



## HB 2388: 2021 Bill for Equitable Access to Birth Options & Midwifery Care

**HB 2388** increases equitable access to birth in community-based settings by requiring that insurers negotiate fairly for reimbursement for midwife-attended births in all birth settings, because:

### Community Birth honors consumer autonomy and choice.

- Currently, Birth Center facility fees are rarely and inadequately covered by insurance, leaving fewer birth options for families.
- A 2020 consensus report of the National Academies of Sciences, [Birth Settings in America: Outcomes, Quality, Access, and Choice](#), determined that “Women have the right to informed choice of the birth setting they desire, but to exercise that choice, they must have access to options for birth settings.”

### Community Birth is safe.

- The [WHO Statement on Caesarean Section Rates](#) (2015) reports that cesarean section rates over 10% are not associated with lower maternal and newborn mortality rates. Cesarean sections can cause permanent complications, disability, and death. In 2019, Oregon’s cesarean birth rate for planned hospital births was 29%, and for planned community births it was 5%.
- The [Strong Start for Mothers and Newborns Initiative](#), by the Centers for Medicare & Medicaid Services (CMS), demonstrated that birth centers have lower cesarean rates, fewer preterm births, and fewer low birth weight babies.
- In a pandemic such as COVID-19, access to midwifery care in the community setting conserves hospital resources for those who are sick and reduces infection exposure risk for healthy pregnant people and newborns.

### Community Birth is cost-effective.

- Birth center fees in Oregon range from \$6,000-\$12,000, while uncomplicated hospital births are at least \$18,000.
- CMS has shown that community birth offers better outcomes at lower cost to the health care system.

### Community Birth reduces racial disparities in outcomes.

- Black, Indigenous, and People of Color are two to five times more likely to die around the time of childbirth than white people.
- Community birth can reduce this disparity by providing personalized care and reducing unnecessary cesarean deliveries.
- The [Black Mamas Matter: Advancing the Human Right to Safe and Respectful Maternal Health Care](#) toolkit (2018) calls for policymakers to “ensure access to doula support and midwifery care”.

### Interested in supporting this bill? Contact one of us:

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