



10 KEY BIRTH CENTER BILL QUESTIONS & ANSWERS

1. WHO IS SUPPORTING BIRTH CENTER LICENSURE?

The Birth Center Bill is a community-based initiative. [Michigan State of Birth Justice](#) is a state-wide coalition that includes members in rural, suburban and urban communities. Forming the Birth Center Bill has been a collaborative process from the start, which included: Certified Nurse Midwives (CNMs) and Licensed Midwives (LMs); the presidents of both midwifery associations The Michigan Affiliate of the American College of Nurse-Midwives and Michigan Midwives Association ; birth center owners; and diverse community birth stakeholders from all parts of the state.

2. WHY WAS THE BIRTH CENTER BILL CREATED?

The Birth Center Bill was created to address the needs of families and midwives in Michigan who want more access to birth centers. The fact that 30% of counties in MI are rural, and that there are obstetric deserts throughout the state were driving forces behind this bill. Michigan is one of only nine states without birth center licensure. The Birth Center Bill was written to achieve the least restrictive and most supportive regulatory environment for birth centers.

3. WHAT IS IN THE SCOPE OF PRACTICE OF BIRTH CENTERS?

Every credentialed provider has a different scope of practice depending on the setting. Standards of care are also different in every setting. The licensure bill will allow different birth centers to have different clinical staff. The scope of practice of the clinical staff will impact the scope of practice of the birth center.

4. WILL BIRTH CENTER LICENSURE CREATE HARDSHIPS, OR LEAD TO BIRTH CENTERS SHUTTING DOWN OR FEWER BIRTH CENTERS OPENING?

The states with the most birth centers are also states that have had birth center licensure the longest and have Medicaid reimbursement for birth centers. The goal of this bill is to decrease hardships by increasing families' access to midwifery care - especially those most impacted by perinatal health inequities. Increased access for families also supports birth center sustainability.

Three birth centers that were part of the coalition have had to shut down since working on this bill because they could not get reimbursed by Medicaid. They could not get reimbursed by Medicaid because Medicaid requires birth centers to be licensed for reimbursement. This bill will help birth centers open and stay open.



5. IS THERE A RISK OF NEW RESTRICTIONS COMPROMISING MIDWIFERY PRACTICE?

No. Providers and families will have the same autonomy they have now to choose who will attend their birth. Midwives who do not want to operate a birth center within the birth center licensure parameters, can still offer midwifery services.

6. WHO WILL BENEFIT FROM OR BE IMPACTED BY BIRTH CENTER LICENSURE?

Few people are able to access boutique birth centers that operate outside of insurance systems. Birth center care should not be a luxury. All people deserve access to all safe birth options. This Birth Center Bill will make it possible for MI birth centers to operate within the insurance model of payment and therefore serve more people. This bill will increase midwifery and birth center access for people most impacted by perinatal health inequities (eg. Black and Indigenous mothers, people of color, and people in rural and low-income communities. At the same time, birth centers will not be forced to bill insurance or Medicaid, so birth centers that operate outside of insurance systems can still do so.

7. WHOSE CONCERNS ARE INCORPORATED?

The coalition was formed specifically to advance the needs of people most impacted by maternal mortality and morbidity, including Black, Indigenous, people of color and rural birthing families. This bill will improve access for these communities. The Coalition was intentional about engaging birth center owners and stakeholders across the state to inform this legislation.

8. HOW DOES THIS SUPPORT HEALTH EQUITY AND ACCESS ?

This bill is about equity and access. Birth center care improves outcomes, enhances the birth experience, reduces disparities and is cost effective. Still there are only eight birth centers in Michigan. States that reimburse for midwifery care have more birth centers.

The Birth Center Bill is a justice response to increase access to midwives and birth centers in Michigan. While there are some birth centers in MI, they are not reimbursed by Medicaid and not accessible to low-income families. In order to be reimbursed by Medicaid, birth centers must be licensed. Licensing birth centers will increase birth center access for all families, including Medicaid eligible families.



9. WHAT WILL THIS BILL CHANGE FOR MICHIGAN BIRTH CENTERS?

Birth center licensure will bring some changes. Birth centers operating without a license will have to become licensed. The bill creates parameters for regulation of birth centers, but does not require national accreditation. Not requiring national accreditation reduces barriers to opening a birth center, especially for underserved communities.

The state will look to American Association of Birth Centers (AABC) and other national standards (American College of Nurse Midwives (ACNM) and National Association of Certified Professional Midwives (NACPM)) in order to assess whether applicants for MI licensure meet the criteria for licensure. For birth centers that did not have to submit to assessment before, having to demonstrate standards will be a change, but we think it is a worthwhile tradeoff.

10. WHAT ABOUT PATIENT AND PROVIDER AUTONOMY?

Patients and providers will still have autonomy – and patient autonomy will increase. Providers can still choose whether or not to practice in a facility and/or to attend families in their homes. Relevant scopes of practice for providers will still apply, and patients will have a variety of options for their births.