

Dear Representative Mitch Greenlick,

We are the owners of Bella Vie Gentle Birth Center. There are two bills we would like to draw your attention to. One is HB 3456 that would require insurance companies in the state of Oregon to follow the affordable care act (section 2301) by mandating that they pay for the services of licensed midwives working in birth centers. The other, HB 3451, would require that the Oregon Health Authority pay birth center facility fees, providing care to a medical assistance recipient in an amount equal to the median cost incurred by the birthing center for such care. Though the bills seem similar, they are actually providing for quite different needs to birth centers in the State of Oregon.

The passage of HB 3456 would stop the practice of Community Care Organization's (CCOs) own medical director or contracting department to make these decision themselves, rather than following the federal mandates in the Affordable Care Act. CCOs not following these mandates has been an expensive and inconvenient factor when staffing most birth centers in the state of Oregon. For us at Bella Vie, it means that the births that we get paid the least for, (medicaid in general pays far less than other insurance companies,) are the most expensive ones as we have to pay our certified nurse midwives (who are in general more costly to employ,) for all of the pregnancy and birth care provided to these women. Since July of 2010, medicaid in all states has been mandated to pay for licensed midwives providing care in birth centers. Despite our repeated attempts at communicating with them, many of Oregon's CCOs have been uncooperative in doing so, stating that they will not pay this provider type until they receive CMS guidance. CMS sent correspondence to the region in 2011, that this mandate should be followed. We have been personally told by an employee at one of the CCOs that they know they are not following the Affordable Care Act. Please help make certain that they are held accountable! Also notable is that this would not cost medicaid more money but it would save our birth center money that is needlessly spent, which would be a welcomed help in this economy.

We offer 1-hr prenatal appointments, compared to the national average of 6-15 minutes. Birth Centers, and midwives in general, boast exceptional birth statistics - lower induction rate, cesarean section rate, vaginal tear rate, lower hemorrhage, pre-eclampsia rate is almost non-existent, and we have far fewer NICU admits. The care that we provide extends beyond routine obstetrical care and has better outcomes overall. This in turn saves money that is spent on costly interventions.

As stated above, HB 3451 would require the Oregon Health Authority to reimburse birth center facility charges at a rate that would cover the expenses of the birth centers. Last year, Bella Vie paid out an additional \$64,000 above what the Oregon Health Authority reimbursed us for the care of women on medicaid. For us, in this economy, the disparity of cost vs. income is far too great to afford. This bill would require that we were paid more appropriately for our facility care. As it currently stands, we are paid the facility fee that was decided on in 1999, however at that time it was paid for each calendar date that a patient was admitted. Now, we are only being reimbursed that same fee per patient admission (so one time for the entire 2-3 day stay). We are paying more for expenses and getting half or one-third of what they deemed appropriate sixteen years ago.

Passage of both of these bills will impact birth centers by allowing us to be paid for the work that we do. It will also impact women and their families, by allowing them this desired option. Every business day, we receive calls from women on medicaid who would like to have care in our birth center. It isn't uncommon for women on medicaid to actually take more care, education and nutritional counseling, and our one-hour prenatal appointments are just what they need to become the educated, healthy, empowered new mothers that they are when they leave our care.

Midwives help preserve and promote wellness. These low income women are able to be supported in pregnancy by midwives. We do not expect to make money on the care we provide, but operating at a loss is not a sustainable option. Please support us by voting "yes" on HB 3456 and HB 3451.

Sincerely,

Desiree LeFave, Practice Manager & Petra Prostrednik, Business Director

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