WHEREAS, The Constitution of the State of Illinois provides for "the health, safety and welfare of the people" and the "opportunity for the fullest development of the individual"; and

WHEREAS, It has been demonstrated that due to deeply held religious, philosophical, or personal reasons, some families will always choose to give birth to their children at home; and

WHEREAS, There were 61,041 out-of-hospital births in the United States in 2015 with a 52% increase in out-of-hospital births and a 45% increase in home births since 2007; and

WHEREAS, 65% of U.S. home births in 2015 were attended by non-nurse midwives; and

WHEREAS, In Illinois, home births increased by 50% between 2007 and 2014; and

WHEREAS, All well-designed studies show that for low-risk women, planned home birth, attended by a trained maternity care provider, is as safe as hospital birth; and

WHEREAS, Over 50 trained Illinois home birth providers,
including the last remaining Illinois home birth physician, have ceased providing home birth services since 1996; and

WHEREAS, There now remain fewer than 10 legally recognized home birth practices (nurse-midwives) in Illinois, and these are located in only six of 102 Illinois counties (Lake, Cook, DuPage, Will, Peoria, and McLean); and

WHEREAS, Due to the scarcity of legal home birth providers, approximately 50% of the babies born at home in Illinois are born either with no skilled assistance at all (unassisted home birth), or they are born into the hands of underground community midwives; and

WHEREAS, Some of these underground midwives are nationally certified and credentialed, while others are not; and

WHEREAS, Underground community midwives have no legal access to life saving oxygen and anti-hemorrhage medications; and

WHEREAS, Underground community midwives have no means of legally completing newborn congenital heart disease screenings, hearing screenings and metabolic screening tests, and no means of legally filing accurate birth certificate information; and
WHEREAS, An underground system of care may cause parents and midwives to delay seeking hospital care in the event of an emergency; parents are afraid of Child Protective Services involvement; midwives are afraid of arrest; and

WHEREAS, Underground healthcare is never safe; and

WHEREAS, The above-mentioned increase in Illinois home births, the shortage of licensed home birth providers, and the dangers associated with families resorting to underground healthcare, in effect, add up to a "Home Birth Maternity Care Crisis" in Illinois; and

WHEREAS, Illinois is surrounded on three sides by states (Wisconsin, Indiana, Missouri) that set educational standards for their community midwives, license and regulate them, allow them to have access to life-saving oxygen and medications, allow them to perform life-saving newborn screenings, and allow them to openly transport to a hospital in an emergency; and

WHEREAS, 33 of the 50 United States also protect their citizens in this way through licensure and regulation of community midwives; and

WHEREAS, Licensure in these states is based upon the
requirement that the community midwife earn a Certified Professional Midwife (CPM) credential - the only healthcare credential requiring documented out-of-hospital training and experience; and

WHEREAS, States that license Certified Professional Midwives tend to have lower perinatal mortality rates; and

WHEREAS, More and more states are taking advantage of the cost-savings associated with home birth midwifery care to reduce state Medicaid expenditures; and

WHEREAS, The State of Illinois used to license community midwives under the Medical Practice Act from 1877 to 1963 and ceased renewing licenses in 1972; and

WHEREAS, Home birth mothers and families have been seeking a legislative solution to the Home Birth Maternity Care Crisis for nearly 40 years (since 1979); and

WHEREAS, All Illinois mothers and their newborns deserve access to safe maternity care regardless of place of birth; therefore, be it

RESOLVED, BY THE SENATE OF THE ONE HUNDRED FIRST GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, THE HOUSE OF REPRESENTATIVES
CONCURRING HEREIN, that we find it unacceptable that home birth mothers and babies in Illinois are without adequate maternity care providers; and be it further

RESOLVED, That it is in the State's best interest to assure its citizens access to all safe maternity care options; and be it further

RESOLVED, That Illinois families, in order to best meet personal needs and desires, are entitled freedom to choose among all safe, nationally-recognized maternity care options, including home birth; and be it further

RESOLVED, That the Home Birth Maternity Care Crisis Study Committee is hereby created; and be it further

RESOLVED, That the Home Birth Maternity Care Crisis Study Committee be bipartisan; and be it further

RESOLVED, That the Home Birth Maternity Care Crisis Study Committee include 15 members as follows:

(1) One appointed by the Secretary of the Department of Financial and Professional Regulation;

(2) One appointed by the President of the Senate;

(3) One appointed by the Minority Leader of the Senate;

(4) One appointed by the Speaker of the House of
Representatives;

(5) One appointed by the Minority Leader of the House of Representatives;

(6) A representative of a statewide association representing professional midwives, appointed by the President of the Senate;

(7) A representative of a national association representing professional midwives, appointed by the President of the Senate;

(8) A representative of a statewide association representing advanced practice nursing, appointed by the President of the Senate;

(9) A representative of a statewide association representing nurse-midwives, appointed by the Minority Leader of the Senate;

(10) A representative of a statewide association representing hospitals, appointed by the Minority Leader of the Senate;

(11) A representative of a statewide association representing lawyers, appointed by the Speaker of the House of Representatives;

(12) A representative of a statewide association representing pediatrics, appointed by the Speaker of the House of Representatives;

(13) A representative of a statewide association representing obstetricians and gynecologists, appointed by
the Minority Leader of the House of Representatives;

(14) A representative of a statewide association representing doctors, appointed by the Minority Leader of the House of Representatives; and

(15) A representative of a statewide association representing a consumer organization, appointed by the Minority Leader of the House of Representatives; and be it further

RESOLVED That the Home Birth Maternity Care Crisis Study Committee shall meet monthly until such time that it is prepared to make a recommendation to the General Assembly, but that time shall be no later than January 1, 2020; and be it further

RESOLVED, That the Office of the Secretary of the Department of Financial and Professional Regulation shall provide the Task Force with administrative and other support; and be it further

RESOLVED, That the Home Birth Maternity Care Crisis Study Committee will hear testimony from all interested parties; and be it further

RESOLVED, That the Home Birth Maternity Care Crisis Study Committee will thoroughly consider the role that Certified
Professional Midwives may have in helping to resolve the Home Birth Maternity Care Crisis; and be it further

RESOLVED, That the Home Birth Maternity Care Crisis Study Committee will recommend to the General Assembly a consumer-focused, evidence-based solution to the Illinois Home Birth Maternity Care Crisis that protects families from the dangers of having inadequate numbers of licensed home birth providers to care for them during the prenatal, intrapartum, and postpartum portions of their pregnancies, especially in the underserved communities of Illinois.