

Full Hospital Privileges for Midwives = Access to Quality Care for Women

Maternity Care Crisis

The United States has the highest

maternal mortality rate in the developed world.

Rates of maternal mortality, severe maternal morbidity, preterm birth, infant mortality, and low birth weight in the US are some of the highest among high-income nations.

Roughly 700 women die every year from complications of pregnancy and childbirth, most of which could have been prevented...

...and more than 50,000 women experience severe maternal morbidity, a life-threatening complication as a result of labor and delivery.

Not Enough Access to Care:

Approximately half of all counties in the US have no maternity care services.

- Over five million women in the US live in a **maternity care desert.**
 - No hospitals that offer maternity care services
 - Not a single OB-Gyn
 - Not a single Certified Nurse-Midwife or Certified Midwife
- An estimated 1,085 counties in the United States have hospitals without maternity services.
- There is **currently a severe shortage of OB-Gyns**, which CMS and ACOG have projected to skyrocket by the year 2050!
- Over 78 million people in the U.S. live in **primary care health provider shortage areas.**
- Americans must either travel long distances to see a healthcare provider or go without healthcare.

Advanced Practice Midwives are integral to health systems.

The March of Dimes, the World Health Organization, and others say midwives are part of the solution.

- Advanced practice clinicians through the lifespan
- Accredited education
- Masters/Doctoral preparation
- Board certified
- Licensed with prescriptive authority in all states
- Primary care providers under federal law
- Mandated providers under Medicare and Medicaid, and reimbursed at 100% of the physician fee schedule under Medicare
- Bring families into the health systems by partnering with women, who are the decision-makers for their families
- Majority (95%) practice in hospitals

Studies show that integration of midwives can:

- Help solve the nationwide maternity and primary care shortages
- Improve maternal and neonatal outcomes
- Reduce maternal mortality and morbidity
- Increase rates of spontaneous labor, vaginal birth and breastfeeding.

Midwifery care has been shown to improve outcomes and reduce the rates of:

- Cesarean birth
- Preterm birth
- Stillbirth
- Severe perineal trauma (birth trauma)
- Severe blood loss
- Newborns with low birthweight
- Neonatal Intensive Care Unit (NICU) admissions

Midwives can lower health care costs!

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Why aren't midwives more widely utilized?

Outdated hospital restrictions bar midwives from obtaining full medical staff privileges in areas where they are needed most

***"These restrictions are inefficient, increase costs, and reduce access to care."
The New England Journal of Medicine (2020)***

What are hospital privileges?

Privileges authorize licensed healthcare providers to:

- Practice in a hospital
- Admit and discharge patients
- Actively participate on policy-making committees
- Vote on policies that affect patient care
- Have due process protections

Who determines privileges?

- The Centers for Medicare & Medicaid Services (CMS) Conditions of Participation ("COPs" 42 C.F.R. 482.22) and private accrediting bodies (e.g., the Joint Commission) require an organized medical staff with written bylaws.
- The COPs require that the medical staff bylaws be approved by the Hospital Governing Body.
- The medical staff writes the bylaws that govern a hospital's providers, is responsible for maintaining staff bylaws and oversees credentialing and privileging processes.
- The bylaws determine the level of privileges for different types of providers.

Active Medical Staff do not have to be Medical Doctors or Doctors of Osteopathy!

- The requirement under Medicare's COP is that active medical staff must include Doctors of Medicine or Doctors of Osteopathy.

- In accordance with state law, including scope-of-practice laws, the medical staff *may also include* other categories of physicians (as listed at §482.12(c)(1)) and other advanced practitioners who are determined to be eligible for appointment by the governing body.
- This may include:
 - Doctors of Dental Medicine
 - Doctors of Dental Surgery
 - Podiatrists
 - Optometrists
 - Chiropractors
 - Clinical psychologists
- Advanced practice registered nurses, which includes CNMs

Midwives need medical staff privileges

A tiered system of privileges:

- Creates barriers to midwifery practice.
- Limits access to the acute care needs of midwifery patients.
- Impacts the midwifery workforce.
- Can expose physicians to vicarious liability.

Midwives:

- Bring patients into hospitals and health care systems.
- Should have a voice in the policies that govern their practice.
- Need due process to maintain practice.

"[These] requirements raise competition concerns because they effectively give one group of health care professionals the ability to restrict access to the market by a competing group of health care professionals, thereby denying health care consumers the benefits of greater competition." - Federal Trade Commission

TAKE ACTION: Expand Access to Quality Care for Women by Supporting Full Hospital Privileges for Advance Practice Midwives!

- Establish privileging parity for midwives.
- Eliminate barriers to midwives and midwifery-led care models.
- Provide Medicare patients the same access to midwifery care as Medicaid patients.
- Contact the American College of Nurse Midwives at akohl@ACNM.org for additional information.