each health care provider who does not.

(e) Identify a hospital to which a patient may be transferred from the freestanding birth center and that is in close proximity to the freestanding birth center.

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Popular name: Act 368

333.20717 Prohibited conduct; development of policies and procedures; exception for insufficient time.

Sec. 20717. (1) A freestanding birth center shall not do any of the following:

(a) Except as otherwise provided in this subdivision, use general or regional anesthesia, including epidural anesthesia. Local anesthesia, nitrous oxide, and other forms of pain relief may be administered at the freestanding birth center if all of the following are met:

(i) It is determined to be clinically necessary by a health care provider.

(ii) It is administered by a health care provider who is acting within the scope of the health care provider's practice.

(iii) It is used according to the freestanding birth center's policies and procedures and according to the professionally recognized standards of practice described in section 20727.

(b) Use pharmacologic agents to induce, stimulate, or augment labor, or bring about cervical ripening, during the first or second stages of labor or before labor. A freestanding birth center may use pharmacologic agents during the delivery of a placenta and in the postpartum period.

(c) Perform surgical procedures other than the following:

(i) Episiotomies.

(ii) Repairs of perineal lacerations.

(iii) Circumcisions.

(iv) Newborn frenulum revisions.

(v) Any other surgical procedure that is authorized by the department by rule.

(d) Use vacuum extractors or vaginal forceps.

(e) Except as otherwise provided in subsection (3), permit a patient to deliver at the freestanding birth center if any of the following limiting factors apply:

(i) Fetal gestation is less than 36 weeks and 0 days.

(ii) Labor has not started before fetal gestation of 42 weeks and 1 day.

(iii) Any other limiting factor established by rule under section 20727 is present in the patient or the clinical needs of the patient fall outside the scope of practice of a health care provider at the freestanding birth center.

(2) A freestanding birth center shall develop policies and procedures for assessing a patient seeking perinatal care to determine whether it is appropriate for the patient to deliver at the freestanding birth center.

(3) A freestanding birth center may permit a patient who meets a limiting factor described in subsection (1) or in rules promulgated under section 20727 to deliver at the freestanding birth center if there is insufficient time to convey the responsibility for the care of the patient to a hospital before the fetus is born.

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Popular name: Act 368

333.20719 Provision of quality perinatal care and information; availability of health care provider; personnel and equipment requirements.

Sec. 20719. (1) A freestanding birth center shall provide quality perinatal care that promotes physiologic birth, including, but not limited to, all of the following:

(a) Respectful, supportive care during labor, for which the patient has provided consent.

(b) Minimization of stress-inducing stimuli.

(c) Freedom of movement.

(d) Oral intake, as appropriate.

(e) Availability of nonpharmacologic pain relief methods.

(f) Regular and appropriate assessment of the patient and fetus throughout labor.

(2) The freestanding birth center shall provide a patient, at the inception of care, with all of the following information:

(a) A written description of the training, philosophy of practice, qualifications, and license or specialty certification of a health care provider who is employed by or under contract with the freestanding birth center.

(b) A written description of the freestanding birth center's patient practice policies.

(c) The complaint process for state and national credentialing organizations for a health care provider who is employed by or under contract with the freestanding birth center.

(3) The freestanding birth center shall ensure that a health care provider is present or available to the patient at all times when a patient is admitted to the freestanding birth center and until the patient and the newborn are determined to be clinically stable, based on criteria established by the freestanding birth center.

(4) The freestanding birth center shall ensure that a health care provider monitors the progress of a patient's labor and the condition of the patient and fetus or newborn at intervals established in the freestanding birth center's policies and procedures.

(5) Subject to this subsection, the freestanding birth center shall have the personnel and equipment necessary to ensure patient safety, meet the demands for services that are routinely provided in the freestanding birth center, provide coverage during periods of high demand or in the case of an emergency, and respond to patient health emergencies that may arise while a patient is receiving services in the freestanding birth center, including, but not limited to, basic life support, neonatal resuscitation, and the initial management of postpartum complications. The freestanding birth center shall ensure that at least 2 individuals are on the premises and immediately available during a delivery who are certified in basic life support from the American Heart Association or an equivalent organization as determined by the department and are certified in neonatal resuscitation from the American Academy of Pediatrics, the American Heart Association, or an equivalent organization, as determined by the department.

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333.20721 Discharge, follow-up, and evaluation requirements.

Sec. 20721. (1) A freestanding birth center shall not discharge a patient from the birth center until the patient is clinically stable and has met discharge criteria established by the freestanding birth center.

(2) A freestanding birth center shall ensure that a program for follow-up care and postpartum evaluation is planned for each patient.

(3) A freestanding birth center shall ensure that both of the following are available to a patient of the freestanding birth center 24 hours a day and 7 days a week:

(a) Consultation with a health care provider by telephone.

(b) A health care provider or other personnel who are available on call to provide intrapartum care to the patient.

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Popular name: Act 368

333.20722 Limitations on departmental requirements.

Sec. 20722. (1) The department shall not require a freestanding birth center to do any of the following:

(a) Maintain a collaborative agreement with another health facility or agency or with a health care provider who is not employed by or under contract with a freestanding birth center.

(b) Provide care other than midwifery care.

(2) Subsection (1) does not limit a freestanding birth center from maintaining a collaborative agreement or providing care other than midwifery care as described under subsection (1).

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Popular name: Act 368

333.20723 Health care providers; recommended vaccinations; immunization requirements; tuberculosis testing.

Sec. 20723. (1) A freestanding birth center shall recommend that health care providers and other personnel who are employed by or under contract with the freestanding birth center receive an annual vaccination against influenza and recommend that health care providers and other personnel who are employed by or under contract with the freestanding birth center are fully vaccinated against COVID-19.

(2) A freestanding birth center shall provide evidence to the department, on request, of immunization, positive titer result, or documentation of refusal for health care providers and other personnel who are employed by or under contract with the freestanding birth center, for each of the following:

(a) Rubella.

(b) Tdap.

(c) Hepatitis B.

(d) Varicella.

(e) Against any other disease required by the department by rule.

(3) A freestanding birth center shall conduct tuberculosis testing before employing or entering into a contract with an individual who will work in the freestanding birth center.

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Popular name: Act 368

333.20727 Promulgation of rules.

Sec. 20727. The department, in consultation with representatives of freestanding birth centers, the Michigan Affiliate of the American College of Nurse-Midwives, the Michigan Midwives Association, the Michigan board of nursing, the Michigan board of licensed midwifery, and the State of Birth Justice, shall promulgate rules to implement this part. The rules must include at least all of the following:

(a) Professionally recognized standards of practice based on standards issued by the American Association of Birth Centers, the American College of Nurse-Midwives, and the National Association of Certified Professional Midwives. If any of the standards described in this subdivision are revised after the effective date of the amendatory act that added this section, the department shall take notice of the revision. The department, in consultation with the persons described in this section, may promulgate rules to incorporate any revision by reference.

(b) Limiting factors that, when present, would preclude a patient from delivering at the freestanding birth center because the patient is not considered to be a patient with a normal delivery. The rules must allow a freestanding birth center to develop policies that would include additional limiting factors to preclude delivery at the freestanding birth center.

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Popular name: Act 368

333.20729 Enforcement of part.

Sec. 20729. Notwithstanding part 201, the department shall not enforce this part or any rules promulgated for purposes of this part, including, but not limited to, the requirement that a freestanding birth center be licensed under this article, until 2 years after the effective date of the amendatory act that added this part.

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333.20735 Third-party reimbursement or worker's compensation benefits.

Sec. 20735. This part does not require new or additional third-party reimbursement or mandated worker's

compensation benefits for services rendered at a freestanding birth center.

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