CNM Role In Maternal Health Care Access and Quality

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What Is A CNM?

• Advanced practice nurse
• Specializing in the care of women who are healthy or who have common, stable health problems
  • Across the lifespan
  • Low-tech, high-touch
  • Interprofessional whether woman is high-risk or low-risk
Training and Education

• Training
  • RNs → Masters or doctoral degree
    • Programs accredited by American Association of Colleges of Nursing and Accreditation Commission for Midwifery Education (ACME)
  • Length of training
    • 2-3 years
  • Focus of training
    • Routine care of low- and moderate-risk women
    • Health promotion, disease prevention, early identification of complications
  • Cost of training
  • Certification by passing national exam
  • Licensure throughout US
## Physicians

**Obstetrician:**
- Medical degree & specialized residency
- Skilled in specialized surgical techniques and primary care
- Trained to attend low, moderate and high risk births and address complications and co-morbidities
- 99.9% of births they attend occur in hospitals

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## Know the Maternity Care Team!

### Advanced Practice Nurses
- Nationally-accredited educational programs
- National certification
- Licensed in all 50 states

### Certified Nurse-Midwives
- RN + Master’s degree or more
- Certification via AMCB
- Trained to provide care in 6 key areas: primary care, wellwoman/GYN, antepartum, intrapartum, postpartum, newborn
- Skilled in normal birth for women with low-moderate risk
- 94.6% of the births they attend occur in hospitals
- Attend births in Out-of-Hospital settings (Birth Center, Home)

### Women’s Health Nurse Practitioners
- RN with Master’s degree
- Provide primary and maternity care to women of all ages
- Do not attend births

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## Certified Professional Midwives
- Complete competencies via apprenticeship or accredited educational program
- National certification
- Care for low risk pregnant women from pregnancy through 6-8 weeks postpartum
- Attend births at home and in birth centers

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## Doula
- Provide support during pregnancy, labor, birth and postpartum
- May have certification
- Usually hired by the family, covered by insurance in some states

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## Family Practice:
- Medical degree & general residency
- Skilled in primary care
- Trained to attend low and moderate risk births
- Some trained to perform cesarean surgeries
- 99.9% of births they attend occur in hospitals
EQUALITY

EQUITY
Nurse-midwives: Caring for women across their reproductive lives

Women and Families

CNM

CNM

CNM

CNM
Figure 2. Social Determinants of Maternal Health

Social Determinants of Maternal Health

Before Pregnancy

During Pregnancy

- Prenatal
- Labor & Delivery
- Immediate Post-partum

After Pregnancy

Structural Determinants

- Socioeconomic Position
- Race/Ethnicity
- Rural/Urban
- Age

Maternal Circumstances

- Safe Living and Working Conditions
- Secure Access to Food
- Stable Housing
- Available Transportation

- Behavioral Factors
- Psychological Factors
- Biological Factors

Maternal Health System

- Accessible
- Affordable
- Risk-appropriate
- High quality
- Patient centered
- Coordinated
- Equitable

Maternal Health Outcomes

- Full-term births
- Healthy birthweight
- Fewer maternal deaths
- Decreased severe maternal morbidity
- Better Postpartum Depression Care

Embolism
2.2x higher for c/s vs. vaginal birth

Hemorrhage (Transfusion)
3.23% c/s Vs 1.00% vaginal birth

Amniotic Fluid Embolism
22/100,000 c/s vs 8/100,000 vaginal birth

Georgia Low-Risk Cesarean Rate
Overall: 28%
CNMs: 10-17%
Potential cost savings from CNM

129,243 births in Georgia in 2017

• Low-risk pregnancy rate is about 1/3 of all births. (CDC Vital Statistics) ~43,000 low-risk births
• 28% of low-risk births were by c-section = 12,040 c-sections to low-risk women
• Medicaid costs for cesarean – Medicaid costs for vaginal birth = $5,101 per extra cesarean

• DPH: In 2017 CNMs attended 13.5% of births (17,447 total)

12,040 actual cesarean rate (28%)
If Grady CNM rate (17%) = 7,310
• $24,123,300 savings to Medicaid
If Atlanta Birth Center rate (10%) = 7,740
• $39,474,000 savings to Medicaid

If CNMs attended 34% of births = 43,942
- Current 17,477 CNMs attended
  26,495 additional births by CNMs

26,500 births * $2,260/birth
• $59,890,000 potential cost savings
Triple Aim

1. Satisfaction
   • More autonomy, high satisfaction

2. Quality of care
   • Reduced cesareans, preterm birth, episiotomies, and severe perineal tears
   • Increased vaginal births after cesarean (VBAC) and breastfeeding
   • Fewer medical interventions: induction, augmentation, regional anesthesia

   THERE IS NO OUTCOME MEASURED THAT IS WORSE FROM CNM CARE.

3. Cost of care
   • Lower training, malpractice, salary, and billing costs
CNM and OB Distribution in Georgia
Percent of CNM Survey Participants

- Had input into protocol agreement: 64%
- Can vote for hospital perinatal decisions: 32%
- Can order mammogram: 52%
- Rx never delays care: 30%
How to Maximize CNM Benefits for Georgia Women

1. Help train a diverse nurse-midwifery workforce
   a. Thank you!
   b. Scholarships for students of color
How to Maximize CNM Benefits for Georgia Women

2. Facilitate CNM practice and distribution
   a. Employ CNMs in rural areas— they can also precept!
      • Health departments— with Centering Pregnancy
      • Labor and delivery— hospitalists
      • Financial incentives— increase loan repayment opportunities, cover malpractice
   b. Remove barriers to rural practice
      • Remove unnecessary restrictions (1:4 MD:APP ratio)
   c. Out-of-hospital birth for low-risk women
      • Remove Certificate of Need requirements for birth centers
How to Maximize CNM Benefits for Georgia Women

3. Streamline the system
   a. Funding for Reducing Primary Cesareans (ACNM)
      1. $7,500 annual fee per hospital
      2. Guidance for evaluation, improvement, review, and staff engagement for Quality Improvement practices

   b. Elimination of APRN regulations requiring delegation for routine care and screening
      1. Ultrasound
      2. Routine mammograms
      3. Schedule II medications
How to Maximize CNM Benefits for Georgia Women

4. Facilitate accurate outcome measurement
   a. CNM admitting privileges
   b. Birth certificate accuracy
Resources


