PUSH



Fall 2011

NYSALM Statement on Planned Home Birth

NYSALM is proud to introduce a statement on "Planned Home Birth in New York State." The NYSALM Board spent many hours this spring researching, writing, and editing this statement. It complements the newly-revised statement on planned home birth that the American College of Nurse-Midwives (ACNM) also released this summer.

The Statement includes a summary of the research supporting the safety of planned home birth attended by Licensed Midwives. It also suggests "Model Practices" for both midwives and the receiving hospital and provider if transport to a hospital is warranted. Our members are invited to use the statement with their local hospitals and regional perinatal centers. The full text of the statement is included later in this newsletter.

NYSALM Now an ACNM State Affiliate

In July, NYSALM officially became the state affiliate for New York for the American College of Nurse-Midwives. This affiliation will hopefully increase our membership and our ability to communicate with our members as well as our state's influence on national matters. We now have a new website under the ACNM umbrella at www.newyork.midwife.org which is easier to maintain. We plan to archive documents and photos there as well as use it as an improved vehicle for communication with our members and the public.

Local chapters no longer exist under the ACNM bylaws, but are included in the NYSALM Bylaws. The previous ACNM Region 2, Chapter 1 voted in September to officially change its name to "NYC Midwives."

NYSALM Board Meetings "on the road"

The NYSALM Board has usually met in the offices of our legislative consultants Greenberg Traurig in Albany, but in September, we met instead in Johnson City near Binghamton. Several local midwives were able to attend; the Board appreciated the opportunity to connect with our members and their issues. On November 16, we will be meeting in the offices of Greenberg Traurig in their

New York City office in the MetLife Building. We hope many NYSALM members from the downstate area will attend. Building security requires a list of attendees so if you know you can attend, please email Nancy Kraus at cnm200@aol.com so your name can be added to the list. The meeting will start at 10am and end around 4pm.

Report from our 10th Annual Meeting and Education Conference

For the first time in ten years, our NYSALM Annual Meeting was an Education Conference rather than a Lobby Day. Since we had no active legislation to lobby, we instead met at a Quaker retreat center in Old Chatham, NY called Powell House. Our education program included a presentation by noted herbalist Susun Weed, an update from our ACNM regional representative Kate McHugh, and sessions on the business of midwifery, HPV and genetic screening. About 50 members enjoyed the relaxed atmosphere, good home-cooked food, beautiful country scenery, and the chance to get to know each other better.

Next year's Annual Meeting is now in planning stages; we'll communicate the date and location as soon as those details are decided. Please come!

Midwife Ronnie Lichtmann addressing Annual Meeting



NYSALM Awards to Senator Duane & Assemblyman Gottfried

NYSALM President Pat Burkhardt visited both Senator Tom Duane and Assemblyman Richard Gottfried at their Manhattan offices this spring to present them with citations thanking them for their heroic efforts in passing the Midwifery Modernization Act in 2010.



Pat and Assemblyman Gottfried



Pat and Senator Duane

Board Member Wins ACNM Leadership Development Award

Congratulations to Merideth L. Geers, NYSALM Board member, on her receipt of one of the ACNM Foundation Leadership Development Awards. This award is sponsored by the Frances T. Thacher Midwifery Leadership Endowment Fund and the Midwifery Business Network. Merideth will attend the Midwifery Business Network annual educational conference this fall and has already promised to share her increased knowledge with "More Economics of Midwifery" at the next NYSALM Annual Meeting.

NYC Midwives Hold 9th Annual "Miles for Midwives"

Over 400 people registered to run in the 2011 "Miles for Midwives" 5K Fun-Run and Birth and Wellness Fair held in Prospect Park, Brooklyn on Saturday morning, October 1. The over-all winner of the race was David Meretzy, the son of midwife Michelle Handleman.

Manhattan Borough President Scott Stringer was the honorary starter for the race and received an award for his dedication to women's health and his efforts to save St. Vincent's Hospital last year

The event was co-sponsored by Choices in Childbirth; NYSALM was also an official sponsor this year and has been a beneficiary of the event for the past couple years. Thanks to NYC midwives Jocelyn Finger, Casey Selzer, Beth Lang, and Gina Eichenbaum-Pikser for their hard work in making this event such a continuing success!

Condolences to the family of Marie Frey, NYSALM member

Marie Frey, a member from Long Island, died suddenly on September 12. She graduated from Stony Brook in 1997 and was a member of the Stony Brook midwifery service for 10 years. She is survived by three children. The School of Nursing is establishing "The Marie Frey Excellence in Nurse-Midwifery Practice" scholarship; donations are welcome.

Laura Sheperis en route to South Sudan

Former NYSALM President Laura Sheperis finished her first assignment for Doctors without Borders/Medecins sans Frontiers in Nigeria and will head for her next assignment in South Sudan in October. You can see Laura's photos from Nigeria on Facebook. Laura made an appearance in NYC at Miles for Midwives as part of her whirlwind tour of the US visiting family and friends between her postings.

Sex Education back in NYC School Curricula

This fall, all NYC public middle and high schools will again include sex education in their health curricula. Since 1984, schools have been mandated to teach about HIV, but this is the first time in two decades that medically accurate information about pregnancy and sexually transmitted disease will be taught. This is an opportunity for NYSALM members to make their services available to their local public schools.

Ina May Gaskin Wins "Alternative" Nobel Prize

Ina May Gaskin CPM was one of four winners of the 2011 Right Livelihood Award granted by a Swedish foundation that recognizes work done for the good of humankind. She was recognized for "her lifelong work to promote natural childbirth methods in a society where medicated deliveries and cesarean sections are the norm." The other award winners were Chinese solar power pioneer Huang Ming, Chadian human right activist Jacqueline Moudeina, and a Spanish farmers' advocacy group called Grain.

Scientific Data Lacking in Majority of ACOG Obstetric Recommendations

A group of physicians examined the quality of scientific evidence underlying the clinical practice bulletins of the American College of Obstetricians and Gynecologists (ACOG). The bulletins make multiple

recommendations for clinical practice and are often cited in malpractice cases and used as the foundation for many hospital policies. The authors found that only 25.5% of the obstetric recommendations were based on good and consistent evidence; the gynecologic recommendations fared slightly better with 34.7% supported by good evidence. The article was published in Obstetrics & Gynecology, Vol 118, No 3, Sep 2011.

Unfortunately, midwives are also often expected to base our practice on these unscientific ACOG recommendations.

Legislative Update Provided by our consultants at Greenberg Traurig

While the State Legislature concluded its session at the end of June, there have been and continue to be, developments on several issues important to NYSALM.

A new law signed by Governor Cuomo on September 23rd, allows parents of a birth resulting in a stillbirth to receive an official "certificate of still birth" upon request. Previously, parents were only provided a "fetal death certificate." Beginning in March, a family can request that a New York State or New York City Department of Health certificate of still birth be provided. Unlike a fetal death certificate, the certificate of still birth acknowledges the birthing process, with contractions, labor and delivery, that resulted in a stillbirth.

As you may be aware, legislation to authorize the Health Insurance Exchange was passed by the Assembly in June, however, the Senate did not act on the bill. Accordingly, authorization for implementation and operation of the Exchange remains outstanding. That said, there are studies currently being conducted related to Exchange functions including benefits standardization, the integration of public health insurance into the Exchange, and the role of producers and navigators within the Exchange. The studies, along with ongoing guidance issued by federal agencies, continue to keep it as a prominent legislative topic.

With regard to Medicaid, the Medicaid Redesign Team ("MRT") established by Governor Cuomo in early 2011, continues to meet and its subcommittees deliberate on topics regarding basic health benefits, behavioral health, managed long term care enrollment, and workforce development. A final MRT report containing the subcommittees' recommendations is to be issued by the MRT in December. The recommendations in the Report are expected to be included in the 2012-13 budget legislation. The web address for latest MRT update is: http://www.health.ny.gov/health_care/medicaid/redesign/docs/2011-10-05_mrt_presentation.pdf; and for the MRT timeline is: http://www.health.ny.gov/health_care/medicaid/redesign/docs/2011-10-05_mrt_presentation.pdf

The enacted 2011-12 Budget included the Medical Indemnity Fund, which is designed to pay all future costs necessary to meet the health care needs of plaintiffs in medical malpractice actions who have been deemed by the court to have sustained birth-related neurological impairments. On September 15th, the New York State Department of Health issued regulations to outline the application and enrollment process, provide claims information, and advice on prior approval requirements. Accordingly, the Indemnity Fund is currently operational and accepting applications from plaintiffs.

Also created in the enacted in 2011-12 Budget was the New York State Obstetrical Patient Safety Workgroup. NYSALM recommended that its current president, Patricia Burkhardt, be included as a member of the Workgroup. The Workgroup was created in conjunction with the New York State Quality Initiative and its members are expected to be announced in the coming weeks.

In conclusion, there are several legislative issues important to NYSALM that remain active despite it being outside of the legislative session.

2012 NYSALM Board Meetings

Friday, January 12, Virtual on-line meeting Annual Meeting, date & place to be determined Friday, September 14, Albany? Friday, March 9, Albany Monday, May 21, Rochester Friday, November 9, New York City?

PRESIDENT'S PEN

The Board of Directors has approved the NYSALM Planned Home Birth (PHB) Statement for circulation. The creation of this NY State landmark document resulted from the work of many midwives, begun by a dedicated subgroup of colleagues, with subsequent review and editing by the members of the board. It is available on the NYSALM website which is evolving as we speak. Go to newyork.midwife.org to surf what's there and follow the progress of the site's development. Jen Jagger is leading that process, so if you have any ideas, suggestions or problems, please send them to her at jagger.midwife@gmail.com. Keep in mind that the new site is a microsite of American College of Nurse-Midwives (ACNM); if you are not a member of ACNM, you will not have access to the members-only content of the NYSALM web page.

In July ACNM officially approved NYSALM as the NYS affiliate of ACNM. Our members had approved revised bylaws necessary for this affiliation at our Annual Meeting in April.

As part of the application process, the NYSALM board reviewed the contract that defines the relationship between the ACNM and the state affiliate. The original contract contained a paragraph indicating that the creation and publication of position statements were prohibited. Since the NYSALM board had already realized the need for the development of such documents, this provision was not acceptable. Discussion with the ACNM Board of Directors and the Executive Director of proposed revisions to the language in the affiliate contract led to a rewriting of the document for all affiliates. In addition, the College created disclaimer language to be used on all State affiliate position statements. It appears on NYSALM's PHB position statement.

There is clear evidence throughout the parameters of the health care system of grave ignorance on the part of key players regarding who midwives are and what they can do. The implementation of the Midwifery Modernization Act of 2010 (MMA) provides a golden opportunity to educate essential leadership team players in the system, i.e., CEO, CFO, Risk Manager and lawyers, Chairs of OB, Family Practice, Director of MFM and Residency Program, Midwifery Service Director, Director of Nursing and EMT services' director. If I missed anyone you think needs to be included, let me know pb8@nyu.edu.

It has become apparent that there is a need to have a continuous dialogue with the new Department of Financial Services staff to ensure that issues related to managed care, specifically with respect to out-of-network providers, can be resolved. Members of the board met with Troy Oeschner, Deputy Commissioner for the Department of Insurance (DOI) on June 29th and Laura Dillon, Director of Consumer Services, on September 22nd. Many questions were raised leading to the need for more information to clarify complex issues. We will work with the Board of Midwifery (BOM) to describe (not define) collaborative relationships. We will use Assemblyman Richard Gottfried's language from the MMA's bill jacket since he was grilled at length on the floor of the Assembly before the bill passed, and all that dialogue is in the bill jacket. We will add our own language and then share this with the BOM to get their input and help. This has to include a State Education Department component/agreement for DOI to be able to use it. Laura and her colleagues around the table and on the conference phone call clarified some issues particular to out-of network reimbursement. See Susanrachel Condon's article which recaps the details of that clarification.

We also met with Department of Health leadership, beginning with Jason Helgerson, Deputy Commissioner and Director of Medicaid. He created the Medicaid Redesign Team (MRT) to cut costs and improve quality of care, a daunting challenge. Take a look at the MRT webpage http://www.health.state.ny.us/health_care/medicaid/redesign/ to learn their priorities and strategies. Our conversation with Jason was primarily educative. He came from Wisconsin and thought he knew midwives and what we did. The NYS reality of midwifery was new for him, so we gave him a 'quick course' and later sent documents that further explicated the law and regulations for midwifery.

At Jason's recommendation, on August 8th we met with Karen Westervelt, Special Policy Advisor for Primary Care Development. We used the meeting to educate Karen about the scope of practice of Licensed Midwives so that she understood our role in keeping women healthy. We also touched on the issue of birth centers, as they are a means to provide quality care at lower costs, but are currently placed inappropriately in the DOH administrative infrastructure. This is a work in progress.

In San Antonio at the ACNM annual meeting, Barbara Hughes, CNM, MS, MBA, FACNM, a colleague with a national reputation for expertise in midwifery models from the business perspective, spoke with me. She indicated that the Community Health Foundation of Western and Central NY (CHFWCNY) had approached her to serve as a consultant for a project they were developing to expand care for low income women in Central New York using midwives as the focus for accomplishing this. Barbara attended the June NYSALM board meeting to present to the members an overview of the project and her role in it. She invited us to be involved in any way we thought best. See who she is at http://www.wilsonhughesconsultingllc.com/index.html. We have since aided in identifying midwives working in the central NY area, and I attended the meetings held on September 28 in Syracuse and Utica to show support for the project and to explicate ways that midwives and midwifery elements could attain the goals of the project. (see page XX for full report)

Future activities that all could get involved in are those related to the dissemination of the PHB position statement and conversations with hospital leadership team members regarding the implications and effects of the passage of the MMA. Help us educate your co-workers and colleagues. We have the materials and will assist you in doing this. Let me know if you want to take a leadership position for your hospital in this matter.

For the women and the wonders of midwifery, Pat

Some Notes from Meetings on Medical and Malpractice Insurance

By Susanrachel B Condon LM

During the summer of 2011, members of NYSALM's board met with Jason Helgerson, who was recruited by Governor Cuomo to oversee and coordinate the redesign of the state's Medicaid program, which provides health insurance to almost five million people and has an annual budget approaching \$60 billion.

"It is of compelling public importance that the state conduct a fundamental restructuring of its Medicaid program to achieve measurable improvement in health outcomes, sustainable cost control and a more efficient administrative structure," said Governor Cuomo on January 5, 2011.

The Medicaid Redesign Team (MRT) has been tasked by Governor Cuomo to find ways to reduce costs and increase quality and efficiency in the Medicaid program for the 2011-12 fiscal year. As part of its work, the MRT is seeking input from the public at large, as well as from experts in health care delivery, insurance, economics, business, consumer rights as well as other relevant areas.

Childbirth is the leading reason for hospitalization in the U.S., exceeding pneumonia, cancer, heart failure, bone fracture and stroke (Kozak, DeFrances and Hall 2006). The cost of a vaginal birth without complications was \$8,919 in 2008. That same birth in a birthing center cost \$1,872. Compare these expenditures with uncomplicated cesarean section at \$14,894. Complications of cesarean surgery can lead to extended hospital stays and expensive care. Midwives have historically demonstrated low cesarean rates and therefore will be instrumental in reducing health care costs - as well as maternal, fetal and neonatal morbidity and mortality. Mr. Helgerson agreed that the input of New York's midwives and increased access to midwifery care for low-income women would be a valuable asset to Medicaid Redesign.

A group of NYSALM board members also met with Troy Oechsner, Deputy Superintendent for Health at the Department of Insurance, to discuss the practical implementation of the Midwifery Modernization Act, signed into law by Governor Paterson in July 2010. Coverage, accessibility and reimbursement for midwifery services have always been a concern, but interpretation of the new regulations by insurers has posed additional challenges.

NYSALM also met with Karen Westervelt, who heads the primary care arm of the Medicaid Redesign Team, regarding expanding access and reimbursement for primary preventive care services provided by midwives - particularly in rural and underserved parts of the state. Also discussed was New York's desperate shortage of rural maternity care providers. Midwives are eager to fill that gap, now that the requirement for a written practice agreement, previously a substantive barrier to practice in rural areas, has been abolished. In addition, the need for more community birthing centers was explored. There are only two accredited birth centers in New York State, and both are in the outer boroughs of New York City.

Finally, in September, NYSALM board members met with Laura Dillon, Head of Consumer Services for the Department of Insurance, as well as key players from the Department of Health. On the agenda: barriers to midwifery care by independent midwives that are being set forth by insurance companies. Clarification of legal limits and the need to update department memoranda which insurance companies rely on for interpretation of the law were presented. Midwives from around the state have been gathering material to help NYSALM clarify its concerns. These will be coordinated and presented to Laura Dillon in the near future.

At this meeting, NYSALM representatives were informed that an insurance company headquartered outside of New York is not required to meet New York State mandates for coverage and/or reimbursement regardless of where the member resides or receives care. In addition, NYSALM was informed that while the State Education Department does not require midwives to carry malpractice insurance, the insurance law does not say payers are not allowed to ask for it. Therefore, payers can require that midwives carry malpractice coverage because they view it as protection for their members and a health care industry standard of practice.

NYSALM initiated a discussion about helping insurance companies to distinguish between midwifery and medicine in order to negotiate lower rate requirements for midwives. OBGYNs are surgeons and specialists in high risk obstetrics, while midwives are not surgeons and care for women experiencing healthy, "low-risk"

pregnancies. The cost of medical malpractice insurance is surely a barrier to midwives starting their own small businesses, thus, once again reducing access to care - especially in rural or underserved communities.

The DOI asked NYSALM board members to convey the following information to those independent midwives performing their own insurance billing:

When transferring a woman from a planned home birth, DO NOT use the global code for billing. Midwives should bill specifically for what they did. Some payers prefer billing for antepartum and postpartum care and "prolonged face to face contact" (for labor management) and others prefer using the global maternity code with a modifier (such as 53) to show that the services were interrupted. It may be most prudent, after a transfer of care, to call and ask what they prefer. If they prefer face-to-face contact, those codes should be authorized before sending a claim.

We were reminded that while the Department of Health requires HMOs to cover home birth at the in network rates, PPOs do not have to offer gap exceptions, even if no one in plan attends home births. Insurance companies do not consider home birth medically necessary, and therefore PPO members who choose to go out of plan for midwifery care will usually be required to utilize their out of network benefits.

Western & Central New York Midwifery Project

By Pat Burkhardt, NYSALM President

On September 28, 2011, the Community Health Foundation of Western & Central New York (CHFWCNY) held meetings in Syracuse and Utica with individuals who might be interested in applying for grants to expand midwifery care for low income women in central NY State. Ann Monroe, President of the Foundation, and Kara Williams, Project Director, described the parameters of what the foundation hoped to accomplish with six grants of \$15,000 each. There are two submission cycles with deadlines of November 10, 2011 and January 6, 2012. All grants may be awarded in the first cycle if enough qualified applicants are identified.

The Program Announcement and all materials related to the project can be found at www.chfwcny.org. In addition, there are two sessions for question and answer calls: Wednesday, October 19, 2011, 12:30-1:30 pm and Friday December 9, 2011, 12:30-1:30 pm to address any issues or concerns of potential applicants.

Barbara Hughes, CNM, MS, MBA is the midwifery consultant to the Foundation for models of practice and the financial elements that require attention in the application submission. She presented an overview of midwives, their licensing and various certification credentials. She focused on three models of midwifery practice; hospital employees, as part of a physician practice, and private midwifery practice. Barbara will provide technical support to all who request it. She has great ideas and a long history of getting practices started and/or expanded.

Kara, the project director, indicated this might be just the first round of grants. She also emphasized the need for sustainability in the long term. That is a challenge, but one that could be linked to the Medicaid Redesign objectives that have been designed to reduce costs but maintain or improve quality of care. Check out their goals http://www.health.state.ny.us/health_care/medicaid/redesign/ for ideas.



Barbara Hughes CNM and Kara Williams at the CHFWCNY midwifery meeting

Photos from the 9th Annual Miles for Midwives organized by NYC Midwives



Elan McAllister of Choices in Childbirth, Manhattan Borough President Scott Stringer, and Pat Burkhardt, NYSALM President



Runners, walkers, and stroller pushers!

2011 NYSALM Annual Meeting Honorees:

Certificates of appreciation and an honorarium were given to Choices in Childbirth and www.Freeourmidwives/Birth Network of the Finger Lakes for their amazing help in mobilizing consumers in last year's monumental and successful effort to pass the Midwifery Modernization Act of 2010.

A certificate of appreciation was also presented to Dr. Donald Matheson who has served on the Board of Midwifery for many years and who has provided expert consultation to many midwives in the downstate area.

NYSALM Board Members

Pat Burkhardt, President, NYC Susan Rannestad, Vice-President, Hudson Valley Jennifer Jagger, Secretary, NYC Nancy Kraus, Treasurer, NYC

Karen Jeffereson, NYC Susanrachel Condon, Hudson Valley Alice Gilgoff, Hudson Valley Kate Finn, Midstate Merideth Geers, Midstate Sarah Cayce, Western Mary Ellen Johnson, Midstate Mary Borra, Midstate



Board Meeting, Albany, March 2011

The Board is soliciting applications from students and residents of the Long Island, Northeast, and Western regions. Contact us if you are interested!