

March XXX, 2020

Dear insert your governor here:

On behalf of the <u>insert number of</u> Certified Nurse-Midwives and Certified Midwives (if you are from a state where CMs are recognized) of <u>insert your state</u>, I write to you gravely concerned that the COVID-19 pandemic will place untenable stress on the current maternity care system and workforce. Maternity care in the United States was already in a state of crisis before the pandemic, with higher estimated rates of maternal mortality, severe maternal morbidity, preterm birth, infant mortality, and low birth weight as compared to other high-income nations. It is with the desire to provide the safest and best quality care possible to the state's mothers and infants that we ask for emergency measures to now temporarily lift the restrictive licensure requirements that limit access to the midwifery workforce.

Shortages of maternity care providers already cause serious public health concerns for women, children, and families. In regular times, the most vulnerable in our communities are forced to endure long wait times for routine visits or fail to receive adequate care before, during and after pregnancy. Efforts to improve access and health outcomes across the care continuum should include enhanced access to midwives and investment in the midwifery model-of-care. Improving access to full-scope maternity care provided by midwives can help alleviate significant pressures communities and health systems are experiencing. It's never been more critical than now, where nursing shortages are putting stresses on labor and delivery units across the country and social distancing is forcing maternity care clinicians to innovate and dramatically alter the ways in which we care for pregnant people and infants.

Midwives are essential to the provision of quality care in all settings. Midwives educated and qualified to international standards can provide 87% of services needed by mothers and newborns. Today, there are 12,591 Certified Nurse-Midwives and 116 Certified Midwives in the United States. These midwives attend over 360,000 deliveries of newborns in the country annually. Nearly all U.S. midwifery births occur in the hospital, with some in birth centers and others in homes. The midwifery model of care as practiced by Certified Nurse-Midwives and Certified Midwives promotes higher rates of physiologic birth and results in fewer adverse neonatal outcomes. The composition of the current maternity care workforce in the United

States disproportionately involves providers practicing in a high-acuity specialty model rather than a primary maternity care model that better meets the needs of most childbearing people and newborns.

Midwife-attended births help reduce the incidence of unnecessary cesarean sections which carry well-established risks: higher rates of hemorrhage, transfusions, infections, and blood clots—all primary causes of maternal mortality. Healthy physiologic birth means healthier moms and newborns, fewer complications and side-effects, and much lower health care costs.

Despite the role midwives could play in efforts to reduce maternal mortality and morbidity and improve overall health outcomes for women and their families, midwives and the midwifery model of care remain drastically underutilized in the United States health system. There are several reasons for this: restrictive supervisory and collaborative practice requirements, lack of prescriptive privileges, restrictions on hospital credentialing, and limited recognition of the Certified Midwife credential.

Collective action is needed across the health care continuum to ensure safe high-quality maternal and infant health care nationwide. An unprecedented response is needed as we face unprecedented strain on our maternity care workforce. Certified Nurse-Midwives and Certified Midwives are ready and able to be a more integral part of your state's maternity workforce if they are allowed to practice the full extent of their education and training without unnecessary restriction.

I look forward to working with you and	am available to answer any	questions you may have.
----------------------------------------	----------------------------	-------------------------

Thank you in advance for your consideration.

Sincerely,

Your state ACNM Affiliate President

i https://www.who.int/workforcealliance/media/news/2012/icmstandards/en/

^{**} http://www.midwife.org/ACNM/files/ACNMLibraryData/UPLOADFILENAME/00000000287/Principles-for-Licensing-and-Regulating-Midwives-in-US-According-to-ICM-Global-Standards-March-2014.pdf