

# POSITION STATEMENT

## Midwives Are Primary Care Providers

The American College of Nurse-Midwives (ACNM) affirms the following:

- Certified nurse-midwives (CNMs) and certified midwives (CMs) are providers of primary care for cisgender women, transgender and gender-nonbinary individuals, and those who identify as queer/questioning, bisexual, or lesbian, as well as for newborns.
- The use of CNMs and CMs as primary care providers is integral to the success of the health care workforce.
- CNMs and CMs must be recognized by state and federal programs aimed at increasing the primary care workforce for their role in the provision of primary care services.
- As primary care providers, CNMs and CMs are well positioned to lead patient-centered care teams.

### Background

Primary health care includes integrated, accessible health care services by clinicians who are accountable for addressing most health care needs, developing sustained partnerships with patients, and practicing within the context of family and community.<sup>1</sup> Primary care should be coordinated around the needs of the individual patient to improve access to ongoing safe, holistic, quality health care.

The *Core Competencies for Basic Midwifery Practice*<sup>1</sup> describe the fundamental knowledge, skills, and behaviors that are expected of a new practitioner, including the provision of primary health care from the premenarcheal through the postmenopausal phases. CNMs and CMs also provide primary care for newborns. CNMs and CMs are often the initial contact for persons seeking health care and frequently provide services to rural and other underserved populations.<sup>2</sup> They provide such care on a continuous and comprehensive basis by establishing a plan of management with the individual that includes wellness, preventive care, screening, and treatment for health care problems. Furthermore, midwives provide care in the context of cultural, socioeconomic, and psychological factors that may influence the health status of the individual.

In March 2010, Congress passed the Patient Protection and Affordable Care Act into law. This law includes comprehensive health insurance reforms and a commitment by the federal government to increase the availability of primary care services.<sup>3</sup> CNMs and CMs are integral members of the primary care workforce who can increase the availability of these services.

CNMs are recognized as primary care providers under existing federal health care programs, including those that address primary care workforce expansion, reimbursement for services, and loan repayment programs.

- To address the nation's health care workforce demands, the National Health Service Corps (NHSC) repays educational loans and provides scholarships to primary care health professionals who practice in areas of the country that have too few health care

---

professionals to serve the people who live there. CNMs are eligible for placement as primary care providers in underserved areas of the United States through the NHSC (see 42 USC §254i-1).<sup>4</sup>

- CNM services are a mandatory benefit under the Medicaid program, and states have the option of using CNMs as primary care case managers. CNMs are recognized to provide care within their full scope of practice under Medicare for women with disabilities of childbearing age and primary care and well-woman care for senior women (see 42 USC §1396d(t)(2)<sup>5</sup> and 42 USC §1395x(gg)).<sup>6</sup>
- Federal law providing funding for nurse-midwifery educational programs states that these grants are to educate students “to be qualified to effectively provide primary health care, including primary health care in homes and in ambulatory care facilities, long-term care facilities, acute care, and other health care settings” (see 42 USC §296j).<sup>7</sup>
- The Federal Employees Health Benefit Program states that federal employees shall have direct access to the services of nurse-midwives (see 5 USC §8902(k)(1)).<sup>8</sup>

## References

1. American College of Nurse-Midwives. Core competencies for basic midwifery practice. Published March 20, 2020. Accessed April 11, 2022. [https://www.midwife.org/acnm/files/acnmlibrarydata/uploadfilename/000000000050/ACNMCORECompetenciesMar2020\\_final.pdf](https://www.midwife.org/acnm/files/acnmlibrarydata/uploadfilename/000000000050/ACNMCORECompetenciesMar2020_final.pdf)
2. Phillippi JC, Barger MK. Midwives as primary care providers for women. *J Midwifery Womens Health*. 2015;60(3):250-257. doi:10.1111/jmwh.12295
3. Assistant Secretary for Public Affairs (ASPA). About the Affordable Care Act. US Department of Health and Human Services. Updated March 17, 2022. Accessed August 2022. <https://www.hhs.gov/healthcare/about-the-aca/index.html>
4. Annual Report to Congress; Contents. 42 USC §254i-1 (2020).
5. Definitions. 42 USC §1396d(t)(2) (2020). [https://uscode.house.gov/view.xhtml?req=\(title:42%20section:1396d%20edition:prelim\)](https://uscode.house.gov/view.xhtml?req=(title:42%20section:1396d%20edition:prelim))
6. Definitions. 42 USC §1395x(gg) (2020). <https://www.govinfo.gov/app/details/USCODE-2020-title42/USCODE-2020-title42-chap7-subchapXVIII-partE-sec1395x>
7. Advanced Education Nursing Grants. 42 USC §296j (2020). <https://www.govinfo.gov/app/details/USCODE-2020-title42/USCODE-2020-title42-chap6A-subchapVI-partB-sec296j>
8. Contracting Authority. 5 USC §8902(k)(1) (2020). <https://www.govinfo.gov/app/details/USCODE-2020-title5/USCODE-2020-title5-partIII-subpartG-chap89-sec8902>

*Note.* The term *midwifery*, as used throughout this document, refers to the education and practice of CNMs and CMs who have been certified by the American Midwifery Certification Board (AMCB).

*Original Source: Division of Standards and Practice*  
*Approved by the ACNM Board of Directors: 2012*  
*Reviewed: 2018, 2022*