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MEDIA INQUIRIES

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New Study Shows Midwife-Led Birth Centers Improve Outcomes and Lower Health Care Costs

Research Confirms Low Cesarean Rates and Health Care Costs at Birth Centers, Setting a New Standard of Excellence in Maternity Care

SILVER SPRING, MD – As health care costs and the rate of cesarean births for expecting mothers have escalated over the past two decades in the United States, a new study released today shows that women who receive care at midwife-led birth centers incur lower medical costs and are less likely to have cesarean births compared to women who give birth at hospitals.

Conducted by the American Association of Birth Centers (AABC) and published in the most recent issue of the *Journal of Midwifery & Women's Health*, the official journal of the American College of Nurse-Midwives (ACNM), *The National Birth Center Study II* highlights the benefits for women who seek care at midwife-led birth centers. Findings also reinforce longstanding evidence that midwife-led birth centers provide safe and effective health care for women during pregnancy, labor, and birth.

“Birth centers are homelike facilities existing within the health care system with a program of care designed in the wellness model of pregnancy and birth. They are uniquely positioned to provide healthy women and their newborns with maternity care avoiding unnecessary cesarean births and personalized to each woman’s individual needs,” said AABC President-Elect Lesley Rathbun, CNM, FNP, MSN, and founder of Charleston Birthplace, Inc. “Americans need to learn about the high-quality care that midwife-led birth centers offer.”

The rising number of cesarean births in the United States (32 percent in 2010ⁱ) has generated concern due to the many short and long-term health implications for women, their newborns, and future pregnancies. This has led to recent efforts by national system stakeholders, including clinicians, payers, and policy makers, to decrease the cesarean rate across the country. AABC’s newest research suggests that increased birth center usage may be one solution to reducing the cesarean rate in the United States.

The study, which included more than 15,500 women who received care in 79 midwife-led birth centers in 33 US states from 2007 through 2010, found that fewer than one in sixteen (6 percent) of participants required a cesarean birth compared to nearly one in four (24 percentⁱⁱ) similarly low-risk women cared for in a hospital setting.

“A growing body of evidence, including findings from *The National Birth Center Study II*, continues to demonstrate that women who give birth at midwife-led birth centers experience exceptional outcomes and are less likely to undergo cesarean birth compared to those who give birth in hospitals,” said one of the study’s researchers Dr. Cara Osborne, SD, MSN, CNM, an assistant professor at the University of Arkansas’ Eleanor Mann School of Nursing. “Although cesarean birth is sometimes necessary, due to the condition of the woman or baby, the procedure can lead to complications.”



Because payments for care are nearly 50 percent greater for women who have cesareans versus those who give birth vaginally, study findings suggest that the use of birth centers also decreases direct and indirect costs to the US health care system. Given lower costs in the birth center setting, as well as low rates of cesarean birth, the 15,574 births in this study may have saved more than \$30 million in facility costs alone based on Medicare/Medicaid rates, not including additional savings in costs of additional providers, anesthesia, and newborn care in hospital settings.

"Increasing access to midwives and birth center services would drive down costs in our over-burdened health care system, while also ensuring safe, quality care in pregnancy and childbirth," said ACNM President Dr. Holly Powell Kennedy, a professor of midwifery at the Yale University School of Nursing. "Midwives, who attended more than 335,000 births in 2010, work collaboratively with a range of health care professionals, such as obstetricians and other physicians, to provide comprehensive care for women, resulting in safe, quality care. Their work as a team with pregnant women and their families ensures a personalized and nurturing birth center experience."

More women utilizing midwife-led birth centers before, during and, after pregnancy, could produce significant cost savings for the US health care system.

"This study of midwife-led birth center births is precisely the kind of research that should be informing our maternity care spending decisions," said Rep. Lucille Roybal-Allard (D-CA). "The potential cost savings to our health care system are impressive, but paramount for me, however, is the study's findings on the quality of care and optimal outcomes women experience at midwife-led birth centers. We must work to ensure that all women have access to high quality midwifery care in all settings."

To learn more and to access the full results of *The National Birth Center Study II*, visit the Web site for ACNM's *Journal of Midwifery & Women's Health* at: www.jmwh.org.

For more information on midwives, visit ACNM's Web site at: www.midwife.org.

To learn more about birth centers in the United States, visit AABC's Web site at: www.birthcenters.org.

Survey Methodology

The new birth center study monitored and recorded outcomes for 15,574 women who received care in 79 midwife-led birth centers in 33 US states from 2007 through 2010. Eligibility criteria for birth center birth were established by the American Association of Birth Centers (AABC) and The Commission for the Accreditation of Birth Centers (CABC) and included singleton, full-term gestation in vertex presentation with no medical or obstetric risk factors precluding a normal vaginal birth or necessitating interventions such as continuous electronic fetal monitoring or induction of labor. 13,030 (84%) of the women planning a birth center birth at the onset of labor gave birth at birth centers. 2,544 (16%) women gave birth at a hospital. Results were collected using the AABC's Uniform Data Set, an online data registry developed by AABC with a task force of maternity care and research experts. Federal or state government programs (Medicaid, Medicare, Children's Health Insurance Program, or TRICARE) were the primary payers for nearly a third of births recorded in the study.

About the American Association of Birth Centers

The American Association of Birth Centers (AABC) is a multi-disciplinary membership organization comprised of birth centers, and individuals and organizations that support the birth center concept including certified nurse midwives (CNMs), certified professional midwives (CPMs), physicians, nurses, women and their families. Founded in 1983, AABC is dedicated to developing quality holistic services for childbearing families that promote self-reliance and confidence in birth and parenting. AABC publishes



materials on birth centers, sets national standards for birth center operation, and promotes state regulations for licensure and national accreditation by the Commission for the Accreditation of Birth Centers. More information about AABC can be found at: www.birthcenters.org.

About the American College of Nurse-Midwives

The American College of Nurse-Midwives (ACNM) is the professional association that represents certified nurse-midwives (CNMs) and certified midwives (CMs) in the United States. With roots dating to 1929, ACNM sets the standard for excellence in midwifery education and practice in the United States and strengthens the capacity of midwives in developing countries. Our members are primary care providers for women throughout the lifespan, with a special emphasis on pregnancy, childbirth, and gynecologic and reproductive health. ACNM reviews research, administers and promotes continuing education programs, and works with organizations, state and federal agencies, and members of Congress to advance the well-being of women and infants through the practice of midwifery.

About the *Journal of Midwifery & Women's Health*

The Journal of Midwifery & Women's Health (JMWH) is the official journal of the American College of Nurse-Midwives. This peer-reviewed journal presents new research and current knowledge across a broad range of clinical and interdisciplinary topics including maternity care, gynecology, primary care for women and newborns, public health, health care policy, and global health. With a focus on evidence-based practice, JMWH is dedicated to improving the health care of women throughout their lifespan and promoting excellence in midwifery.

ⁱ Martin JA, Hamilton BE, Ventura SJ, Osterman MJK, Wilson EC, Mathews TJ. Births: Final data for 2010. *Natl Vital Stat Rep.* 2012;61:1-100. Available at

http://www.cdc.gov/nchs/data/nvsr/nvsr61/nvsr61_01.pdf

ⁱⁱ Menacker, Fay. *Natl Vital Stat Rep.* 2005;54:1-9. Available at

http://www.cdc.gov/nchs/data/nvsr/nvsr54/nvsr54_04.pdf