

# Understanding Your Practice Environment: Making an Informed Decision About Where to Work

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# Where are Your Colleagues?

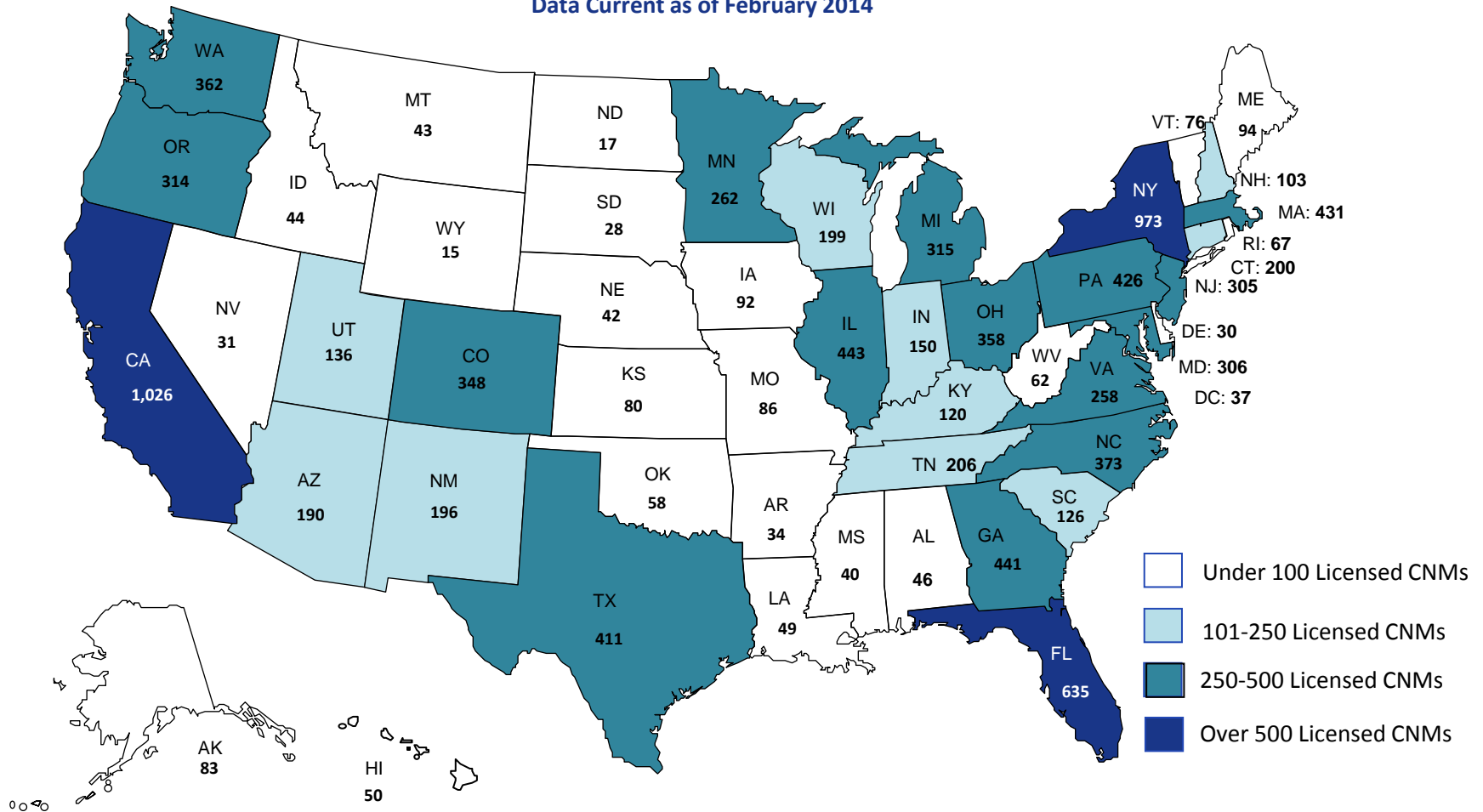


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# Where CNMs and CMs Practice

Data Current as of February 2014

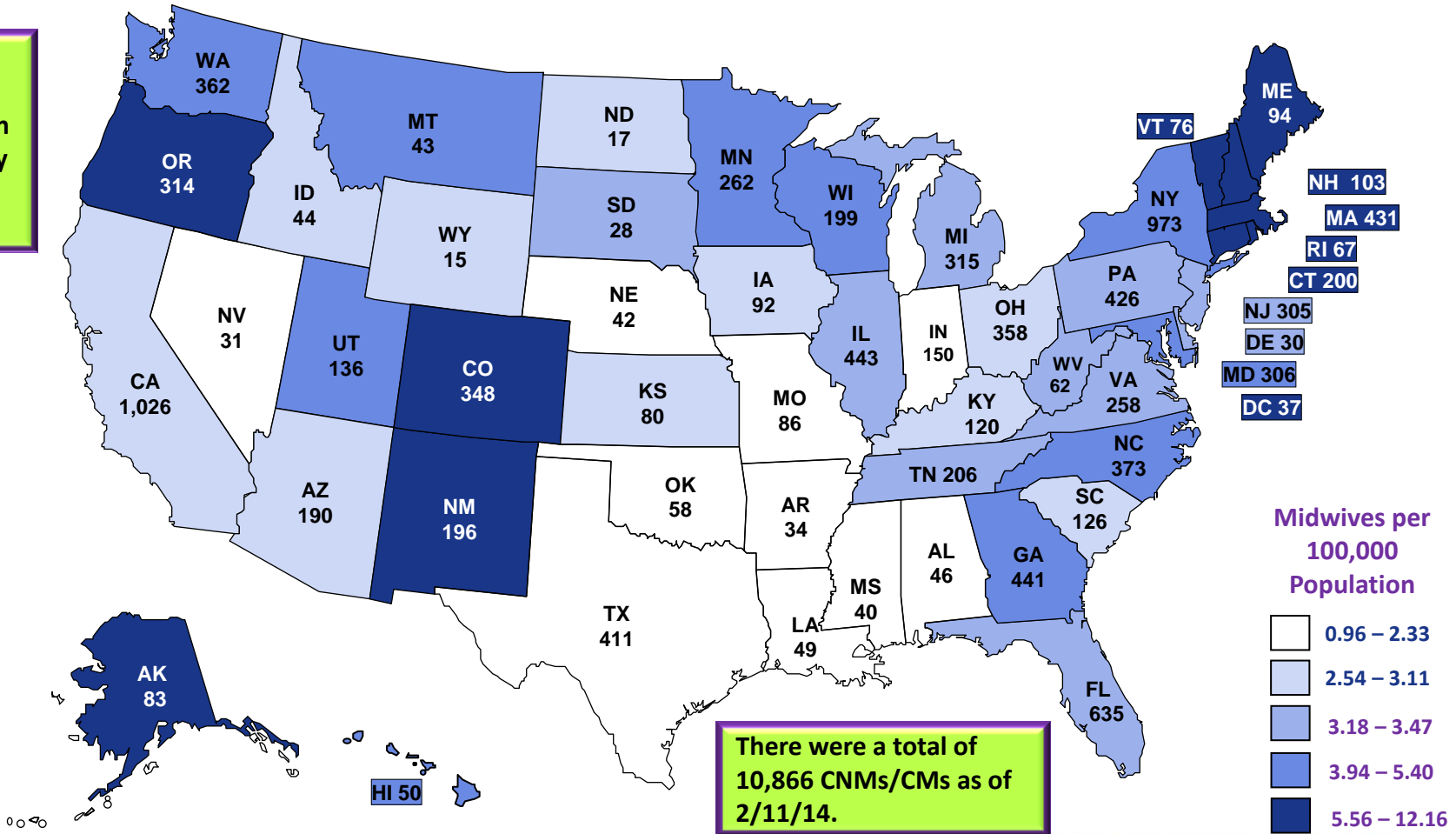


- Under 100 Licensed CNMs
- 101-250 Licensed CNMs
- 250-500 Licensed CNMs
- Over 500 Licensed CNMs

# Number and Density of CNMs/CMs by State

Data Current as of February 2014

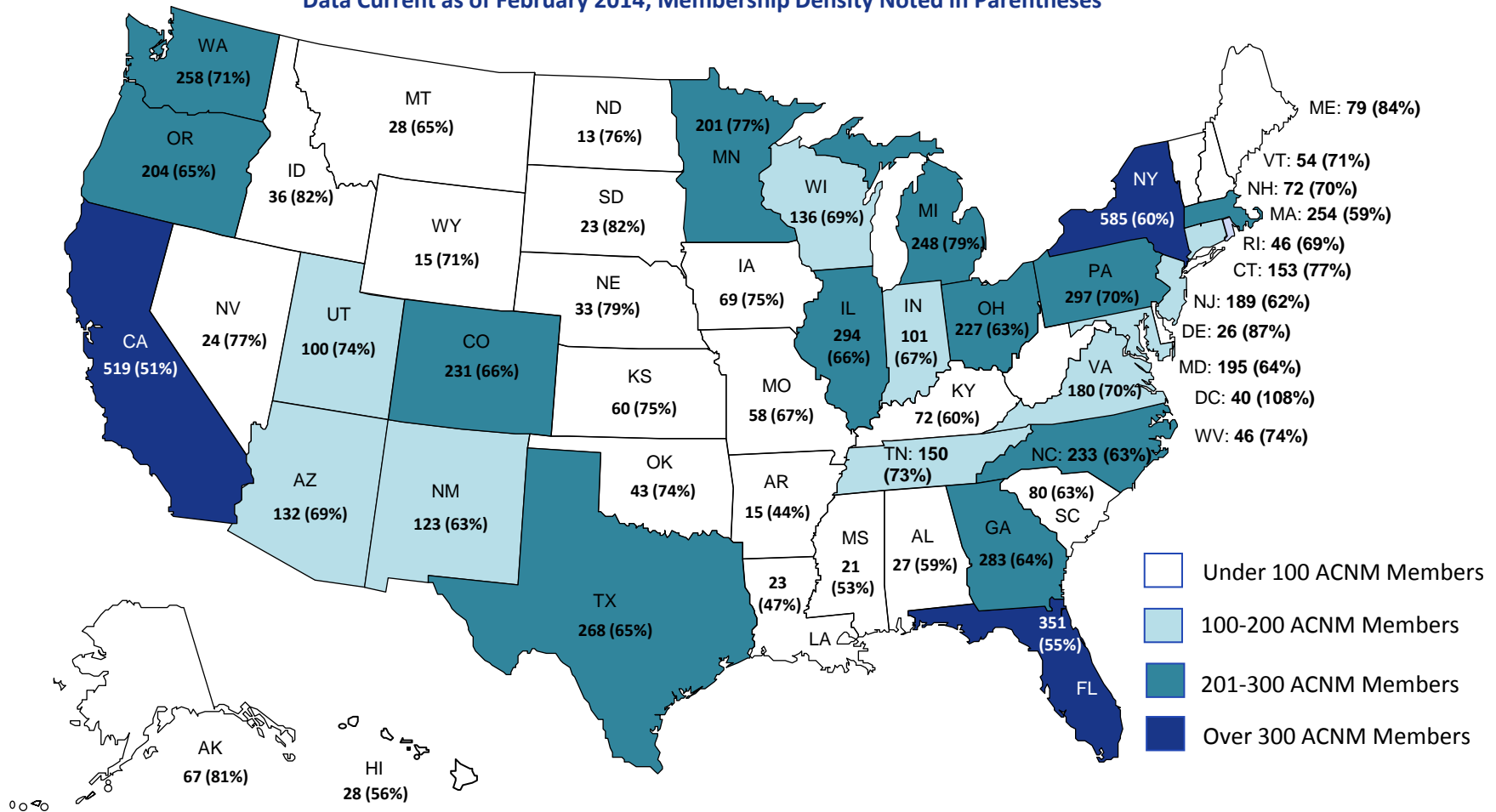
Number of CNMs/CMs shown in each state. Density indicated by color.



Source: Number of CNMs/CMs per state provided to ACNM by the American Midwifery Certification Board (AMCB). Population figures from US Census, rounded to nearest 1,000.

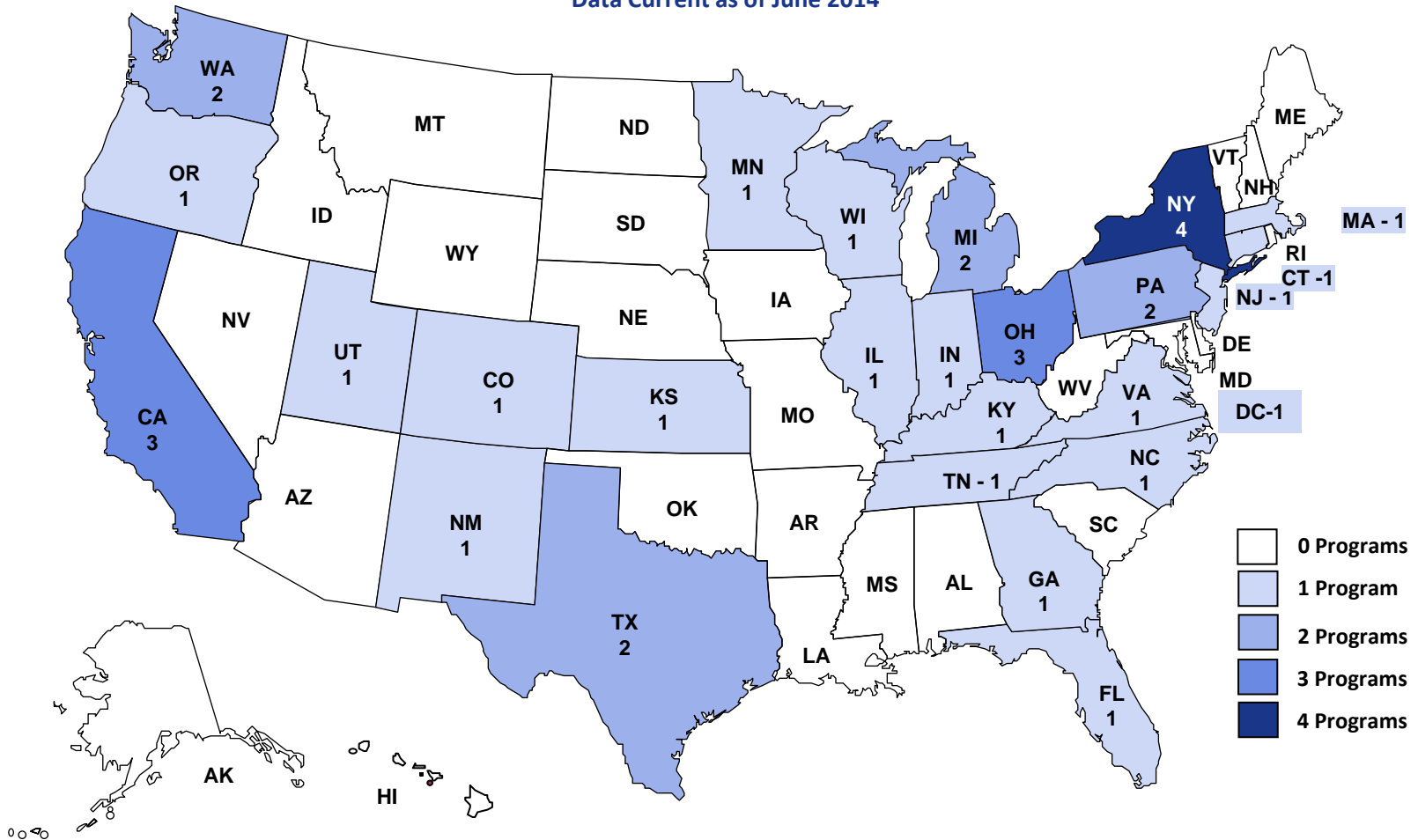
# Number of ACNM Members Per State

Data Current as of February 2014; Membership Density Noted in Parentheses



# Number of Midwifery Education Programs by State

Data Current as of June 2014



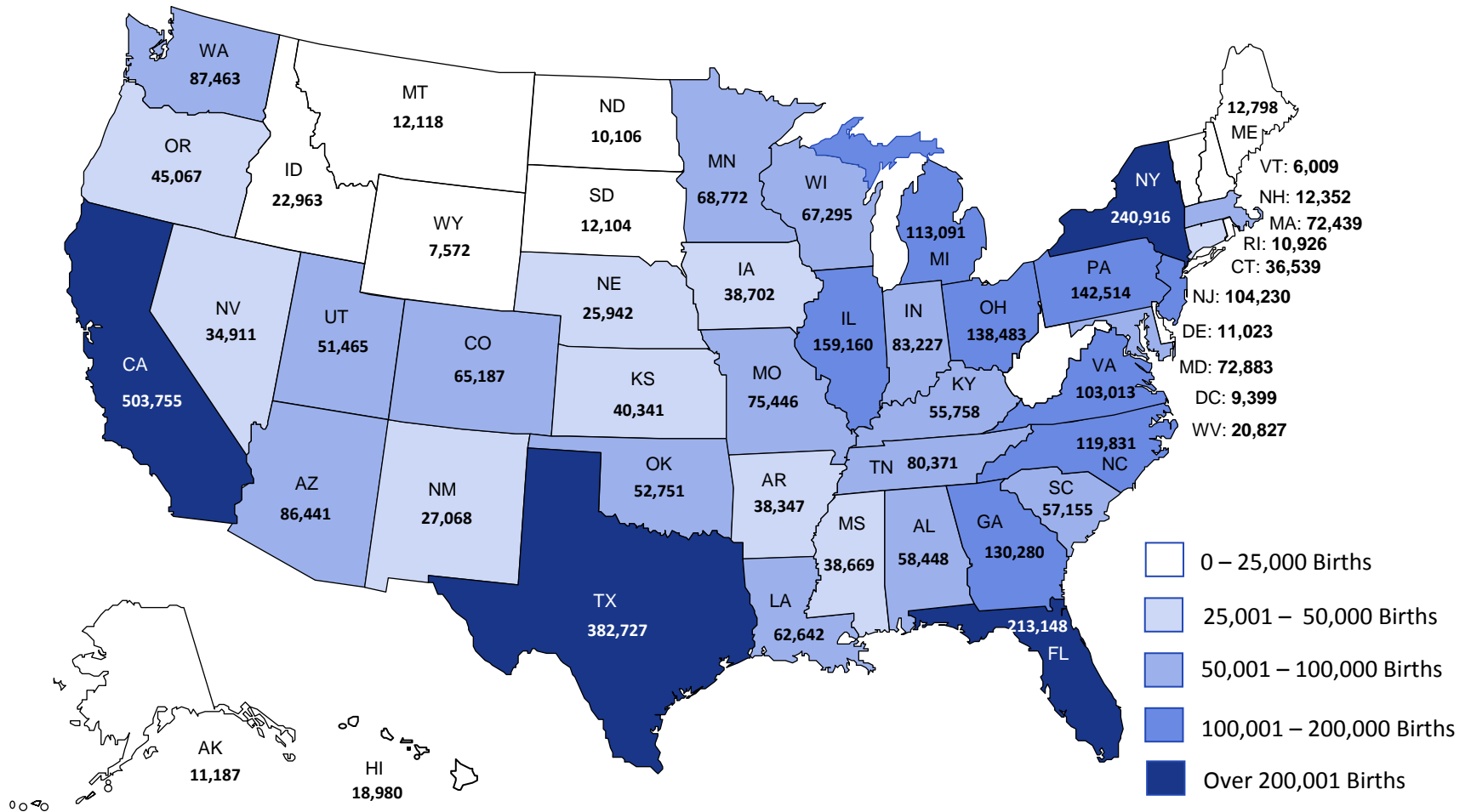
# The Prevalence of Midwifery



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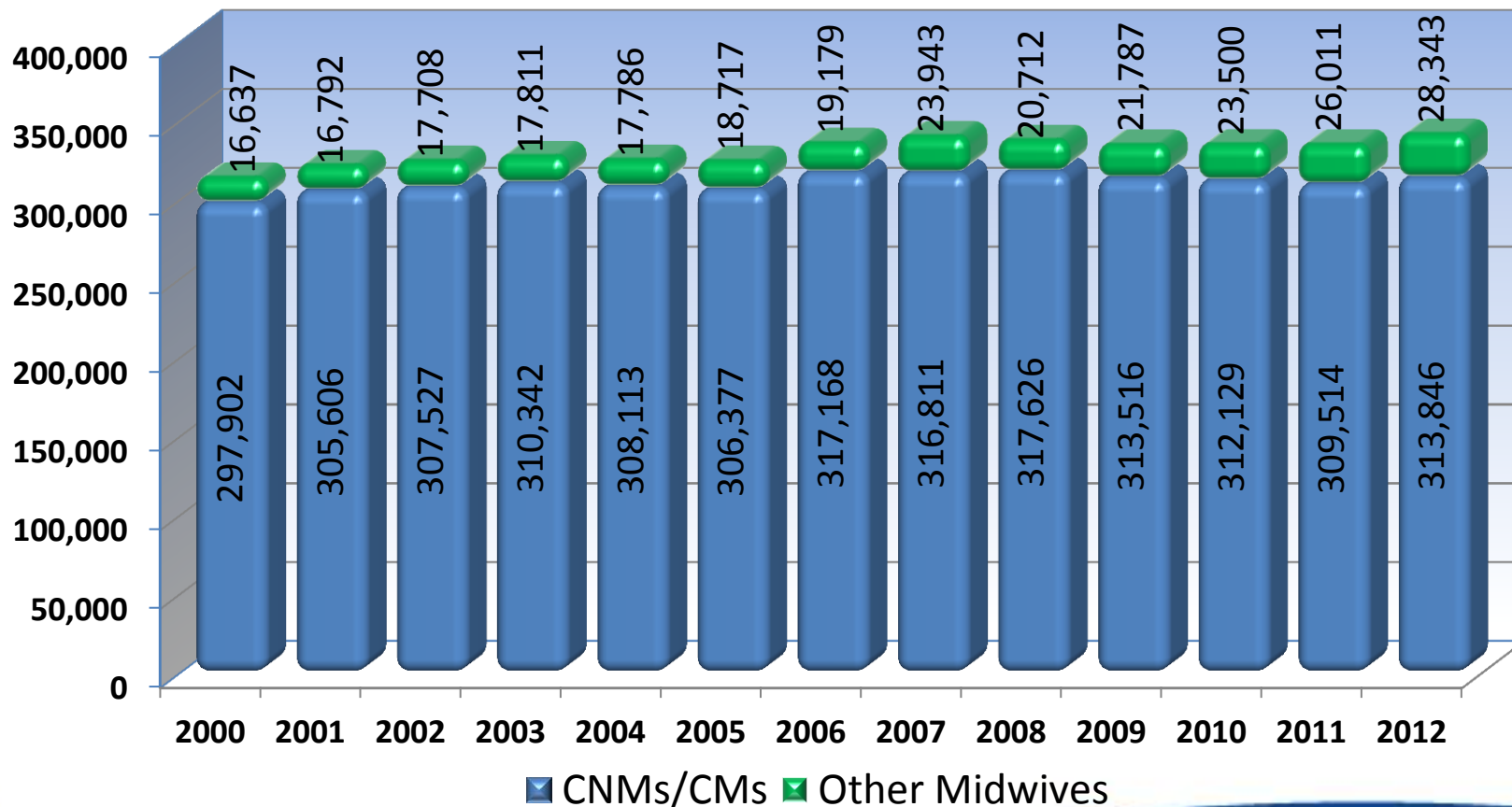
# Number of Births Per State in 2012



Source: Births: Final Data for 2012, National Vital Statistics Report, available at: [http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62\\_09.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62_09.pdf)

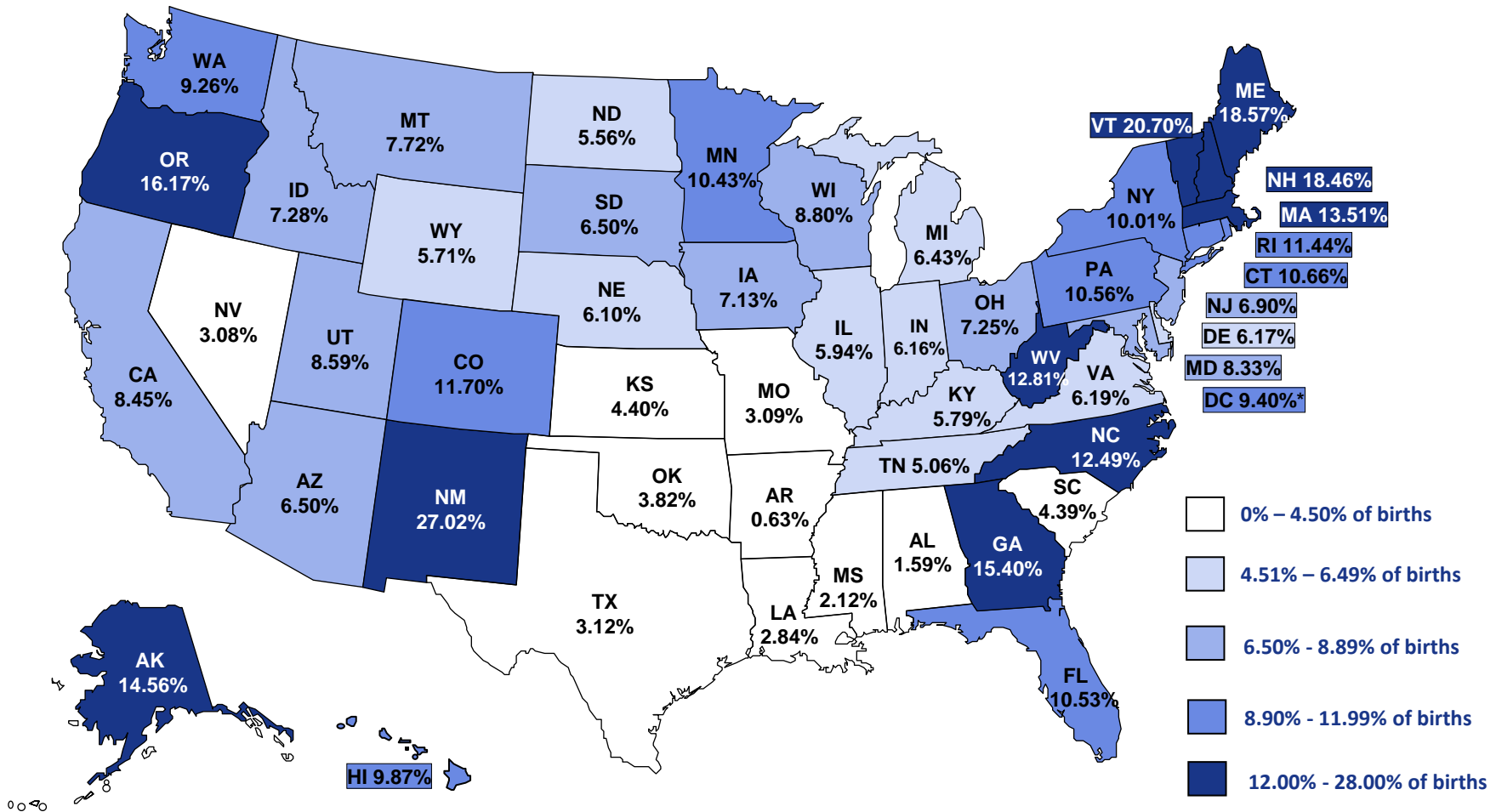


## Births Attended by CNMs/CMs and “Other” Midwives – 2000-2012

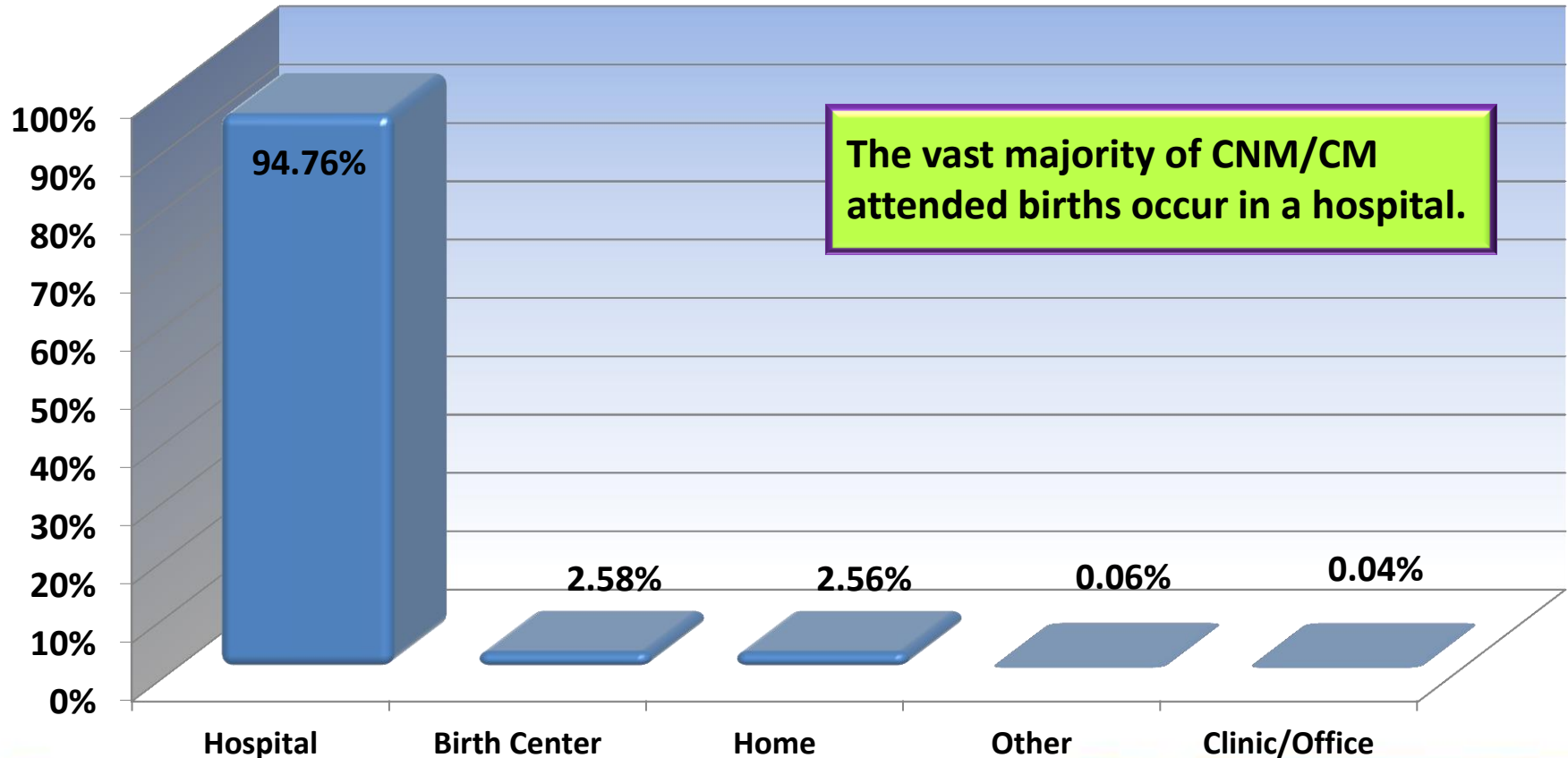


Source: CDC Vital Stats, Births - Available at:  
[http://www.cdc.gov/nchs/data\\_access/vitalstats/vitalstats\\_births.htm](http://www.cdc.gov/nchs/data_access/vitalstats/vitalstats_births.htm), also  
National Vital Statistics Reports, vol. 62, no. 9, Births: Final Data for 2012,  
December 30, 2013. Available at:  
[http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62\\_09.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62_09.pdf)

# Percent of Births Attended by CNMs/CMs - 2012



## CNM/CM Attended Births by Location - 2012



Source: CDC Vital Stats, Births - Available at:

[http://www.cdc.gov/nchs/data\\_access/vitalstats/vitalstats\\_births.htm](http://www.cdc.gov/nchs/data_access/vitalstats/vitalstats_births.htm)

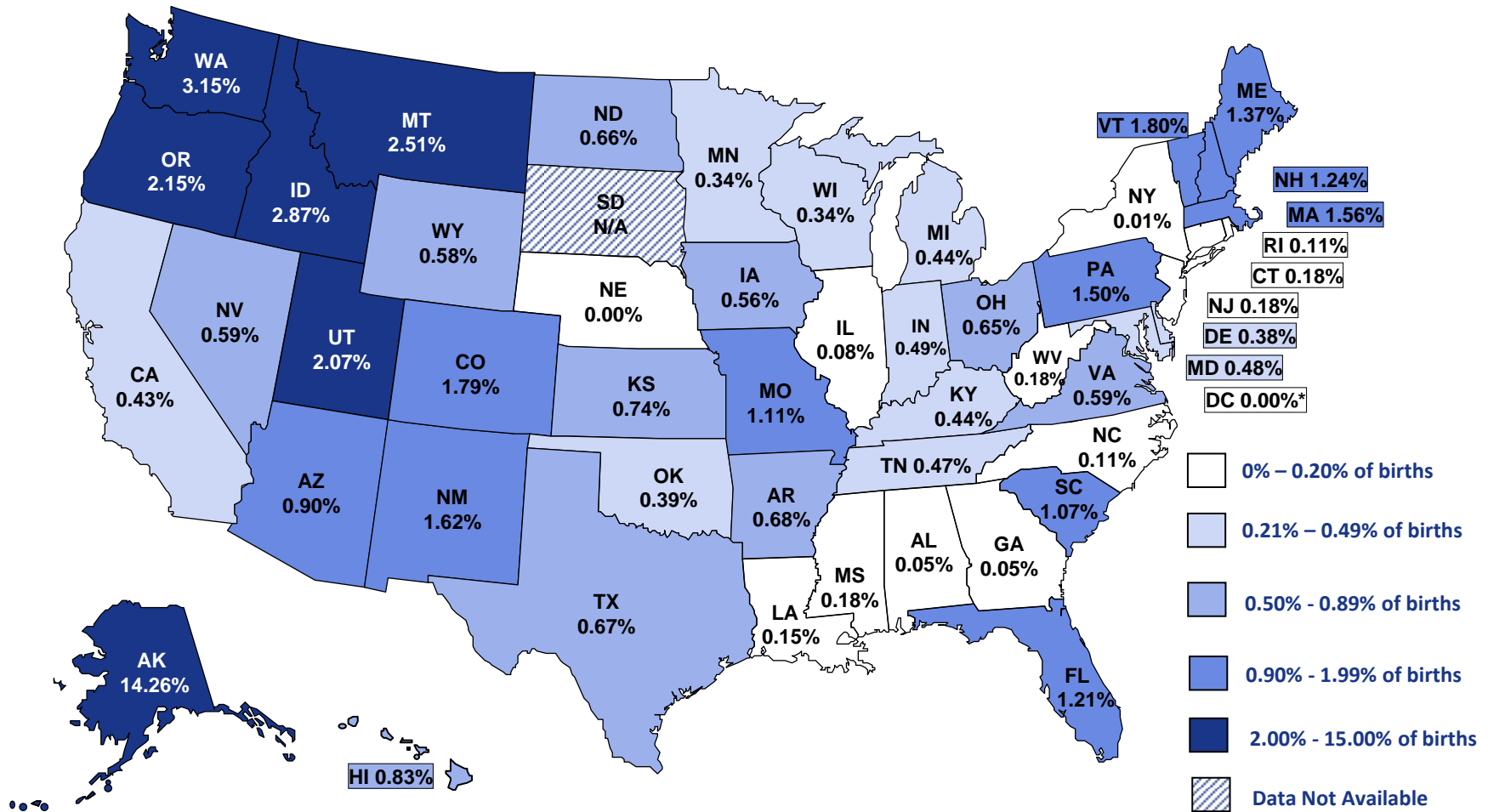
Note these data are from states where this level of specificity is provided on the birth certificate. The data are not available for 551,247 of 3,952,841 births occurring in 2012.



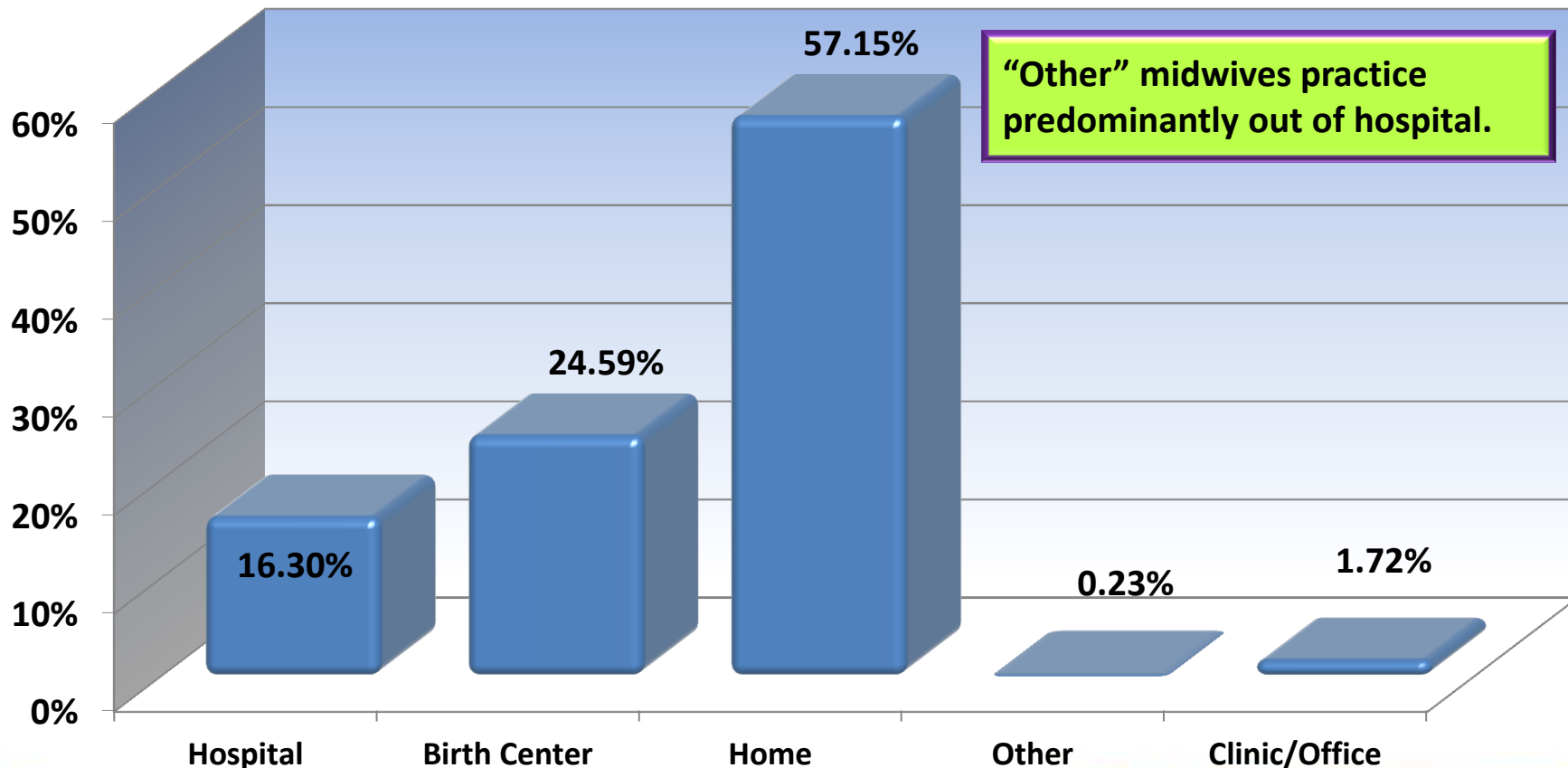
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# Percent of Births Attended by “Other” Midwives - 2012



## “Other” Midwife Attended Births by Location - 2012



Source: CDC Vital Stats, Births - Available at:

[http://www.cdc.gov/nchs/data\\_access/vitalstats/vitalstats\\_births.htm](http://www.cdc.gov/nchs/data_access/vitalstats/vitalstats_births.htm)

Note these data are from states where this level of specificity is provided on the birth certificate. The data are not available for 551,247 of 3,952,841 births occurring in 2012.

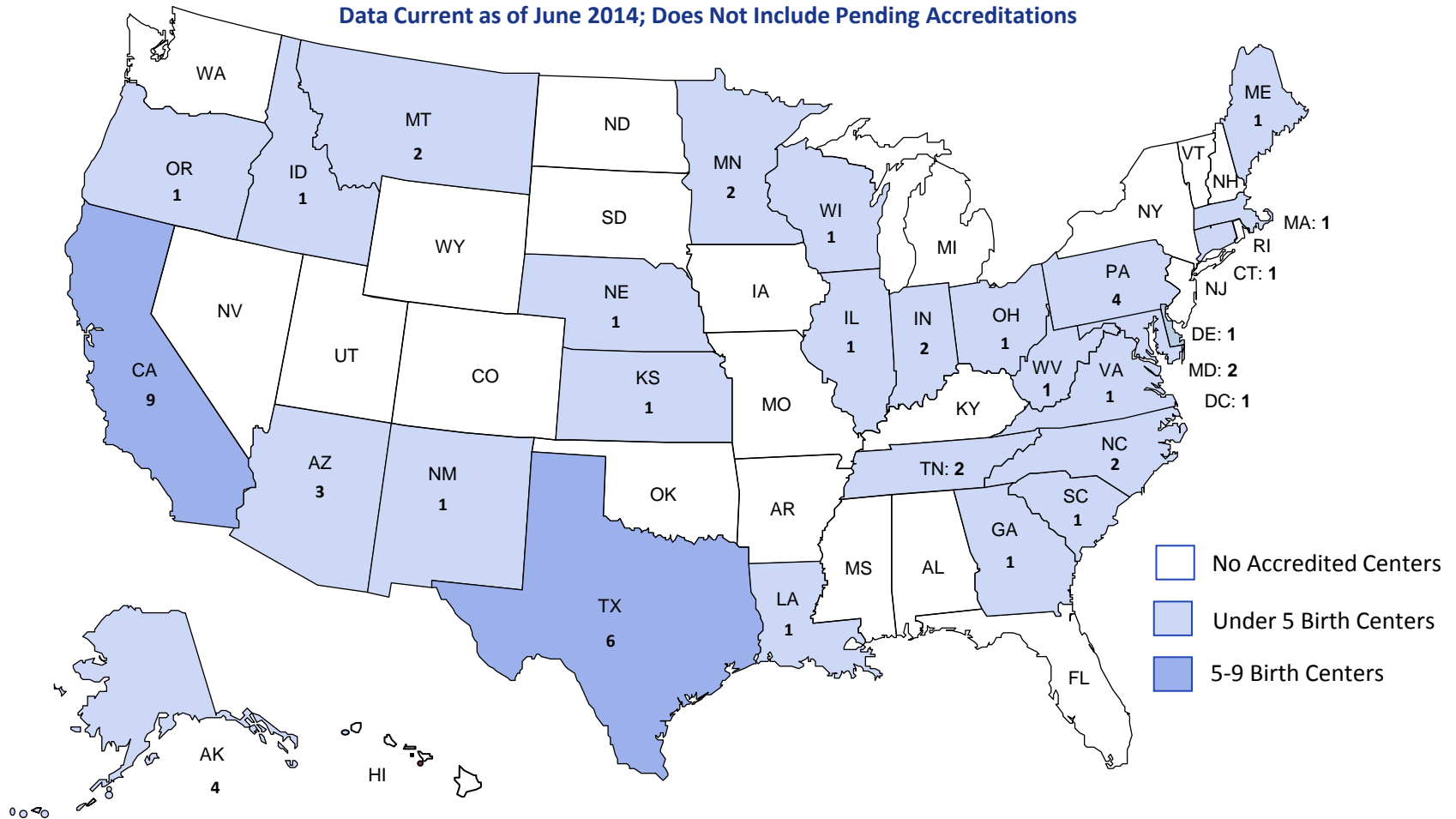


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# Number of Accredited Birth Centers Per State

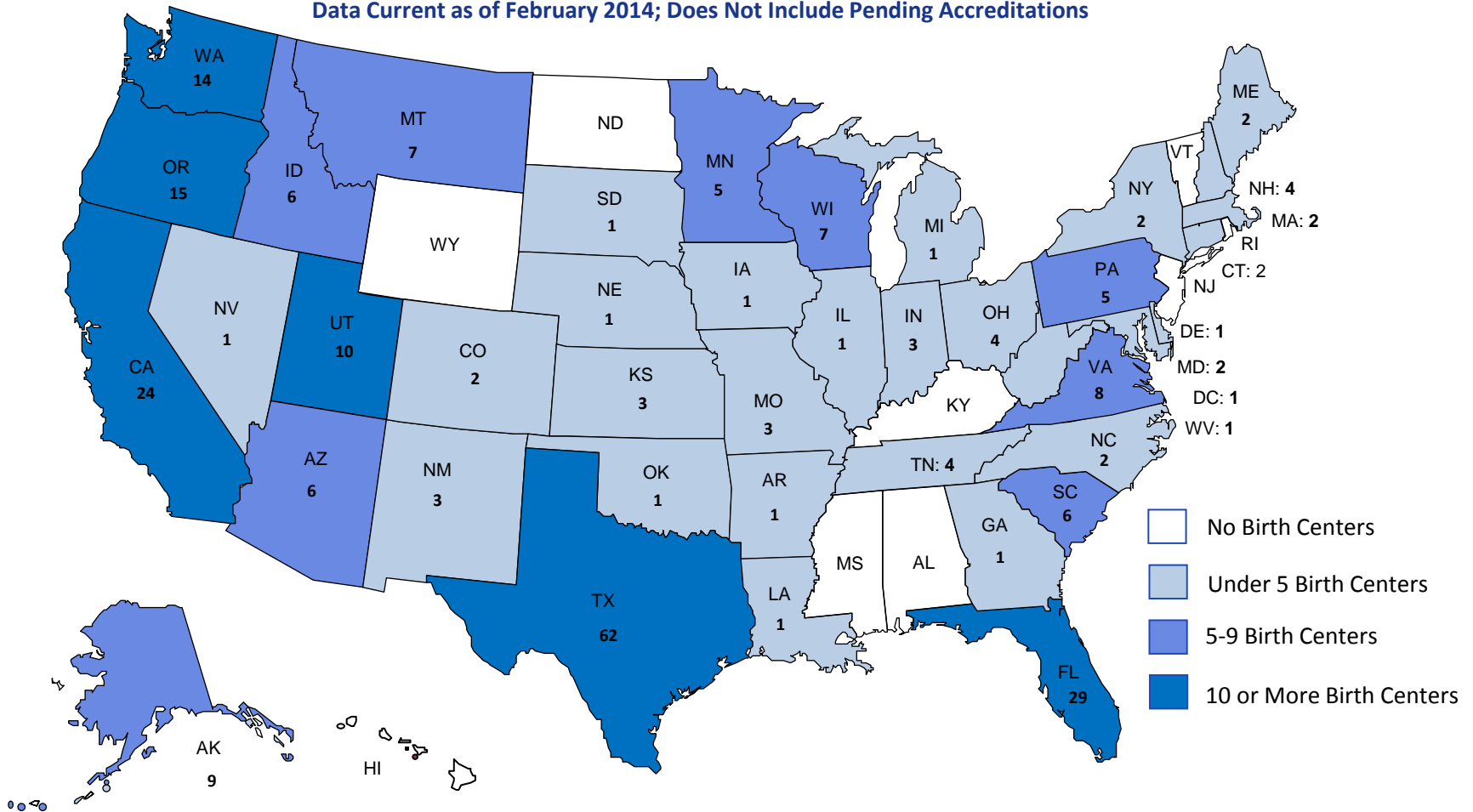
Accreditation by Commission for the Accreditation of Birth Centers (CABC)  
Data Current as of June 2014; Does Not Include Pending Accreditations



# Total Number of Birth Centers per State (Accredited and Non-Accredited)

Accreditation by Commission for the Accreditation of Birth Centers (CABC)

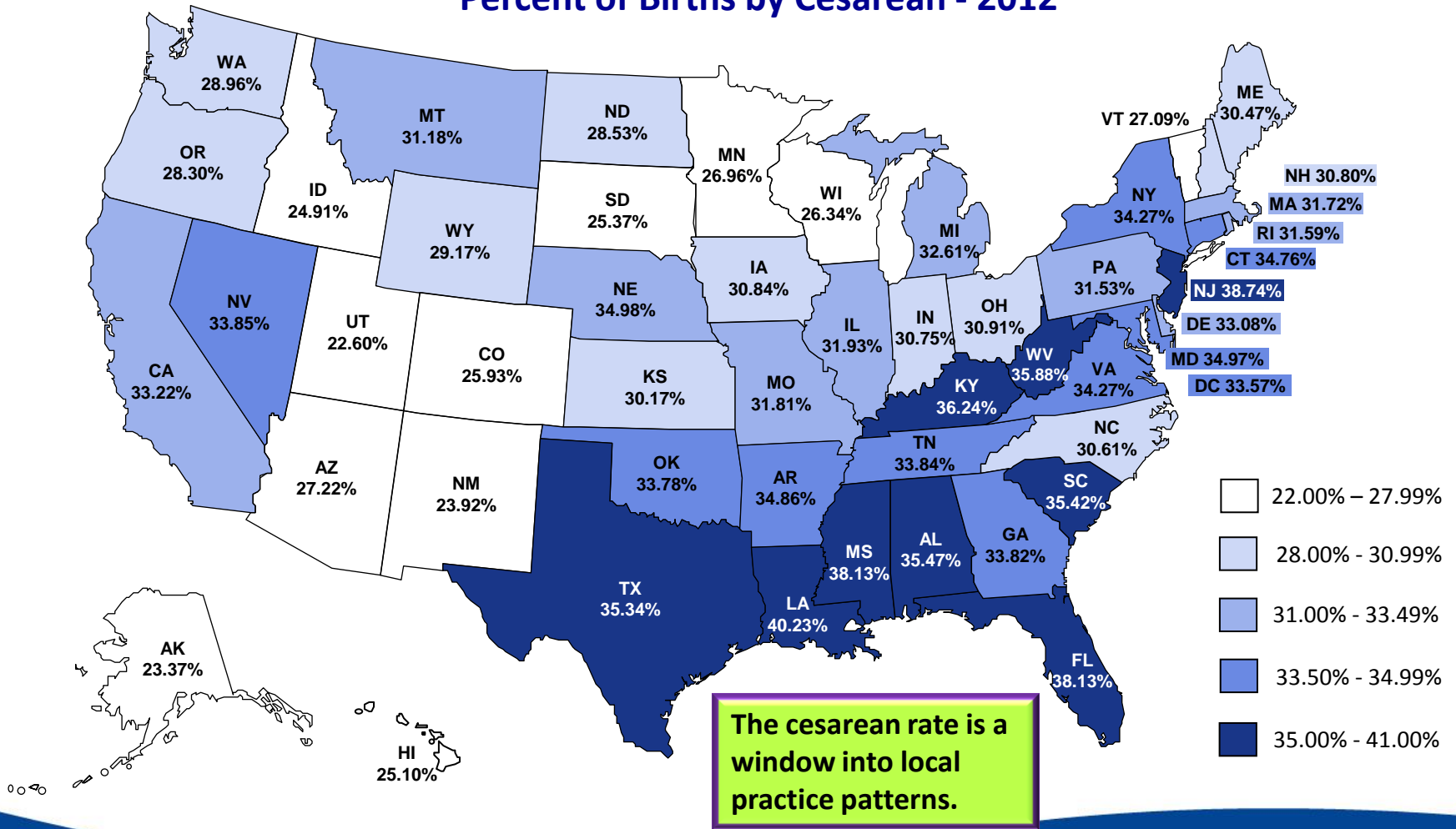
Data Current as of February 2014; Does Not Include Pending Accreditations





# Rates of Cesarean Delivery Vary Dramatically Across the U.S.

## Percent of Births by Cesarean - 2012





# Laws and Regulations Affecting Midwifery

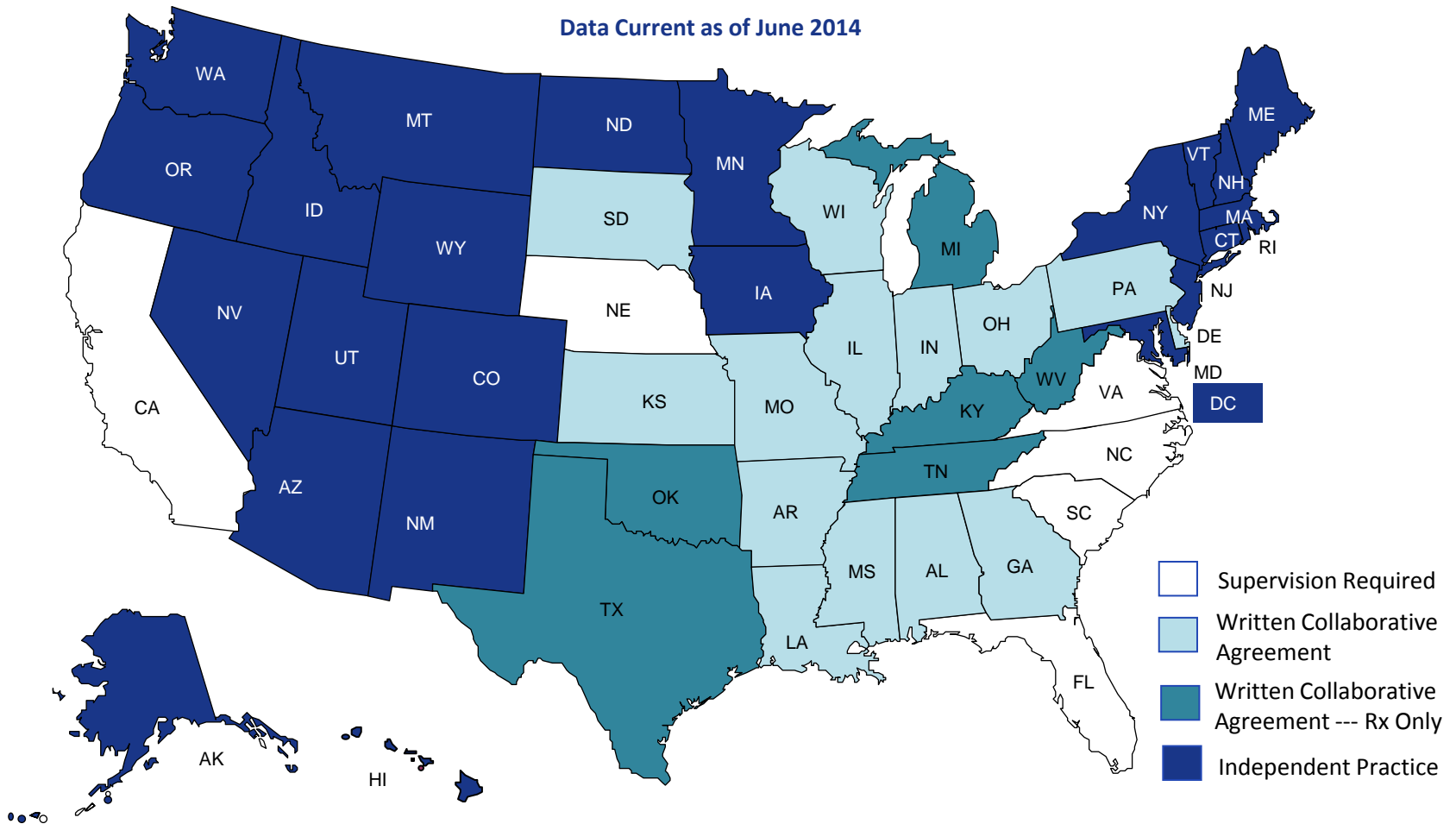


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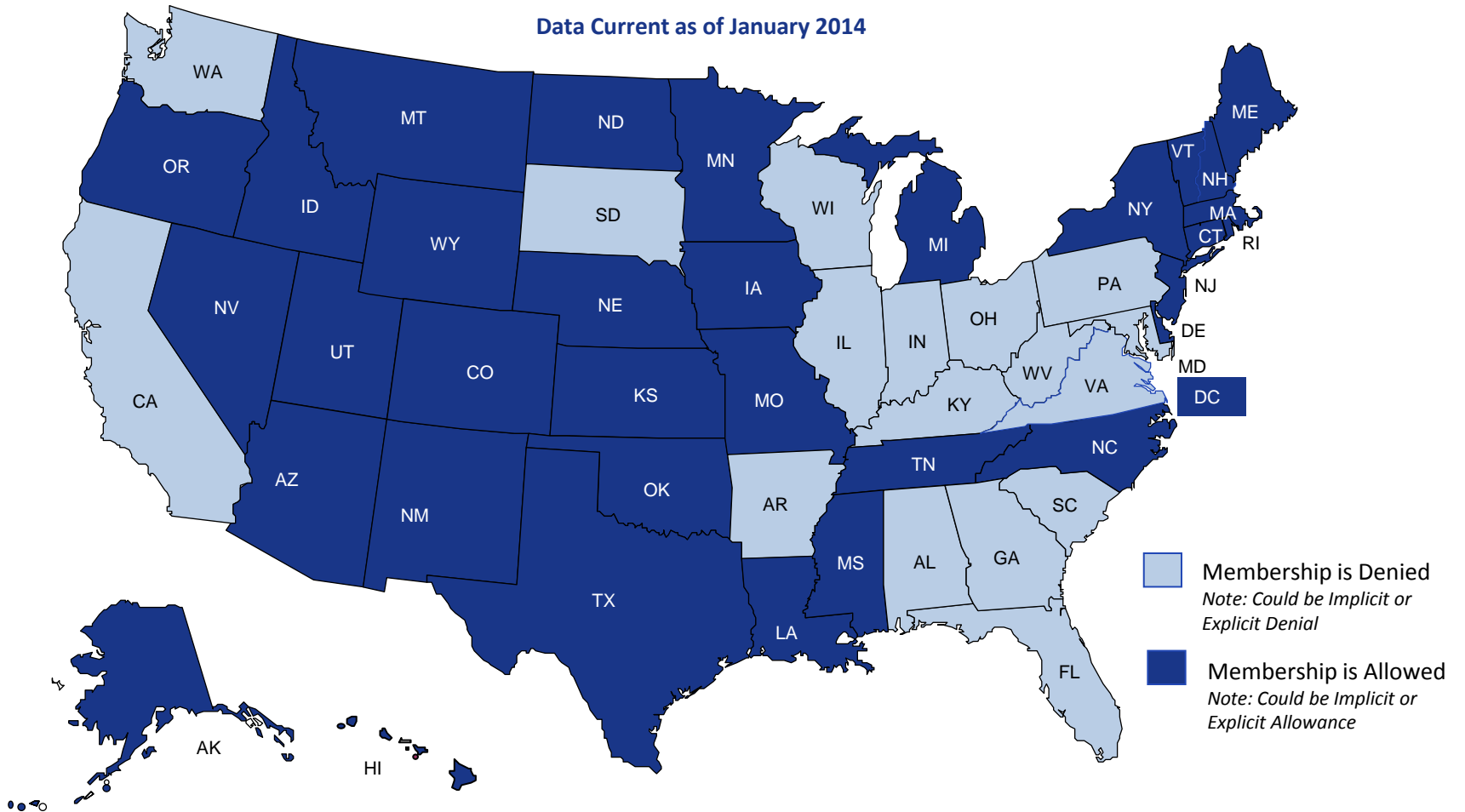
# Regulatory Structure for Certified Nurse-Midwives and Certified Midwives

Data Current as of June 2014



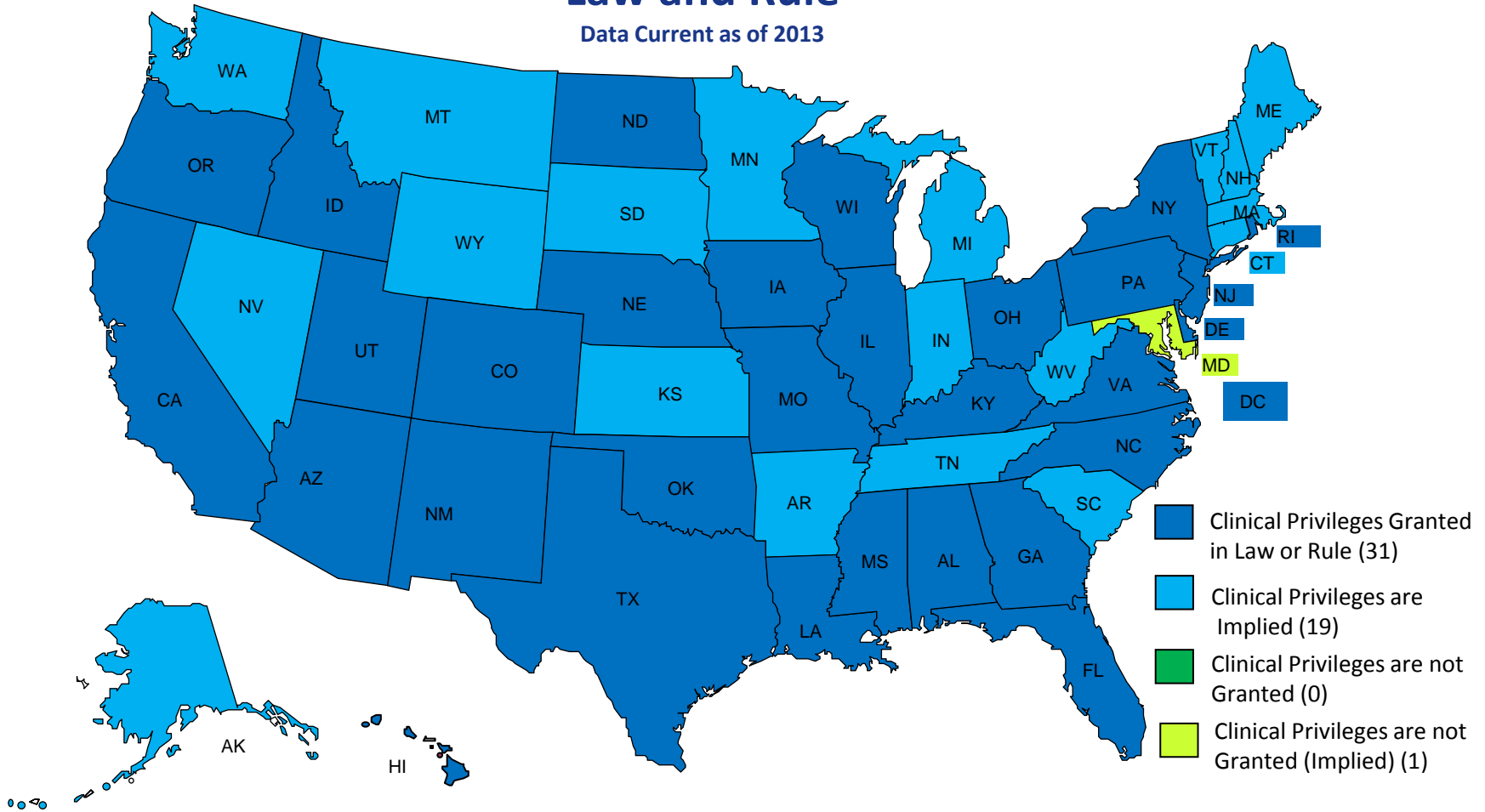
# Medical Staff Provisions for Certified Nurse-Midwives in Law and Rule

Data Current as of January 2014



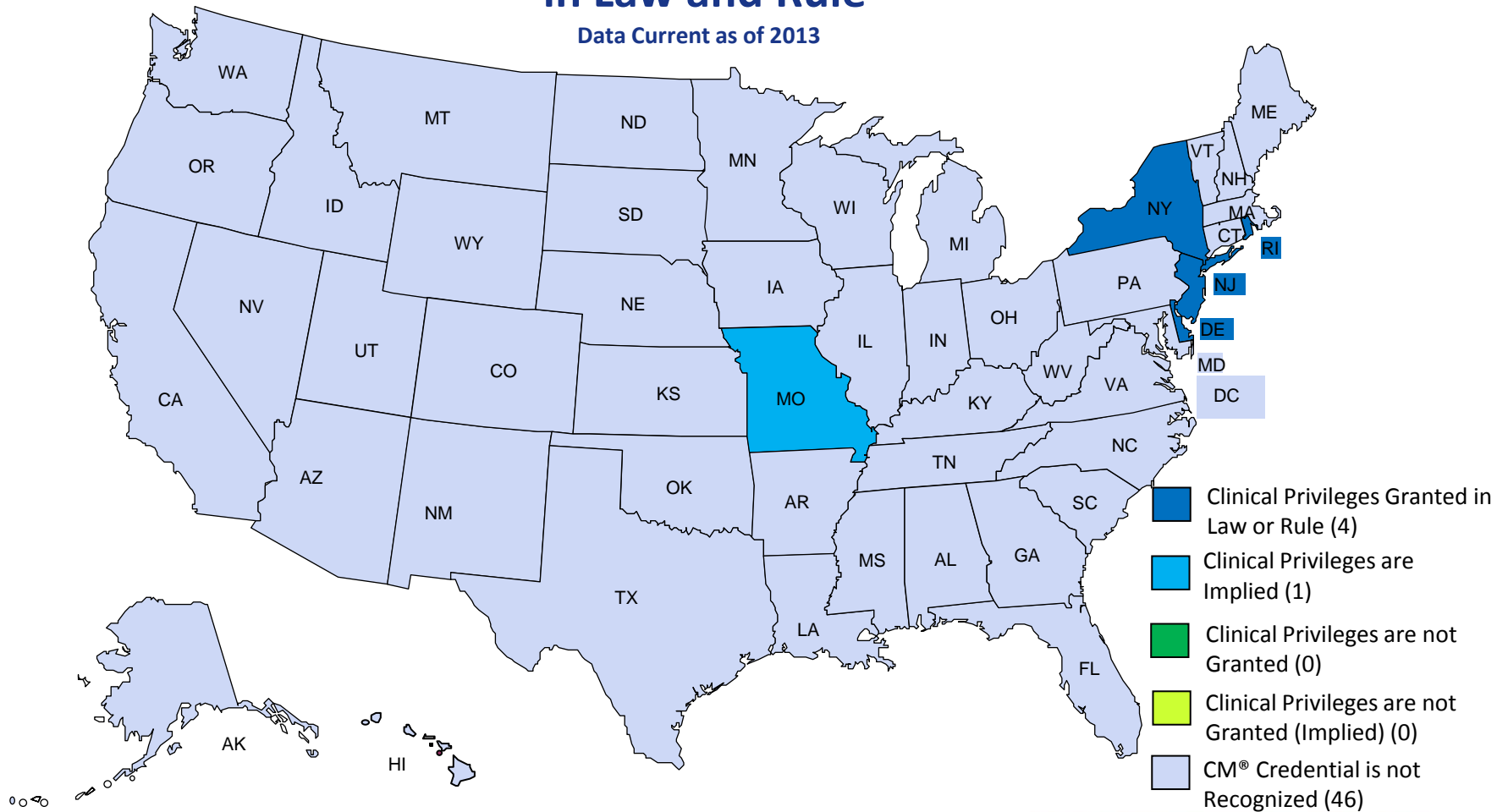
# Clinical Privileging Provisions for Certified Nurse-Midwives (CNM®) in Law and Rule

Data Current as of 2013

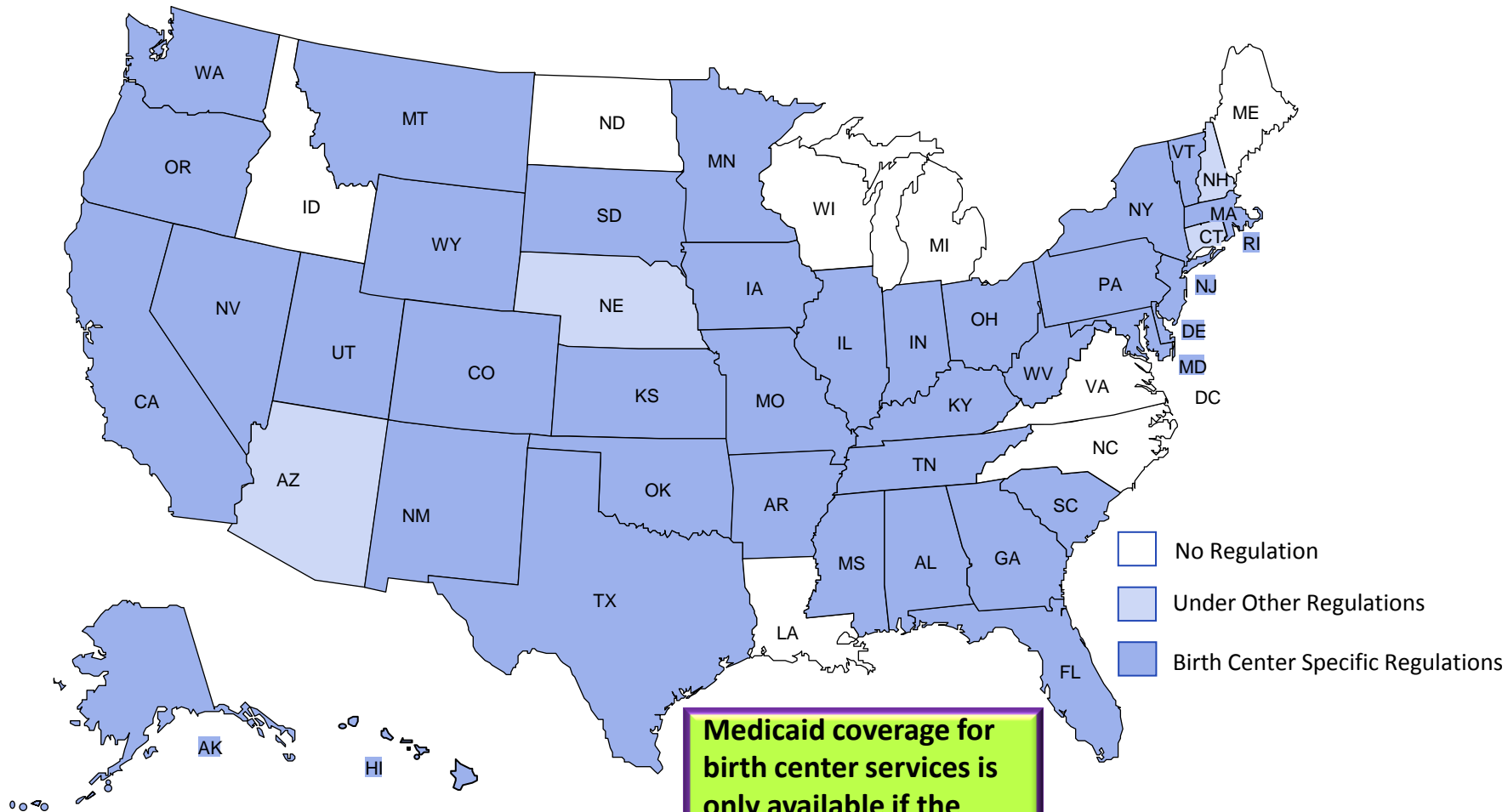


# Clinical Privileging Provisions for Certified Midwives (CM®) in Law and Rule

Data Current as of 2013



# Which States License/Regulate Birth Centers



**Medicaid coverage for birth center services is only available if the state regulates or licenses them.**

Source: American Association of Birth Centers. They note that these data are somewhat out of date. See: <http://www.birthcenters.org/open-a-birth-center/birth-center-regulations>

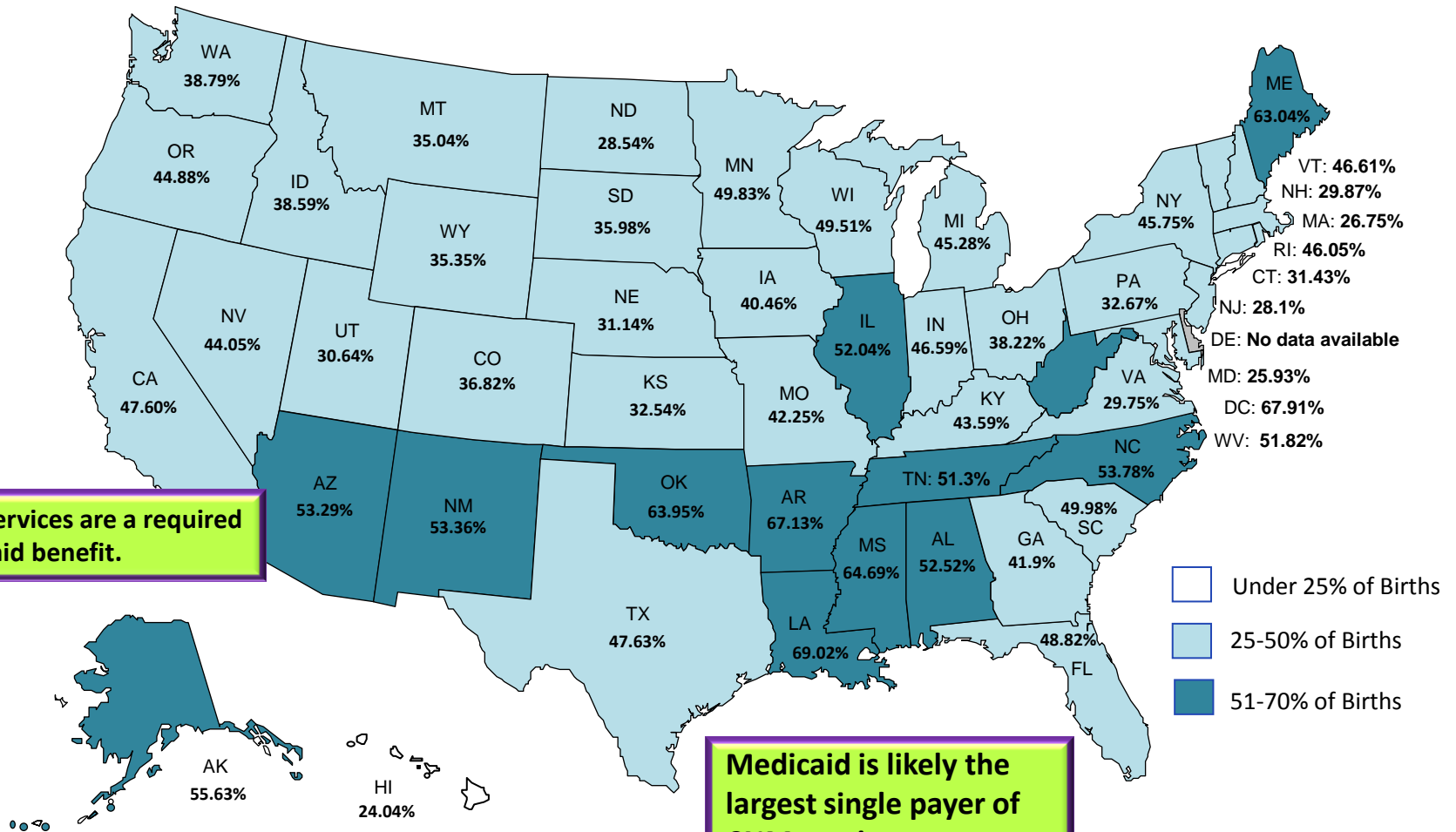
# Medicaid: Your Most Important Payer



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# Percentage of Births Covered by Medicaid - 2010



**CNM services are a required Medicaid benefit.**

**Medicaid is likely the largest single payer of CNM services.**

- Under 25% of Births
- 25-50% of Births
- 51-70% of Births

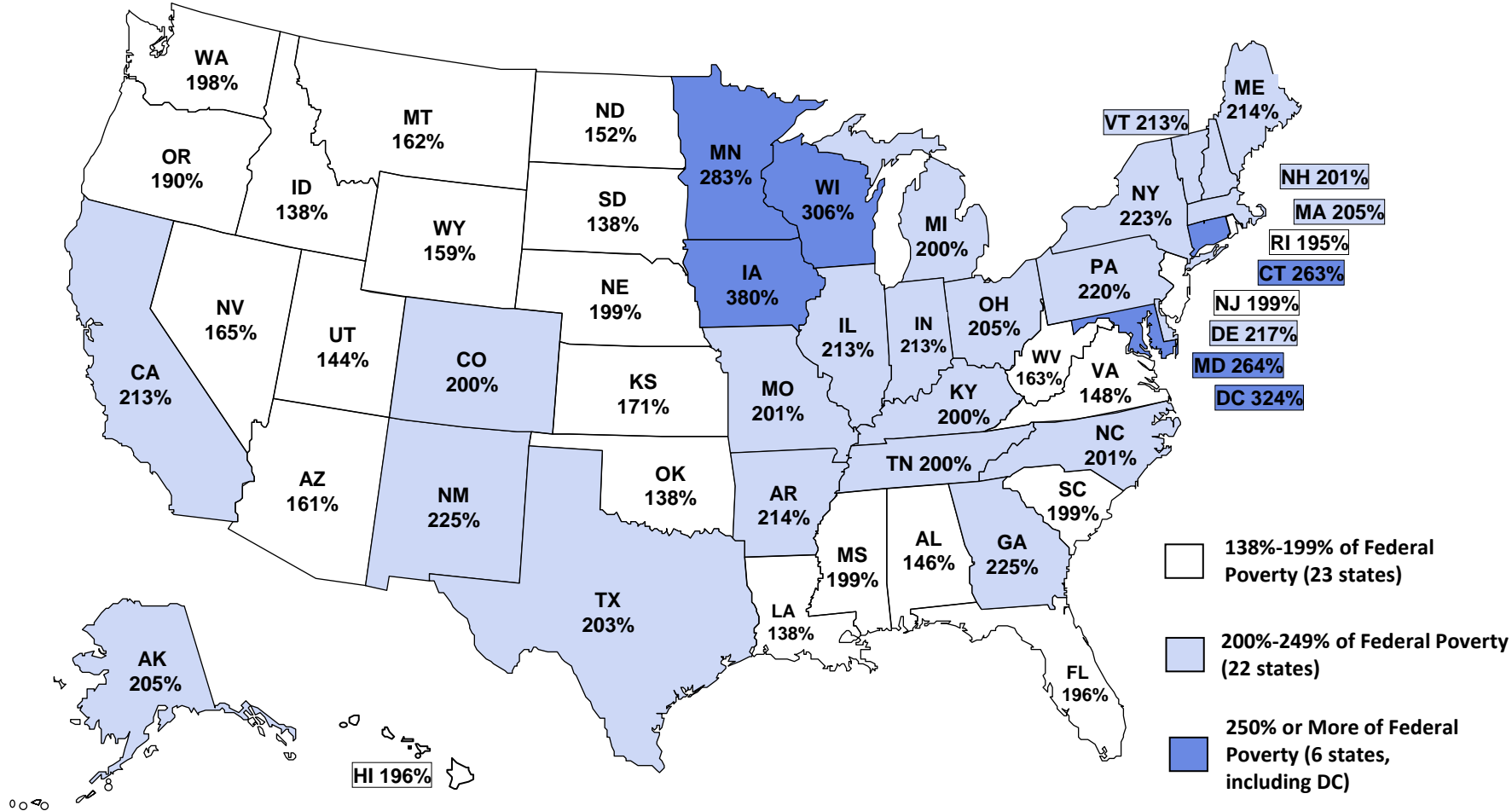
Source: Markus, et. al., "Medicaid Covered Births, 2008 to 2010, in the Context of the Implementation of Health Reform," *Women's Health Issues*, vol. 23, issue 5, e273-e280. Available at: <http://www.whijournal.com/article/PIIS1049386713000558/fulltext#tb11> These figures represent 2010 births.

\* Note that Delaware data for 2010 were not available, so map represents 2009 data.

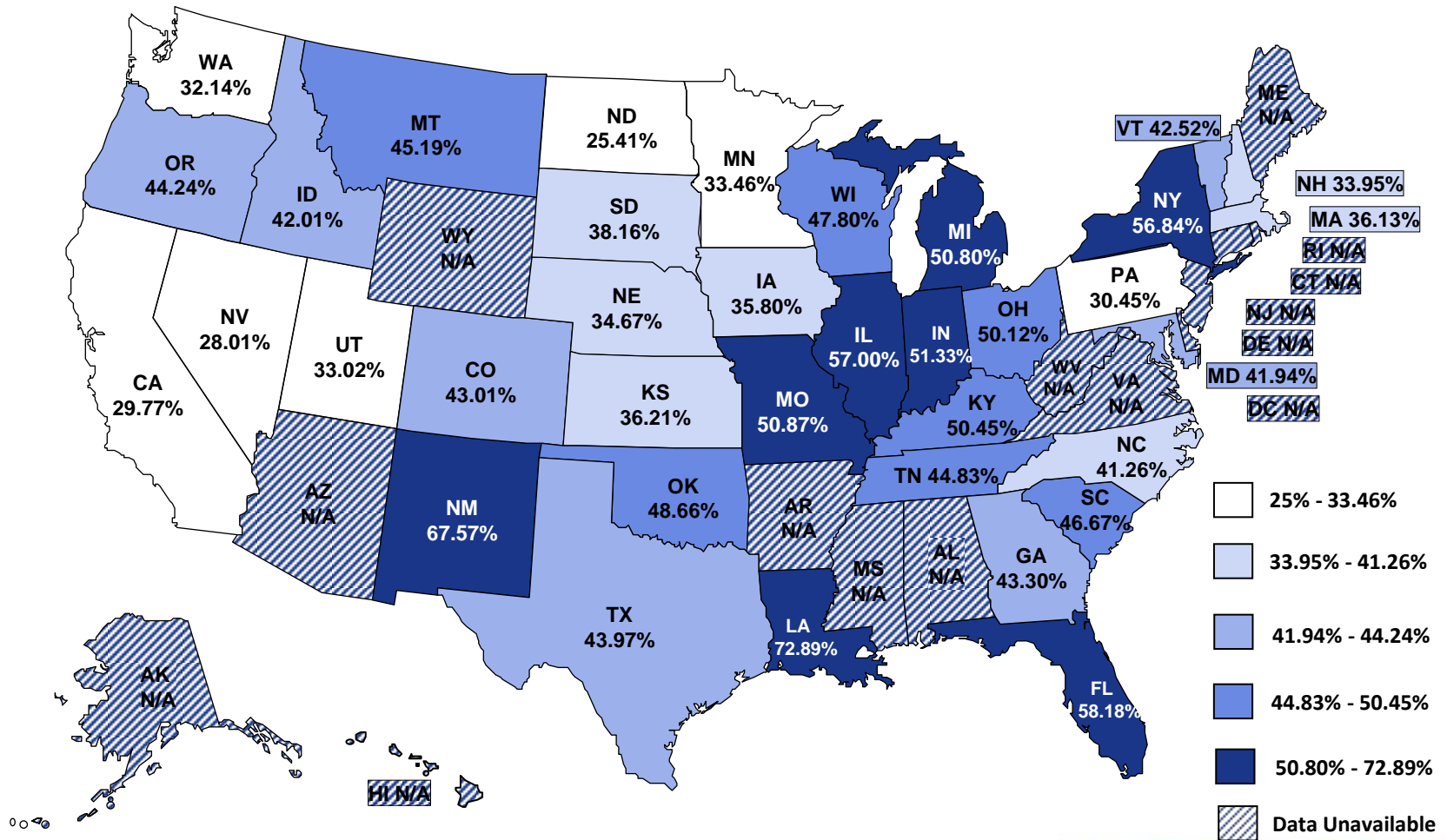


# Income Eligibility Levels for Pregnant Women to Obtain Medicaid Coverage

As a Percent of the Federal Poverty Level, Data Current as of April 1, 2014

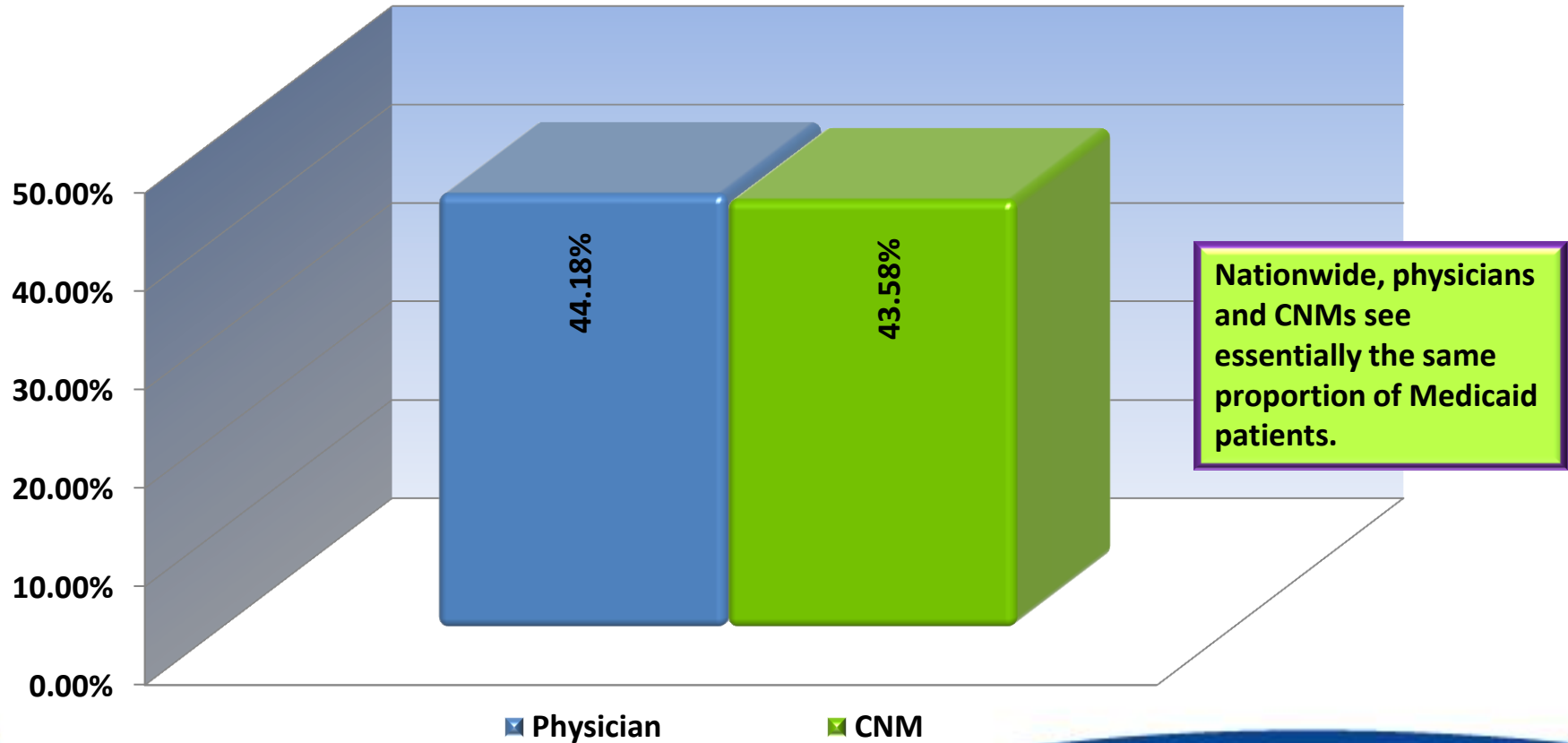


# Percent of Births Attended by CNMs Covered by Medicaid - 2012



Source: CDC Vital Stats – Births - [http://www.cdc.gov/nchs/data\\_access/vitalstats/VitalStats\\_Births.htm](http://www.cdc.gov/nchs/data_access/vitalstats/VitalStats_Births.htm)  
 Note, data is available for physicians for 38 states and for CNMs/CMs for 36 states. Results reflect only situations where payer was reported on the birth certificate.

## Percent of Births Covered by Medicaid by Provider Type - 2012



Source: CDC Vital Stats – Births - [http://www.cdc.gov/nchs/data\\_access/vitalstats/VitalStats\\_Births.htm](http://www.cdc.gov/nchs/data_access/vitalstats/VitalStats_Births.htm) Note, data is available for physicians for 38 states and for CNMs/CMs for 36 states. Results reflect only situations where payer was reported on the birth certificate.



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# Medicaid Attended Births, by Provider Type – 2012

## States where CNMs do More

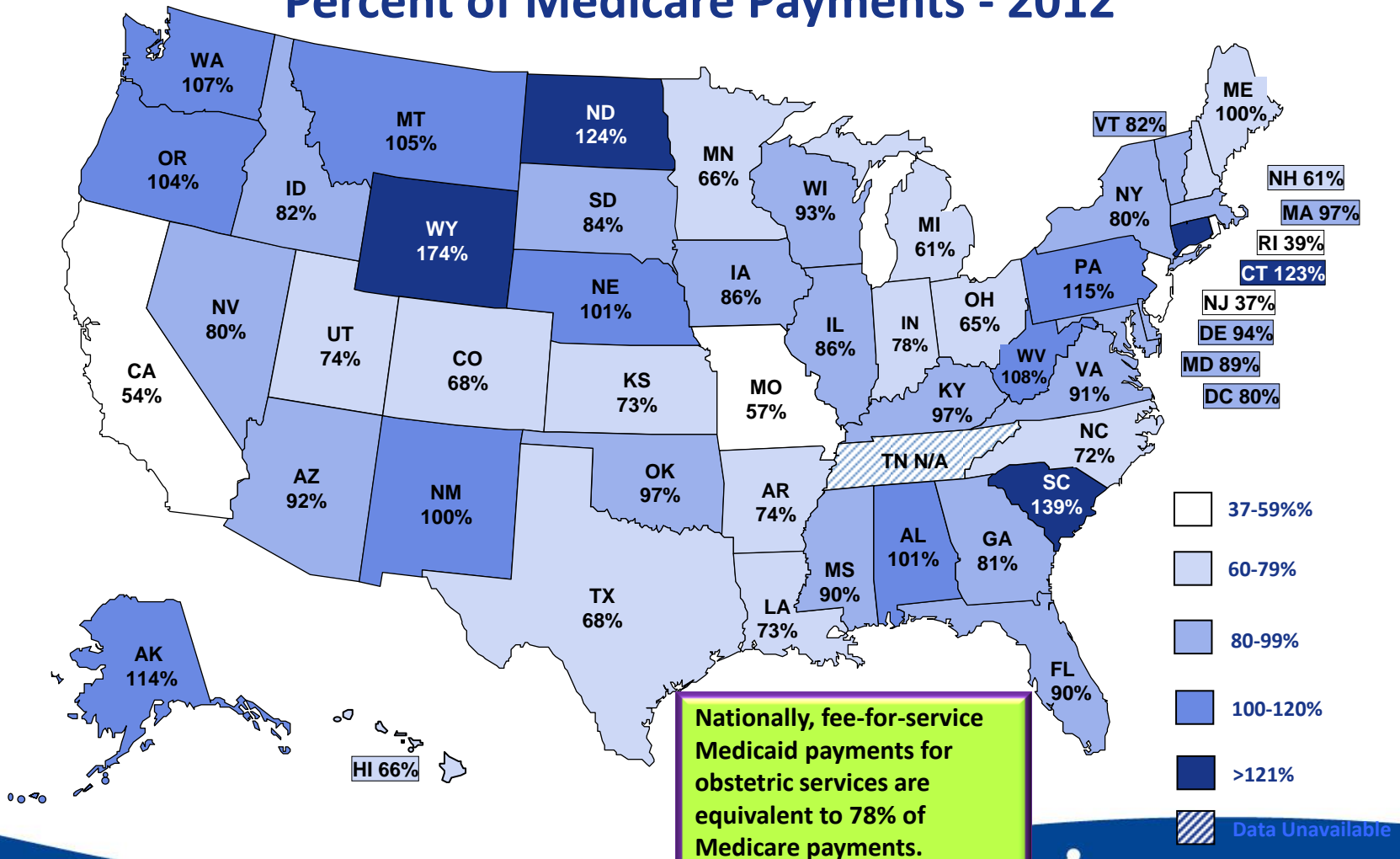
## States where Physicians do More

State	Percent CNM	Percent Physician	State	Percent CNM	Percent Physician
Colorado	43.01%	34.23%	California	29.77%	48.31%
Florida	58.18%	50.57%	Georgia	43.30%	48.42%
Idaho	42.01%	40.31%	Iowa	35.80%	39.33%
Illinois	57.00%	47.72%	Nevada	28.01%	39.17%
Indiana	51.33%	45.06%	North Carolina	41.26%	46.01%
Kansas	36.21%	33.25%	North Dakota	25.41%	28.09%
Kentucky	50.45%	43.25%	Oklahoma	48.66%	56.41%
Louisiana	72.89%	65.71%	Oregon	44.24%	45.56%
Maryland	41.94%	31.28%	Pennsylvania	30.45%	34.32%
Massachusetts	36.13%	28.55%	South Carolina	46.67%	52.45%
Michigan	50.80%	43.48%	Tennessee	44.83%	53.85%
Minnesota	33.46%	20.52%	Texas	43.97%	46.70%
Missouri	50.87%	44.24%	Vermont	42.52%	48.13%
Montana	45.19%	35.17%	Washington	32.14%	39.87%
Nebraska	34.67%	31.38%			
New Hampshire	33.95%	30.00%			
New Mexico	67.57%	55.53%			
New York	56.84%	44.60%			
Ohio	50.12%	39.62%			
South Dakota	38.16%	33.38%			
Utah	33.02%	28.17%			
Wisconsin	47.80%	38.02%			

Not all states birth certificates report payer type, so not all are listed here.

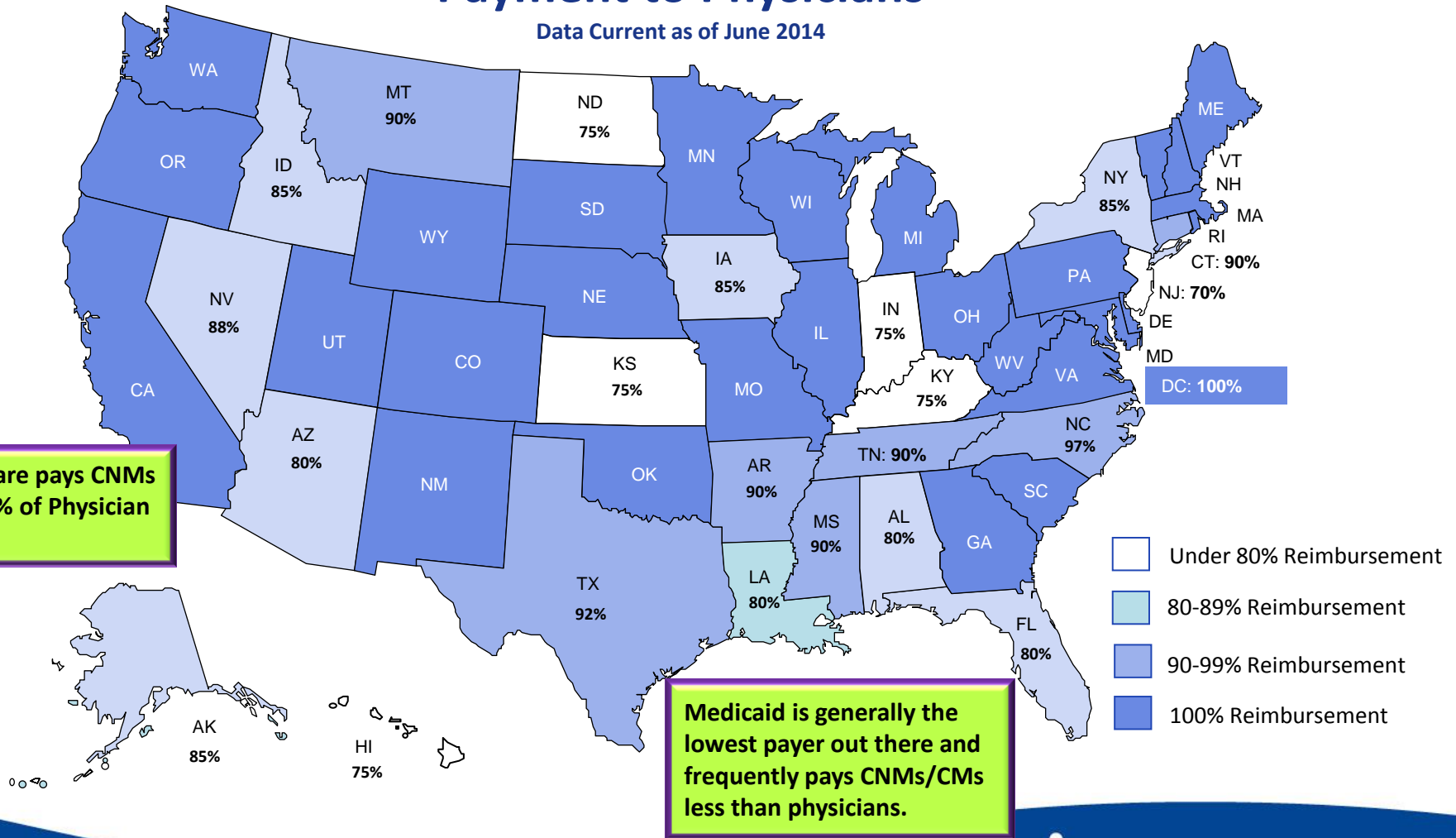
situations where payer was reported on the birth certificate.

# Medicaid Fee-for-Service Payments for Obstetric Services as a Percent of Medicare Payments - 2012



# Medicaid Fee-for-Service Payments to CNMs as a Percent of Payment to Physicians

Data Current as of June 2014



**Medicare pays CNMs at 100% of Physician rates.**

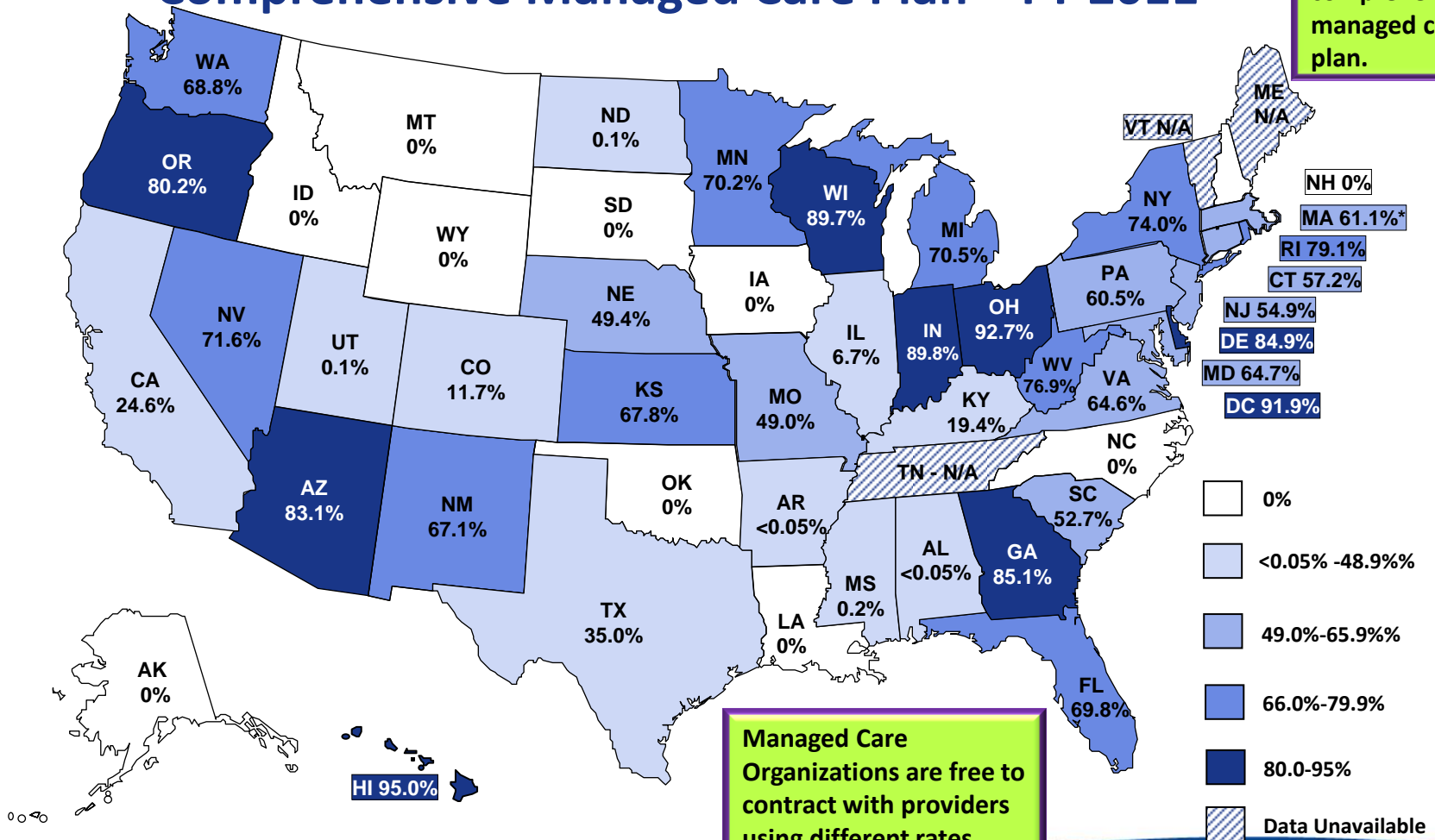
**Medicaid is generally the lowest payer out there and frequently pays CNMs/CMs less than physicians.**

Source: ACNM analysis of state law, regulation and payment policy.  
 MN pays 90% in most sites. MA pays 85%, depending on certain criteria.



# Percent of Adults with Medicaid Covered Under a Comprehensive Managed Care Plan – FY 2011

48.0% of adults covered by Medicaid in 2011 were covered under a comprehensive managed care plan.



Managed Care Organizations are free to contract with providers using different rates than fee-for-service.

# Medicare's Physician Fee Schedule: How you Get Paid

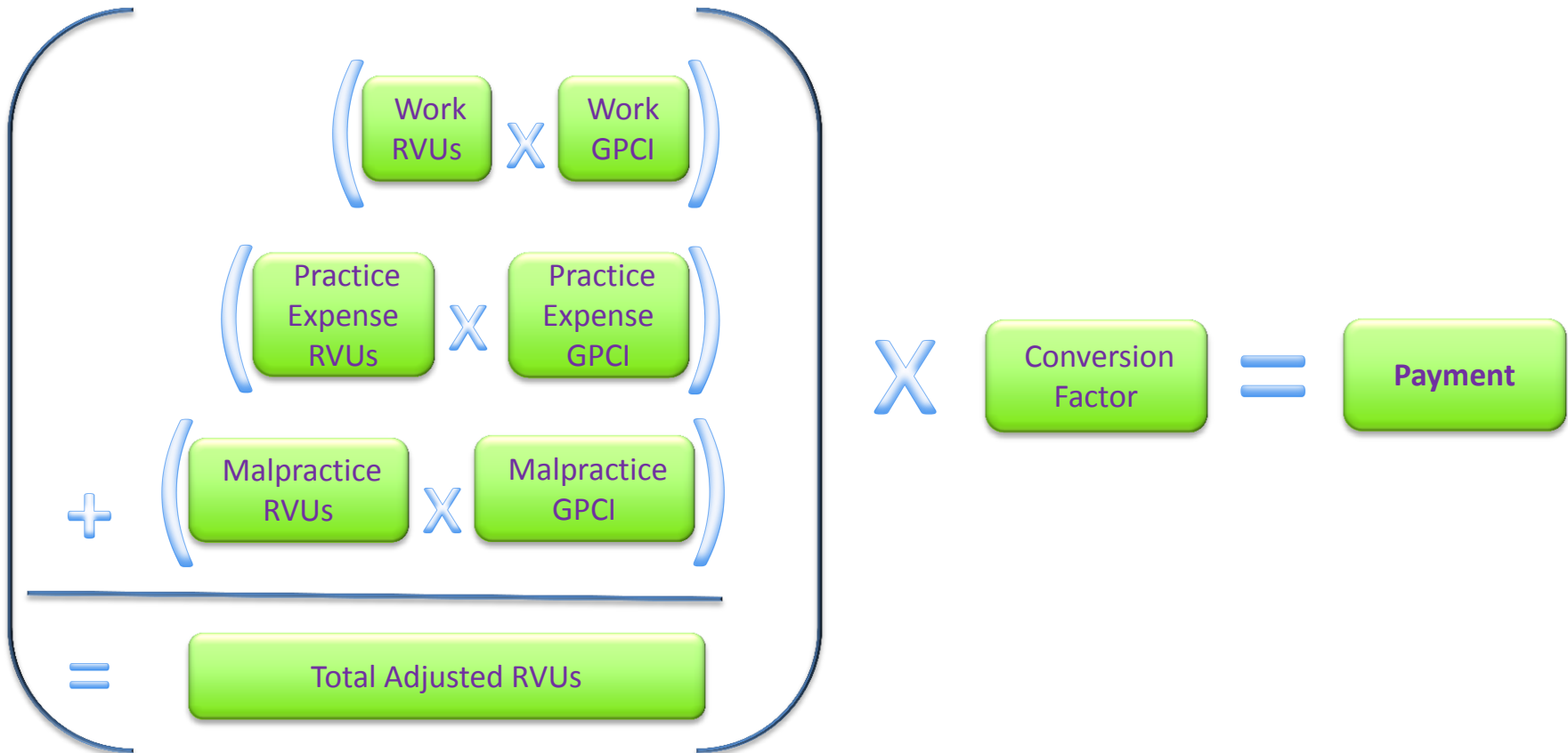


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# Medicare's Physician Fee Schedule – A Brief Overview



For an excellent plain language discussion of the Medicare physician payment methodology, see the [Payment Basics](http://www.medpac.gov/documents/MedPAC_Payment_Basics_13_Physician.pdf) document by MedPAC, available at:

[http://www.medpac.gov/documents/MedPAC\\_Payment\\_Basics\\_13\\_Physician.pdf](http://www.medpac.gov/documents/MedPAC_Payment_Basics_13_Physician.pdf)

Source: <http://www.ananursespace.org/blogsmain/blogviewer/?BlogKey=b9e87d7e-57a1-4c93-b9b9-e48874a2be0c&ssopc=1>



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# Relative Value Units (RVUs)

## Physician Work

- Time
- Effort
- Skill
- Stress

## Practice Expense

- Office Space
- Supplies
- Equipment
- Administrative Staff
- Clinical Staff

## Malpractice

- Malpractice Premiums

**RVUs represent the relative effort and expense involved in a given procedure.**



# Geographic Cost Indices (GPCIs)

GPCIs adjust payments based on regional expense variations.

## Physician Work GPCI

- Relative wage difference for each locality compared to the national average.

## Practice Expense GPCI

- Measures variation in employee wages, purchased services, rent, equipment, supplies and miscellaneous expenses

## Malpractice GPCI

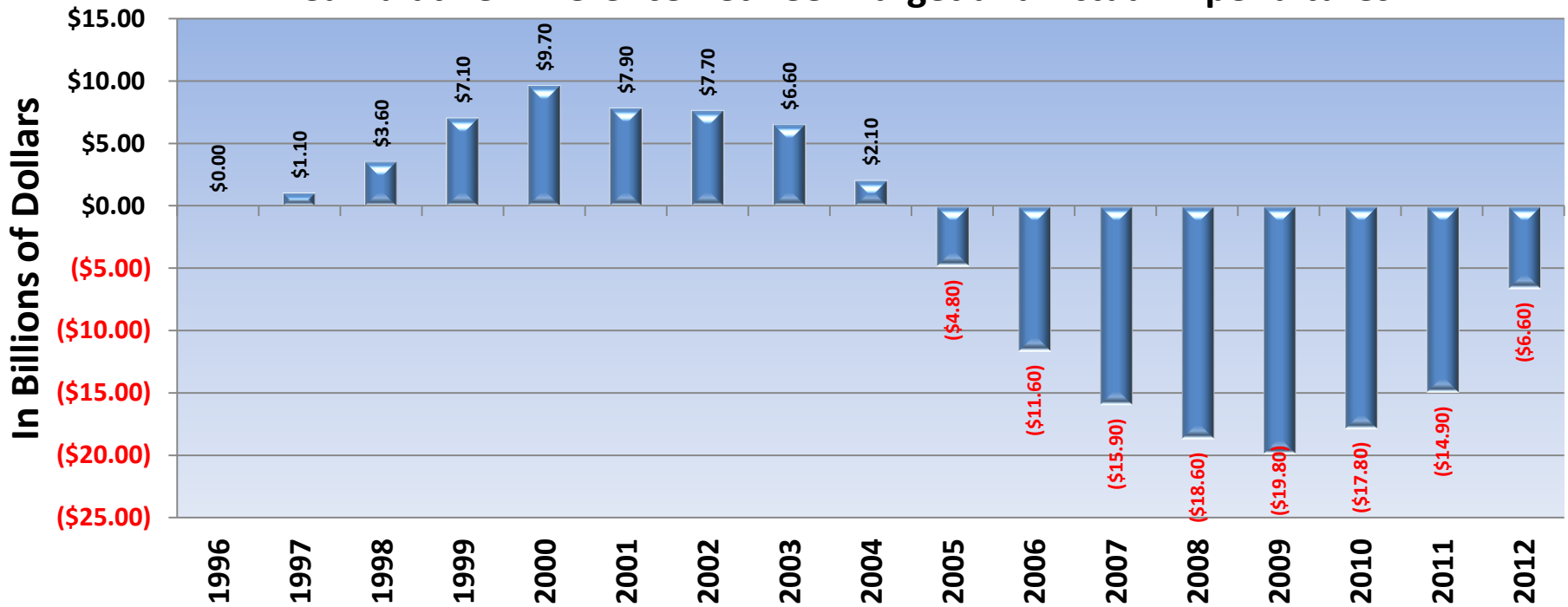
- Measures variation in cost of malpractice Premiums for \$1 million to \$3 million mature claims made policies.

**There are 89 physician fee schedule localities.  
Which localities are your commercial payers using to calculate their rates?**

# The Conversion Factor (CF)

The CF is a dollar figure, updated each year. If actual expenditures exceed an established target, then the CF is lowered the next year to make up for the difference. In 2014, the CF is \$35.8228.

## Cumulative Difference Between Target and Actual Expenditures



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# Additional Modification to Physician Payments

Program	Does it Affect Medicare Payments to CNMs?
Physician Quality Reporting System (PQRS)	Yes (note as well that the PVBP is built on PQRS reporting)
Physician Value Based Payment Program (PVBP)	May apply to payments beginning January 1, 2017
EHR Meaningful Use	No
Health Professionals Shortage Area bonus payment	No
Primary Care Incentive Payment	No
Payment Reduction for Non-Participatory Status	No



# Medicare Physician Payments in the Future

## Accountable Care Organizations (ACOs)

- A single organization that takes responsibility for the quality and cost of care for a specified population.

## Bundled Payment Arrangements

- A single lump sum, non-varying payment for a defined episode of care.

## Value Based Purchasing

- Rewarding high performance relative to specified quality and cost measures.

**All of these approaches are likely to benefit midwifery!**



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# Enrolling with Payers



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# Getting Your Numbers

## National Provider Identifier (NPI)

- Standardized number used on all claims, remittance notices, etc.
- Used by all other providers, payers and claims processing clearinghouses.
- Must obtain an NPI before obtaining a Medicare PTAN.
- <https://nppes.cms.hhs.gov/NPPES/Welcome.do>

## Medicare Provider Transactions Access Number (PTAN)

- Allows you to participate in Medicare and bill for services provided to Medicare beneficiaries.
- Obtained through the Provider Enrollment, Chain and Ownership System (PECOS).
- <https://pecos.cms.hhs.gov/pecos/login.do>





# Documenting and Coding



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# Learning to Document and Code is CRITICAL!



Learn what CPT codes correspond to those services.

Learn to document what you have done.

Learn what services you can provide.

If you are not documenting and coding as completely and accurately as possible, you are likely:

- Losing money
- Unable to prove your value to your group or hospital
- Opening yourself up to allegations of fraud/waste/abuse.



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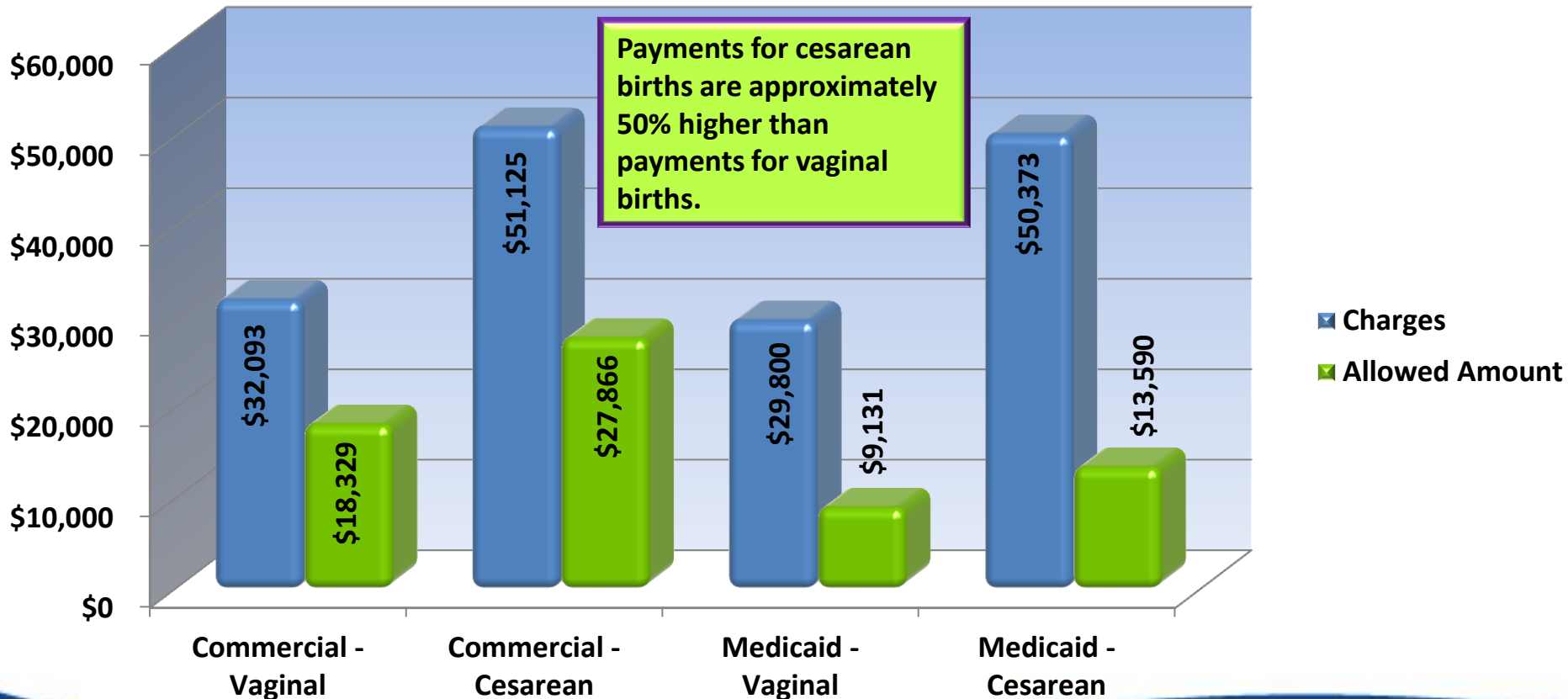
# The Bottom Line: Payment and Salary



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## Average Total Charges and Payments for Maternal and Newborn Care in the U.S. - 2010



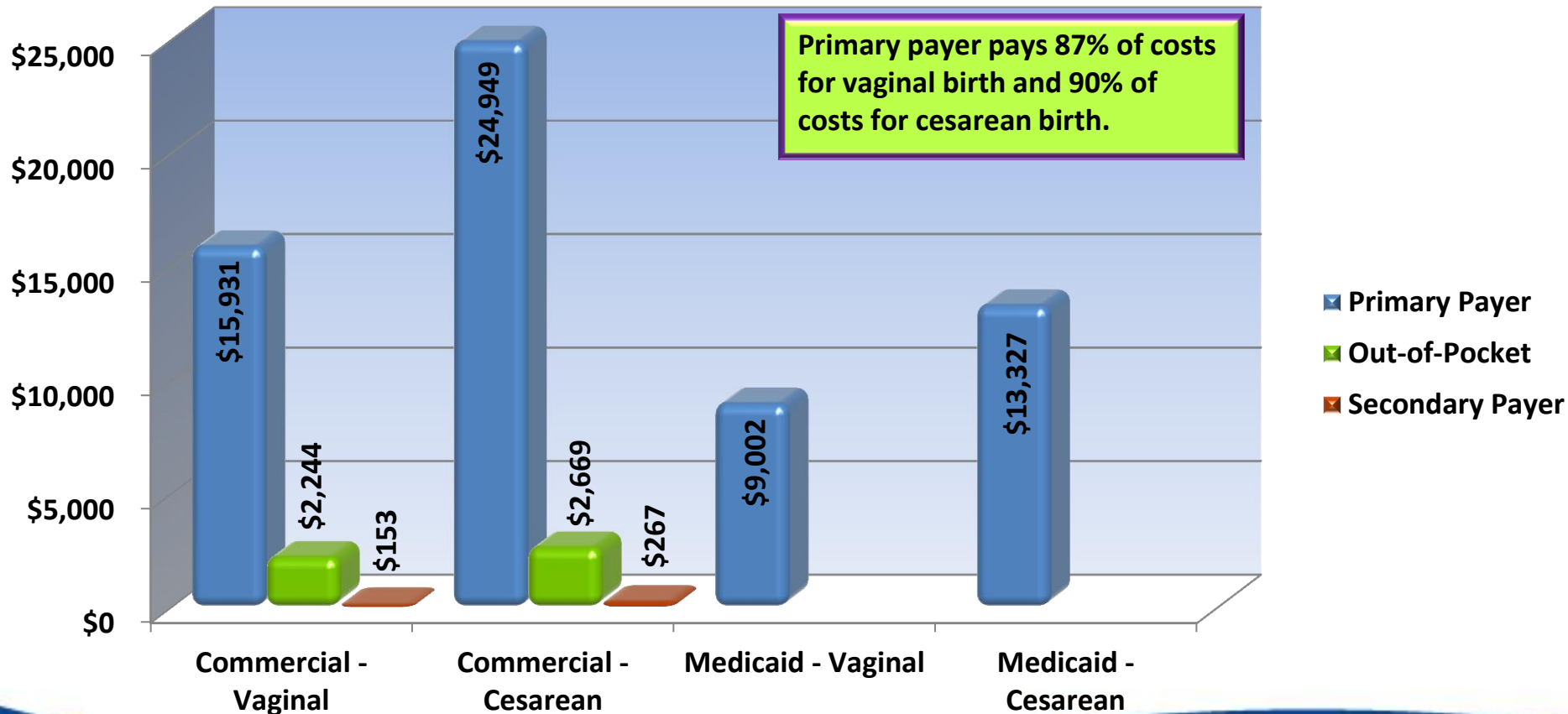
Source: "The Cost of Having a Baby in the United States," Truven Health Analytics Marketscan® Study, January 2013. Costs and charges associated with newborn care include those incurred through the first three months of life.



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## Source of Payments for Maternal and Newborn Care in the U.S. - 2010



Source: "The Cost of Having a Baby in the United States," Truven Health Analytics Marketscan® Study, January 2013. Costs and charges associated with newborn care include those incurred through the first three months of life.

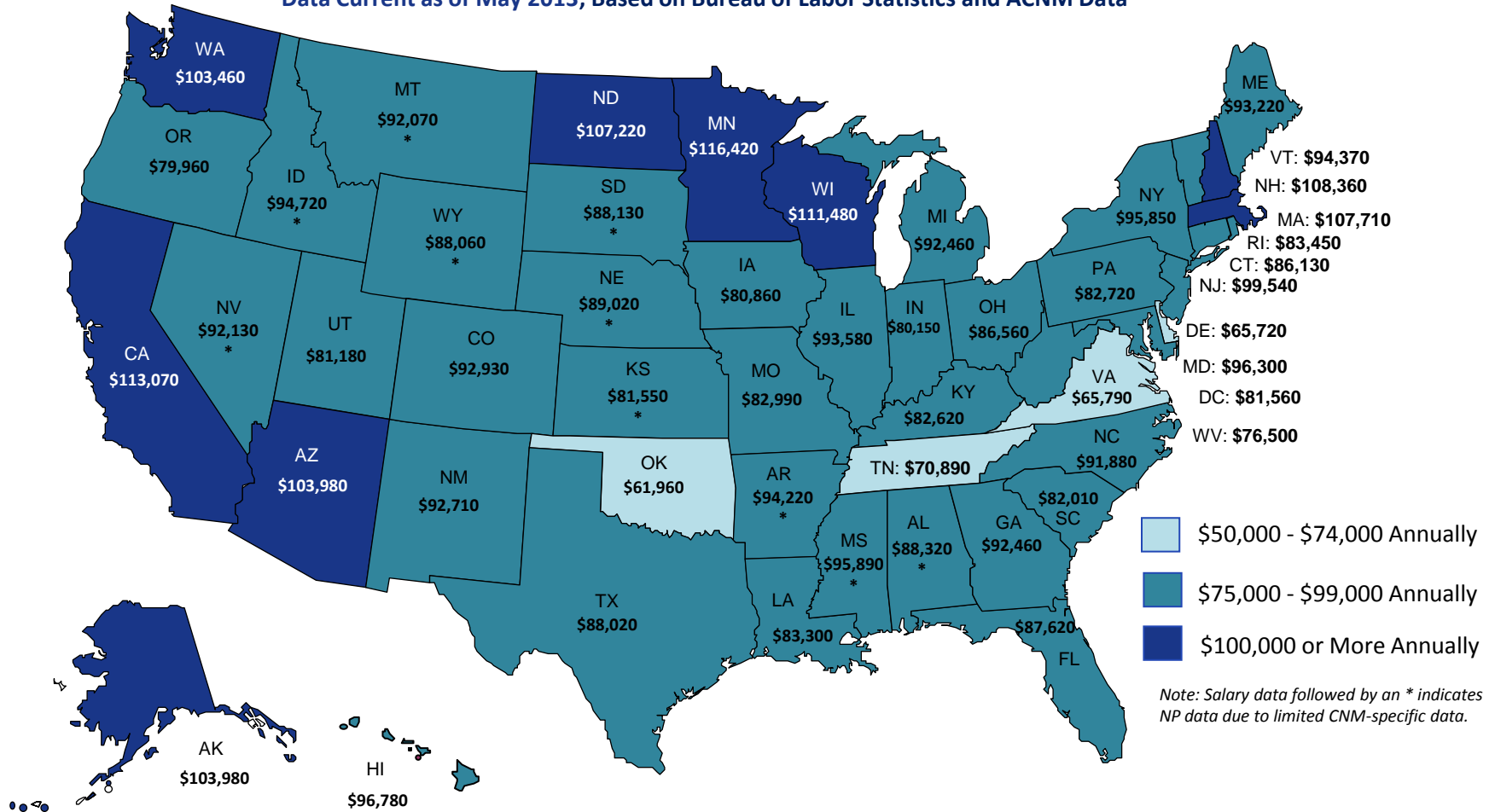


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# Average CNM and CM Salary Per State

Data Current as of May 2013; Based on Bureau of Labor Statistics and ACNM Data



- \$50,000 - \$74,000 Annually
- \$75,000 - \$99,000 Annually
- \$100,000 or More Annually

Note: Salary data followed by an \* indicates NP data was substituted for CNM data due to limited CNM-specific data.

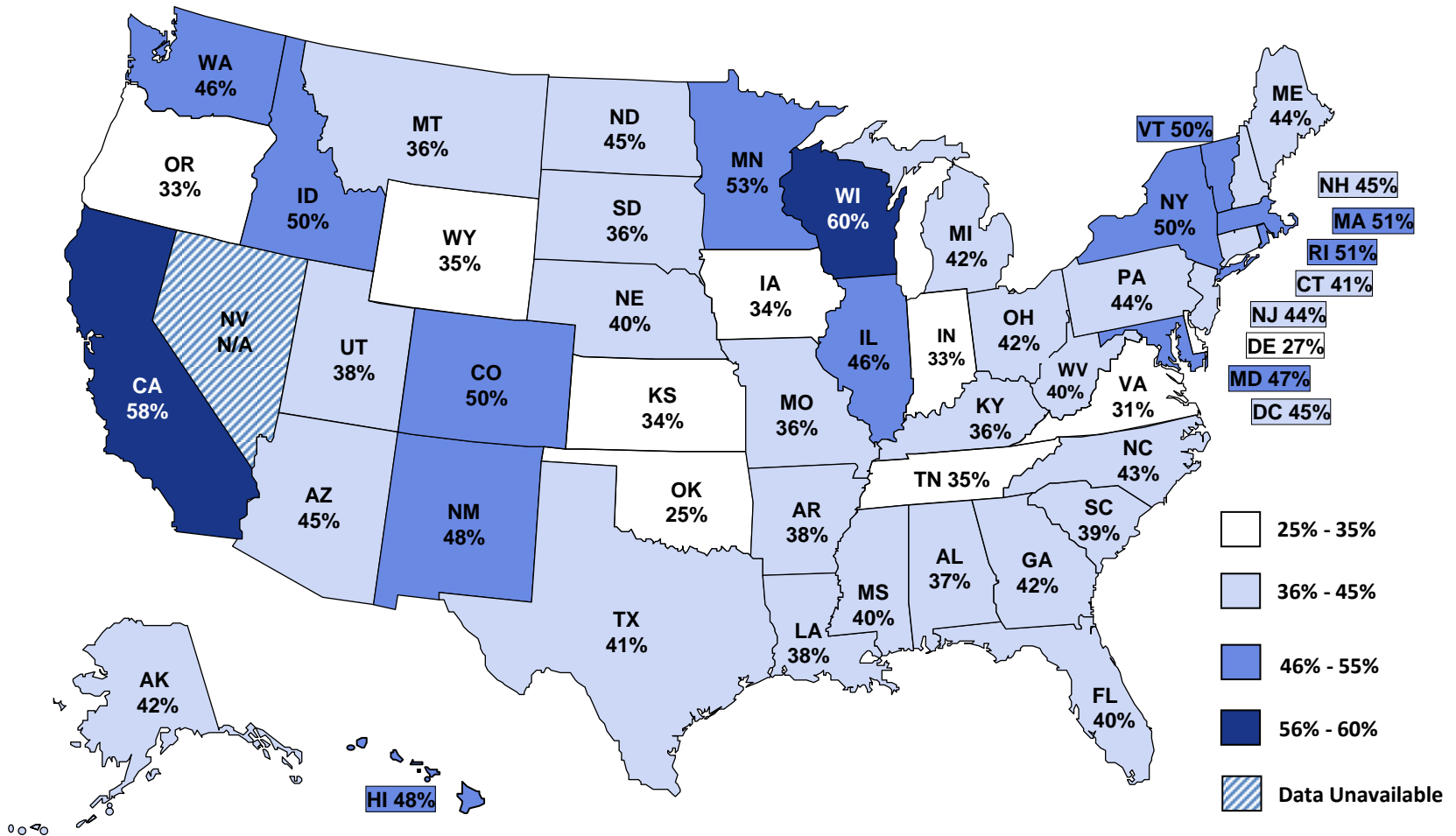


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# CNM Salary as a Percent of OB Salary

Data Current as of May 2013; Based on Bureau of Labor Statistics and ACNM Data



Source: Bureau of Labor Statistics, available at: <http://www.bls.gov/oes/current/oes291161.htm> Due to limited midwifery salary data, NP data was substituted for some states as a rough estimate. In general, NP salaries tend to be slightly higher than CNM salaries.



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# Q&A



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