FACTS about HB1189/SB1206
"An Act relative to out-of-hospital birth access and safety"

Home birth is currently unregulated in Massachusetts. This licensure bill will improve the safety of home birth, promote public health, increase access to maternity care, and save money.

Home birth is currently unregulated in Massachusetts
- Over 500 families are having home births in Massachusetts each year.
- Most home births are attended by unlicensed midwives.1
- 33 states now recognize the Certified Professional Midwife (CPM) credential, and 7 more have legislation pending.

Licensure improves safety of home birth
- Unlicensed midwives will be required to become licensed CPMs, meeting the educational and practice requirements of the profession.
- Midwives will be explicitly permitted to carry and administer lifesaving medication such as anti-hemorrhagics.
- Licensure encourages integration within the healthcare system.

Licensure is good for public health
- The American Public Health Association supports CPM licensure.2
- CPM care is the “benchmark” against which standard U.S. maternity care should be judged.3
- Midwives will be required to report perinatal outcomes to a national database.

Massachusetts and Connecticut are the only New England states that do not currently regulate out-of-hospital maternity care

“The style of care in [out-of-hospital] births has repeatedly been found to be more closely aligned than typical hospital care with needs of most women and newborns… The judicious use of technology in these settings avoids side effects and waste of unneeded interventions.”4

Licensure
...Improves consumer protection
...Supports quality assurance
...Increases visibility and access
...Improves protection of midwives
- North American Registry of Midwives5

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1 Certified nurse midwives (CNMs) are the only midwives currently licensed in Massachusetts and they primarily practice in hospitals and birth centers
2 "Increasing Access To Out-Of-Hospital Maternity Care Services Through State-Regulated and Nationally-Certified Direct-Entry Midwives," formally adopted by the American Public Health Association on October 24, 2001
3 Sakala and Corry, “Evidence-Based Maternity Care: What it is and What it Can Achieve,” Milbank Memorial Fund, p.29 (2008)
5 NARM, “State Licensure of Certified Professional Midwives: Position Statement” (April 2012)
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Licensure increases access to maternity care
- Currently, access to home birth is limited to those who have the means to pay out of pocket. Medicaid and most private insurance does not cover maternity care with an unlicensed provider. Licensure is a prerequisite to insurance coverage.
- States experience an increase in the number of midwives after licensure.

Licensure saves money
- Home births cost less and result in fewer interventions and postpartum complications.
- Washington State found that licensed midwifery generated saved their state Medicaid system an estimated $0.5M over a 4-year period. The net savings to all payors was $4.9M over the same period.6

Vermont and New Hampshire are among the 14 states that provide Medicaid reimbursement to licensed certified professional midwives. In Massachusetts, families must pay out of pocket.

“Integrating home and birth center births into our maternity care system should improve outcomes in all out-of-hospital births. Equally important will be the model they provide to hospital births of respecting mothers' choices for less intervention unless medically necessary. The result will be a safer and more rewarding maternity experience for mothers and their babies in all settings.”
- Eugene Declercq, PhD
Boston University School of Public Health
("How safe are home births for mothers?" CNN, January 18, 2016)