



## **Support Access to High Quality Women's Health Services**

### **Position:**

The American College of Nurse-Midwives (ACNM) strongly supports the “**Midwifery Care Access and Reimbursement Equity Act of 2007,**” (S.507/H.R.864) as introduced by Senator Kent Conrad (D-ND), Senator Susan Collins (R-ME), Senator Maria Cantwell (D-WA), and Senator Richard Durbin (D-IL) in the U.S. Senate, and by Representative Ed Towns (D-NY) and Representative Fred Upton (R-MI) in the U.S. House of Representatives on February 6, 2007. This legislation would provide for long overdue adjustments to reimbursement for services provided to Medicare beneficiaries by certified nurse-midwives (CNMs) and certified midwives (CMs).

Midwifery practice, as conducted by CNMs and CMs, is the independent management of women's health care focusing particularly on pregnancy, childbirth, the postpartum period, care of the newborn, and the family planning and gynecological needs of women. The CNM and CM practice within a health care system that provides for consultation, collaborative management, or referral as indicated by the health status of the client. CNMs and CMs both practice in accord with the *Standards for the Practice of Midwifery*, as defined by ACNM.

Specifically, **S.507/H.R.864** would:

- Establish equitable reimbursement for obstetrical and gynecological services provided by CNMs/CMs to ensure greater access to these essential services.
- Establish recognition for the certified midwife (CM) to provide services under Medicare, as legally authorized by state law.

### **Background:**

#### **Inequitable Reimbursement for Women's Health Services**

Since 1988, CNMs have been authorized to provide maternity-related services to Medicare-eligible women who are of childbearing age. Approximately 3 million disabled women are Medicare-eligible beneficiaries. Reimbursement for CNMs was established at 65% of what a physician receives for a similar service.

As of 1993, CNMs were also authorized to provide services outside the maternity cycle. Medicare reimburses CNMs for primary care services if these services are part of the practitioner's state-regulated scope of practice.

In June of 2002, the Medicare Payment Advisory Committee (MedPAC) issued a report titled “Medicare Payment to Advanced Practice Nurses and Physician Assistants.” In a 14-0 vote,

MedPAC recommended to Congress that the percentage of Part B reimbursement for CNM services be increased. This was the sole recommendation in the report. In its recommendation to Congress, MedPAC reported that, “... *research studies show quality and outcomes of care [provided by CNMs] at least comparable to obstetricians and gynecologists.*”<sup>1</sup>

According to the Centers for Medicare and Medicaid Services, expenditures for CNM services in 2003 totaled approximately \$530,000. This low rate of expenditure is due primarily to the fact that CNMs are primarily serving the obstetrical and gynecological needs for women of childbearing age eligible for Medicare coverage (i.e. women with disabilities). Additionally, it is clear that the low reimbursement level discourages CNMs from taking on additional clients (including older women) in the Medicare program who could benefit from the well-woman services CNMs provide.

*ACNM believes passage of S.507/H.R.864 would have a minimal impact on the federal budget, increasing expenditures within the program by less than \$1 million each year according to officials at the Congressional Budget Office, which provided the information at Senator Conrad’s request.*

Finally, ACNM feels Congress should take its lead from the states on this issue. Currently, a majority of the states reimburse CNMs/CMs for services provided to their citizens under Medicaid at 100% of what other obstetrical providers receive. The time has come for Medicare to provide equitable reimbursement in this area as well.

### **Recognition of the Certified Midwife**

A CNM is educated in the two disciplines of nursing and midwifery. A CM is educated in the discipline of midwifery. Both are required to possess evidence of certification according to the requirements of ACNM and the American Midwifery Certification Board (AMCB). While services provided by CNMs are reimbursed within both Medicare and Medicaid, CMs are not presently recognized under either program. **S507/H.R.864** would establish CMs authority to provide services within the Medicare program in states where they are licensed to practice.

Please support enactment of these overdue changes to the Medicare program so that all women, including those with disabilities, have appropriate access to health professionals of their choosing. In the Senate, please contact Ms. Lindsey Henjum in Senator Conrad’s office at (202) 224-2043 to cosponsor **S.507**. In the House, please contact Mr. Rick Blake in Rep. Towns’ office at (202) 225-5936 to cosponsor **H.R.864**.

Please feel free to contact Patrick Cooney, ACNM’s Federal Relations Representative, at (202) 347-0034 or via email at [Patrick@federalgrp.com](mailto:Patrick@federalgrp.com) with any questions you might have regarding this issue. Thank you for your consideration of this legislation.

*The mission of ACNM is to promote the health and well-being of women and infants within their families and communities through the development and support of the profession of midwifery as practiced by certified nurse-midwives and certified midwives.*

---

<sup>1</sup> Medicare Payment Advisory Committee, “Medicare Payment to Advanced Practice Nurses and Physician Assistants,” June 2002, page 13.