

Sixty-ninth  
Legislative Assembly  
of North Dakota

**FIRST ENGROSSMENT  
with Senate Amendments**

**ENGROSSED HOUSE BILL NO. 1464**

Introduced by

Representatives Dobervich, K. Anderson, Brown, Finley-DeVille, Hager, Hanson, Rohr,  
Steiner

Senators Hogan, Mathern

1 A BILL for an Act to provide for a legislative management study relating to maternal care  
2 services.

3 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

4 **SECTION 1. LEGISLATIVE MANAGEMENT STUDY - MATERNAL CARE SERVICES.**

5 1. During the 2025-26 interim, the legislative management shall consider studying  
6 maternal care services. The study must include:

- 7 a. An analysis of the availability of medical and nonmedical prenatal services in the  
8 state by community and geographic service area, and the utilization rate of each;
- 9 b. A review of childbirth service availability, including in-home and health care  
10 facility-based services, and the number of obstetrician-gynecologists and family  
11 practitioners routinely delivering babies by geographic service area;
- 12 c. A review of prenatal, childbirth, and postnatal services covered by public  
13 assistance, private insurance, and pregnancy resource centers, including an  
14 analysis of funding, program evaluation, and outcomes;
- 15 d. Consideration of previous studies related to maternal care services;
- 16 e. Consideration of maternal care resource and asset maps, service gaps,  
17 evidence-based or innovative pilot project solutions for resolving service gaps,  
18 and approaches for increasing the use of prenatal and postnatal care services  
19 and programs;
- 20 f. An evaluation of ways to increase the number of obstetrician-gynecologists and  
21 family practitioners practicing in the state;

- 1           g.   Exploration of processes for certifying, training, and reimbursing doula and
- 2                midwife services;
- 3           h.   Consideration of public assistance and private insurance policy opportunities to
- 4                improve maternal and infant health outcomes; and
- 5           i.   Input and consultation from key stakeholders, including:
- 6                (1)   The university of North Dakota school of medicine and health sciences;
- 7                (2)   The North Dakota maternal mortality review committee;
- 8                (3)   The infant mortality review panel;
- 9                (4)   The foundation for a healthy North Dakota;
- 10              (5)   Doulas, midwives, and home-based service providers practicing in the state;
- 11              (6)   The North American college of obstetricians and gynecology;
- 12              (7)   The North Dakota medical association;
- 13              (8)   The women, infants, and children program; and
- 14              (9)   North Dakota health tracks.
- 15        2.   The legislative management shall report its findings and recommendations, together
- 16               with any legislation required to implement the recommendations, to the seventieth
- 17               legislative assembly.