



Midwife Lobby Day



Thurs. Feb 15, 2024

MIDWIVES'
ASSOCIATION
OF WASHINGTON STATE

www.washingtonmidwives.org

MIDWIVES'
ASSOCIATION
OF WASHINGTON STATE

Midwife Lobby Day in Olympia, WA

Thursday, Feb 15, 2024!

All visits will have a Team Lead

LEGISLATIVE AGENDA



washingtonmidwives.org/2024



MIDWIVES' ASSOCIATION

OF WASHINGTON STATE

LEGISLATIVE AGENDA WEBINAR 2024



Webinar Agenda:

- **Welcome/Announcements** - 5 min
- **MAWS 2024 Legislative Agenda** - 20 min
- **Logistics** - 10 min
- **Quick Reminders** - 3 min
- **Questions** - 5+ min
- **Concluding Remarks** - 2 min
- After: *Team Leads please stick around!*

**MAWS Midwife
Lobby Day**
Thursday,
Feb 15th!

MAWS Legislative Agenda 2024



Kristin Effland, CPM, MA
Co-Chair, MAWS Legislative &
Health Policy Committee



Siri Larson Iverson, LM, CPM, MSM
Co-Chair, MAWS Legislative &
Health Policy Committee



Amber Ulvenes
MAWS Contract
Lobbyist



- **Our Bill: SB 6178**- a technical fix adding Licensed Midwives (LM) to pharmacy statute to clarify LM prescriptive authority.
- **Support the Governor's Budget item** that creates a grant program to improve access to maternity care.
- **Maintain Budget Proviso- License Fee Cap at \$525**



Priority 1

SB 6178



- Limited prescriptive authority for LMs to offer contraceptives and treat common, uncomplicated conditions that occur during the childbearing year became law in 2022.
- SB 6178 fixes an oversight from the original bill—a cross-reference to the midwifery statute in the pharmacy statute.
- The rule-making process on the new statute has lasted nearly 2 years but we are nearing the end with a public hearing set for March.
- Sponsor is Sen Emily Randall, same as our original Rx bill

Priority 2

Governor's budget grant program

- We are requesting that a grant program proposed in the Governor's budget be included in the final state budget.
- \$2,375,000 would be appropriated to improve perinatal care access.
- Planned or recently completed licensed birth centers or rural hospital birthing units could apply.
- Licensed birth centers have priority.



Priority 3

Maintain Existing Licensing Fee Cap Budget Proviso

- Keeps our annual licensing fee capped at \$550 rather than \$3K
- The total cost of the licensing fee cap is \$300,000 for the biennium.
- A study commissioned by the legislature showed capping annual professional licensing fees for midwives more than pays for itself in avoided cesareans alone
- Since this cap was put in place, the licensed midwife workforce has more than doubled, resulting in more families in Washington having access to high-quality, cost-effective care that in turn results in even greater savings to the state budget



**Planned community births meeting
eligibility criteria in WA State**

4.7% Cesarean Birth Rate

85%

**Physiologic
Birth Rate**

93%

**Human Milk
Feeding Rate**

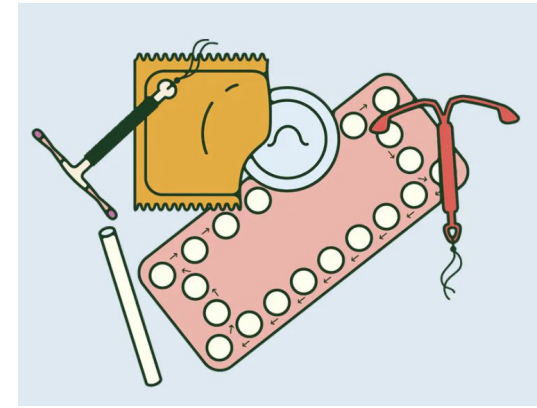
Low rates of complications

(Obstetrics & Gynecology, 2021)

Policy Accomplishments through Advocacy

2022: PASSED our Bill for two License Extension options to enable Washington LMs who wish to complete additional training, the ability to:

- Obtain & administer hormonal and non-hormonal contraception & meds for common perinatal conditions such as antibiotics for infections like mastitis
- Insert contraception after supervised demonstration of skills (ie, IUDs & Inserts)



2023:

- Birth Center Facility Fee (59409SU) **increased to \$2500** (Medicaid), previously \$1743.
- Home birth supplies reimbursement (\$8415) will be **increased to \$500** (Medicaid), previously \$75.

Advocacy Success: Prescriptive Authority Option for Direct Entry Midwives in WA!



Reduce costs and barriers to care by

Eliminating unnecessary additional visits with another provider

Clients might not attend an additional visit with another provider due to cost or insurance obstacles, time, inconvenience, transportation barriers, or new provider trust issues

Photo Credit: Whitney Hardie Photography



Why support these proposed changes to the law?

Requires additional didactic and skills-based training for midwives who want to offer these services

Other health professions employ this approach to practice updates

Consultation and referral will still be employed for refractory or complicated cases

Photo Credit: Stock Image



WE WANT FAMILIES TO HAVE WHAT THEY NEED WHEN THEY LEAVE AN APPOINTMENT WITH THEIR LICENSED MIDWIFE

Help us Remove current gaps to increase access & improve routine care

Families who choose midwives for their care, especially those living in underserved rural and urban shortage areas, benefit

Photo Credit: Whitney Hardie Photography

ENSURE FAMILIES HAVE THE TOOLS TO PLAN THEIR FAMILY SIZE & SPACE THEIR PREGNANCIES

When people must attend an additional visit for a contraceptive prescription or insertion they are more likely to use less effective methods or no method

www.washingtonmidwives.org/2022

Reduce Barriers to Care & Equity

Help us Increase
Preventative Care

Increase Access

& options



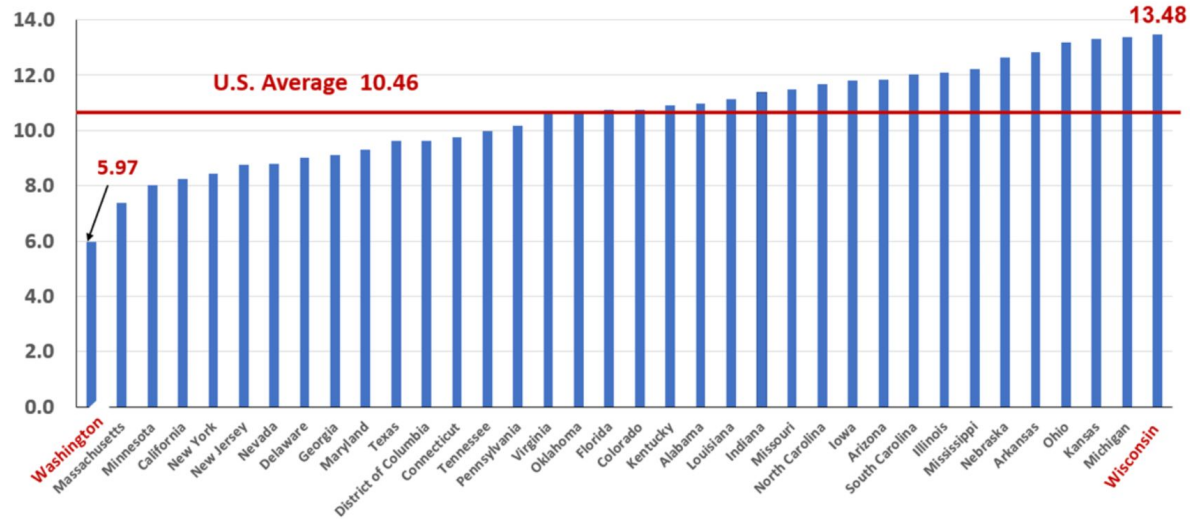
The Seattle Times

& South Seattle



<https://www.seattletimes.com/pacific-nw-magazine/the-case-for-midwives-washington-leads-the-nation-in-midwifery-care-giving-women-an-other-childbirth-option/>

Exhibit 3: Non-Hispanic Black infant mortality per 1,000 births by state 2020–21



Source: CDC Wonder Infant Death File. Note: Only states with at least 20 infant deaths in 2020–21 are shown.

SOURCE:

<https://www.healthaffairs.org/content/forefront/five-questions-raised-new-2022-birth-data>



GLOBAL PERINATAL SERVICES

PREGNANCY, PARENTING & BEYOND

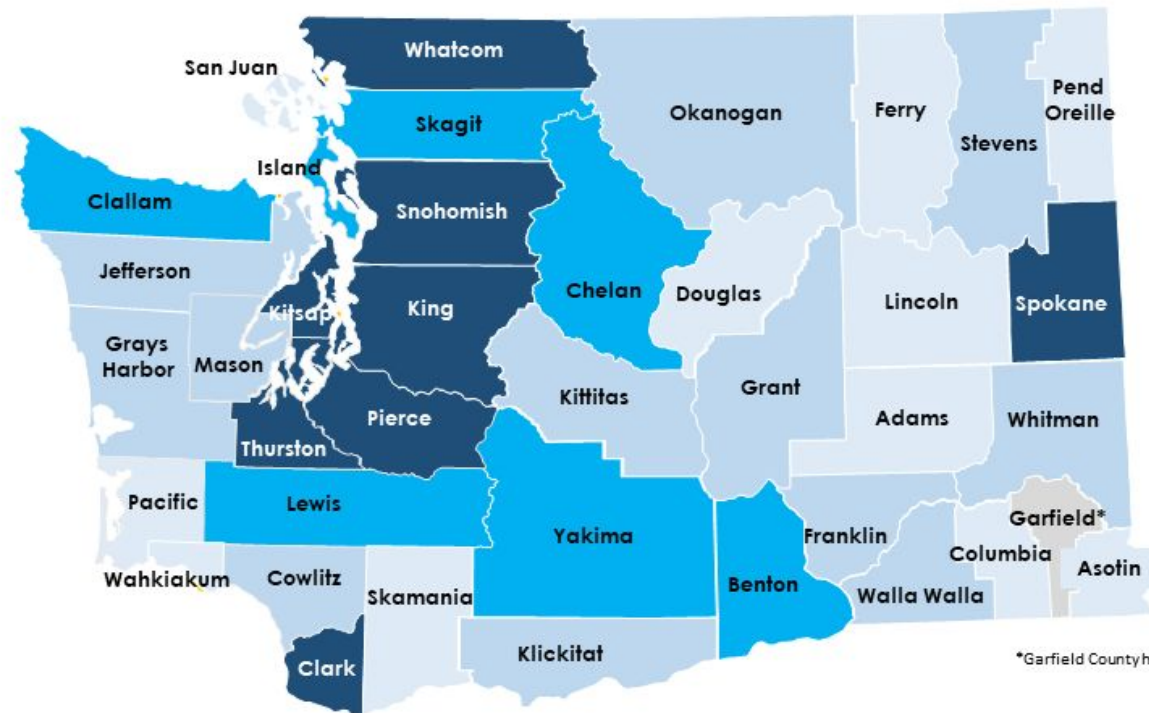


Birth Outcomes for Planned Home and Licensed Freestanding Birth Center Births in WA State (2021)

Table 3. Perinatal Outcomes

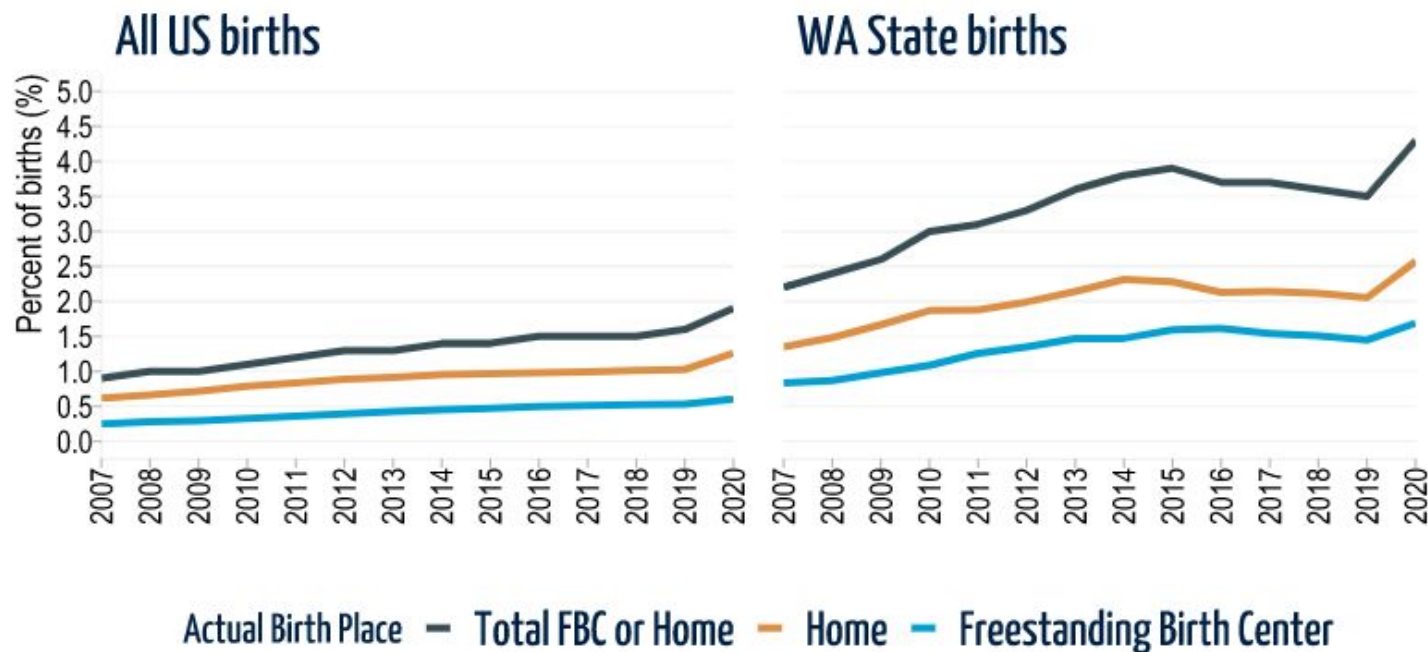
Outcome	Planned Community Births (n=10,609)	% or Rate/1,000 (95% CI)
Hospital admission		
Neonatal transfer to hospital, less than 6 h after birth*	189	1.8 (1.5–2.0)
Hospital admission, more than 6 h–6 wk after birth	245	2.3 (2.0–2.6)
Neonatal birth weight [†]		
SGA birth weight less than the 10th percentile	548	5.2 (4.9–5.7)
LGA birth weight greater than the 90th percentile	1,927	18.4 (17.6–19.2)
Neonatal complications		
NICU admission [‡]	237	2.2 (2.0–2.5)
Severe perinatal morbidity or mortality [§]	44	0.4 (0.3–0.5)
Exclusive breastfeeding at discharge from midwifery care (6 wk)	9,744	93.0 (92.5–93.5)
Perinatal death [¶] after the onset of labor (intrapartum and neonatal less than 7 d)	6	0.57 (0.19–1.04)
Nulliparous individuals only	4	1.04 (0.26–2.30)
Multiparous individuals only	2	0.30 (0.15–0.74)
Intrapartum fetal death	4	0.38 (0.09–0.75)
Neonatal death (to less than 7 d)	2	0.19 (0.09–0.57)

Deliveries by Licensed Midwives 2019-2021



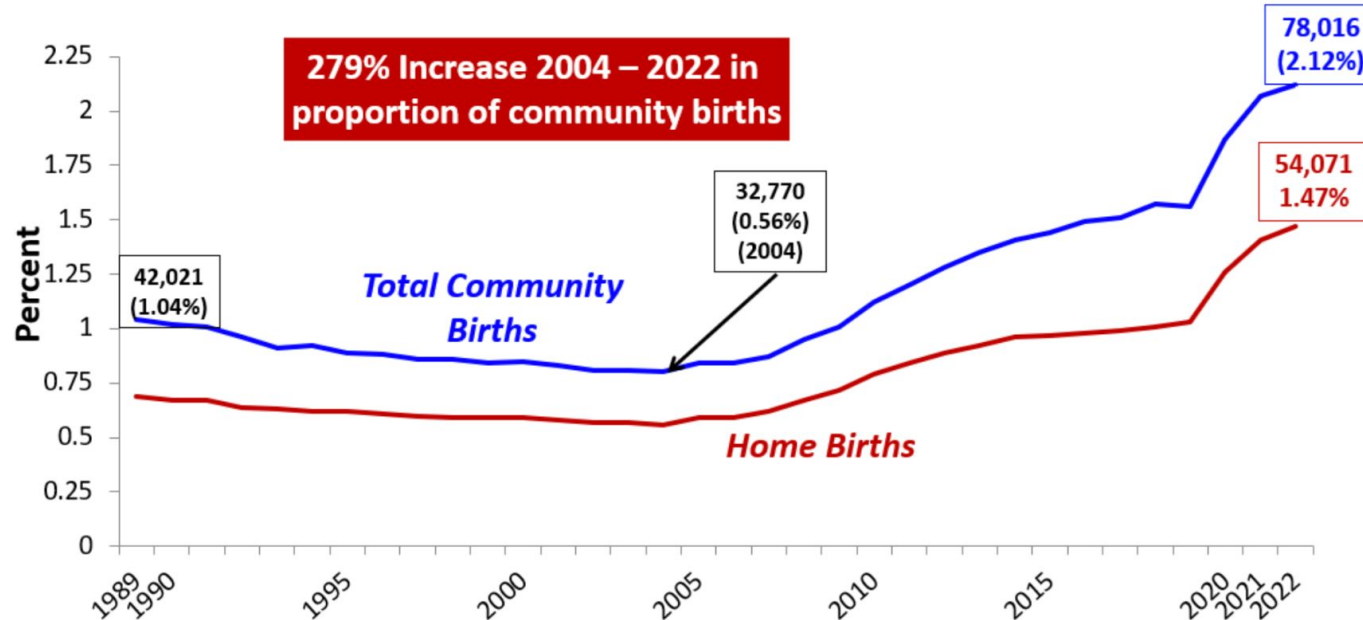
*Garfield County had no deliveries by Licensed Midwives

Trends in community birth in Washington State



Sources: United States Department of Health and Human Services (US DHHS) Centers for Disease Control and Prevention (CDC).
Nativity public-use data 2016-2020. CDC Wonder Online Database. Accessed Nov 15, 2021.

Exhibit 6: Home births as a percentage of total community births in the US, 1989–2022



Source: Annual National Center for Health Statistics reports on births CDC Wonder natality files. Note: Total community births = home births and birth center births.

SOURCE:
<https://www.healthaffairs.org/content/for-efront/five-questions-raised-new-2022-birth-data>

LICENSED MIDWIVES IN WASHINGTON STATE

Washington's Licensed Midwives (LMs) are part of our healthcare system



3500+ births per year
(more than 4 percent of all births)
are attended by the **175+ licensed midwives** in Washington State.



Work in the state's 20+
licensed **freestanding birth centers and in homes.**



Can accept most insurance,
including Medicaid. Liability insurance
is available (1M/3M policies).

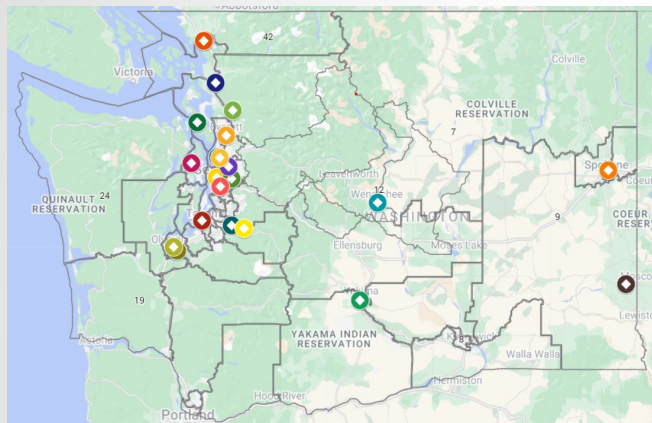


Licensed and regulated by
the **Washington State Department of Health.**



Attend an accredited **3-year midwifery education program or the equivalent.**
Programs meet or exceed requirements set by the International Confederation of Midwives and the North American Registry of Midwives.
Must attend a minimum of **100 births** under supervision during clinical training.

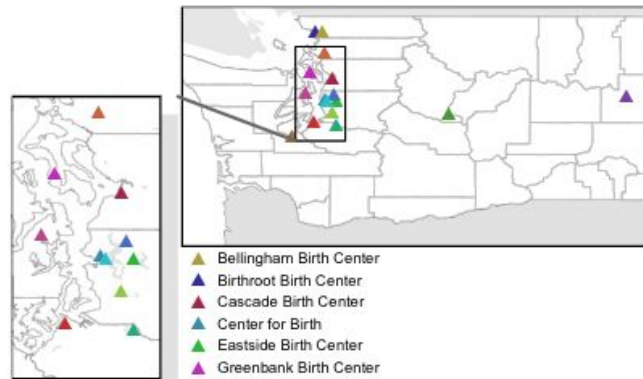
WA Birth Centers 2023 vs. 2017



- | | | |
|---------------------------------------|--|---|
| ◆ Bellingham Birth Center | ◆ Moonrise Birth Center | ◆ Sprout Birth Center & Natural Health |
| ◆ Birthroot Midwives and Birth Center | ◆ Mount Vernon Birth Center | ◆ The Birth Cottage |
| ◆ Cascade Midwives & Birth Center | ◆ Puget Sound Midwives & Birth Center | ◆ The Birth House |
| ◆ Center For Birth | ◆ Rolling Hills Midwives & Natural Family Medicine | ◆ The Birthing Inn |
| ◆ Community Birth Center | ◆ Seattle Home Maternity Service | ◆ The Special Delivery Co |
| ◆ Eastside Birth Center PS | ◆ Spokane Midwives Home & Birth Center, PLLC | ◆ True North Birth Center |
| ◆ Greenbank Birth Center, PLLC | | ◆ Watershed Birth Center |
| ◆ Lakeside Birth Center | | ◆ Wenatchee Midwife and Childbirth Center |



Freestanding Birth Centers Washington State



- ◆ Bellingham Birth Center
- ◆ Birthroot Birth Center
- ◆ Cascade Birth Center
- ◆ Center for Birth
- ◆ Eastside Birth Center
- ◆ Greenbank Birth Center
- ◆ Lakeside Birth Center
- ◆ Mount Vernon Birth Center
- ◆ Puget Sound Birth Center - Kirkland
- ◆ Puget Sound Birth Center - Renton
- ◆ Salmonberry Birth Center
- ◆ Seattle Birth Center
- ◆ Seattle Home Maternity Service Childbirth Center
- ◆ Spokane Birth Center
- ◆ The Birth House
- ◆ The Birthing Inn
- ◆ Wenatchee Childbirth Center

Other Bills We are Supporting:

[HB 1889](#)

- Allowing persons to receive professional licenses and certifications regardless of immigration or citizenship status.

[HB 2350](#) / [SB 6172](#) **These bills died, but budget work is still going.**

- Establishing a birth doula bill reimbursement rate and professional licensing processes.

[HB 1655](#) / [SB 6161](#) **These bills died.**

- Address inflationary costs for small health clinics, requiring health carriers to annually adjust the compensation offered to health care providers not employed by hospitals

Related Resources

Health Affairs Report

<https://www.healthaffairs.org/content/forefront/five-questions-raised-new-2022-birth-data>

Washington State MMR Report

<https://doh.wa.gov/sites/default/files/2023-02/141-070-MaternalMortalityReviewPanelReport-2023.pdf?uid=63fe2001dc845>

Seattle Times

<https://www.seattletimes.com/seattle-news/health/local-midwife-opens-was-first-black-owned-birth-center/>

ACOG Green Journal Article: WA Home & Birth Center Data

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8522628/>

Value of Midwifery Care

https://www.washingtonmidwives.org/uploads/1/1/3/8/113879963/policy_briefs_evidence_argument_s_for_scaling_up_midwifery_to_improve_perinatal_outcomes.pdf

DOH Cost Benefit Study

https://www.washingtonmidwives.org/uploads/1/1/3/8/113879963/midwifery_cost_study_10-31-07.pdf





Relevant Resources Published by local Birth Workers :

Journal of Midwifery & Women's Health

www.jmwh.org

Innovations from the Field

Prescriptive Authority for Direct Entry Midwives in Washington State: Increasing Client Access to Contraception

Britney Zell¹, CPM, MSM, LM , Kristin Effland², CPM, MA , Mercedes Snyder³, CPM, LM, Karen Hays², CNM, DNP, ARNP (ret.) , Wendy Gordon², CPM, DM, MPH, LM 

Improving health and achieving health equity includes access to sexual and reproductive health care for all populations, especially those most in need. However, access to life-saving and life-affirming contraception with an individual's chosen perinatal provider can be impeded by restrictive regulations that limit scope and practice authority. This is especially true for the majority of community and direct entry midwives in the United States who have historically been unable to legally provide effective contraceptive methods. Recently, licensed midwives in Washington state were the first in the nation to achieve prescriptive authority, enabling their clients to directly obtain contraception and access to medications for common prenatal and postpartum conditions. Sustained advocacy efforts in the state's capitol enabled the Midwives' Association of Washington State to build relationships over time with legislators and government agencies to achieve this long-term goal. We present a successful midwifery-led innovation that achieved scope expansion for licensed midwives whose practice authority was limited by restrictive laws. Lessons learned are described and strategies offered to aid midwives and their advocates in other locales who want to improve health equity and access to contraception. Midwives are well positioned to provide this essential care to individuals living in underserved rural and urban areas and those from historically marginalized communities, but their ability to do so is limited by restrictive legislation.

J Midwifery Womens Health 2024;0:1 © 2024 by the American College of Nurse-Midwives.

Keywords: contraception/family planning, health equity, health policy, midwifery professional issues, sexual and reproductive health, licensed midwives, Certified Professional Midwives

Full Text
Share Link:

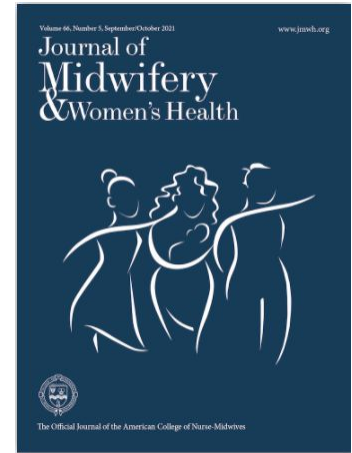
<https://onlinelibrary.wiley.com/share/author/ZDPX4YNYDAKJAJRJVPW9?target=10.1111/jmwh.13606>

Relevant Resources Published by local Birth Workers :

Increasing Access to Medications and Devices for the Care of Low-Risk Childbearing Families: An Analysis of Existing Law and Strategies for Advocacy

Kristin J. Effland CPM, LM, MA✉, Karen Hays CNM, DNP, ARNP, Britney A. Zell MSM, Tara K. Lawal MS, RN, Rhonda L. Grantham, Megan Koontz CPM, MM

First published: 26 August 2021 | <https://doi.org/10.1111/jmwh.13275>



Birth

Medication Access & Midwifery Integration: An Example of Community Midwifery Advocacy for Access in Washington State, USA

Open Access <https://onlinelibrary.wiley.com/doi/10.1111/birt.12523>

Published Dec 14, 2020

So much Relevant Research from WA Birth Workers!



Insights into Practice and Policy

Could Education Be the Best Galactagogue? Development and Content Validation of Provider and Patient Checklists to Promote Lactation Among Black Parents

Trinita Gorbunova, MA, CLC¹, Jennifer Segadelli, JD, MSM¹,
Nancy Anderson, MD, MPH¹, and
Cristina Ciupitu-Plath, MSc, DrPH¹



Journal of Human Lactation
1-5
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DOI: 10.1177/08903344231172989
journals.sagepub.com/home/jhl
Sage

Journal of Midwifery & Women's Health

www.jmwh.org

Innovations from the Field

The Birth Bundle Project: A Rainier Valley Midwifery-led Collaborative Care Initiative Offering Patients and Providers a Paradigm Shift to Impact Health Equity

Tara K. Lawal¹, DNP, MS, RN, Jodilyn Owen¹, MA, LM, CPM, Andi Garcia Brown^{1,2}, BA, Kristin J. Effland³, MA, LM, CPM



Full Text:

<https://onlinelibrary.wiley.com/share/author/J3AVDV3245QRVTU5TNUE?target=10.1111/jmwh.13571>

So much Relevant Research from WA Birth Workers!

Augur, M., Ellis, S. A., & Moon, J. (2022). The Early Care Model for Initiation of Perinatal Care: "I Actually Felt Listened To". *Journal of Midwifery & Women's Health*, 67(6), 735-739.

Levine, A., Souter, V., & Sakala, C. (2022). Are perinatal quality collaboratives collaborating enough? How including all birth settings can drive needed improvement in the United States maternity care system. *Birth (Berkeley, Calif.)*, 49(1), 3.

Nethery, E., Schummers, L., Levine, A., Caughey, A. B., Souter, V., & Gordon, W. (2021). Birth outcomes for planned home and licensed freestanding birth center births in Washington state. *Obstetrics and gynecology*, 138(5), 693.

Schedule for Midwife Lobby Day

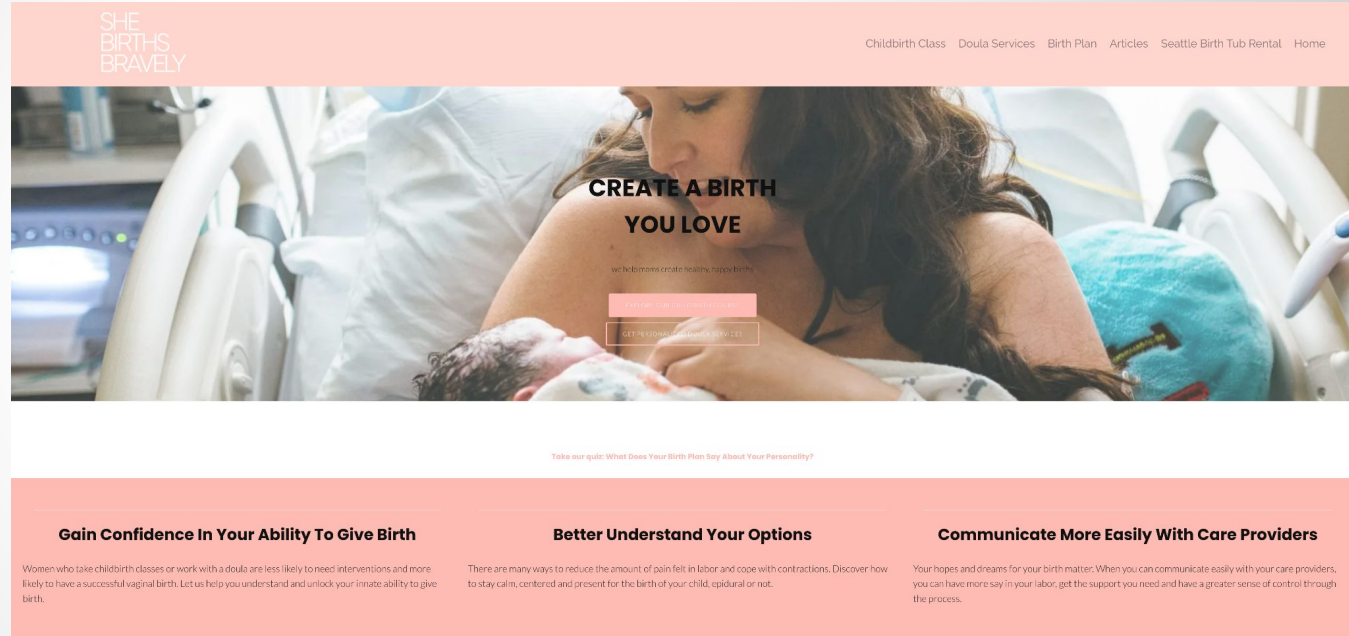
MAWS Lobby Day ~ Thursday, Feb 15th

- 8am: Briefing at Amber's house (our lobbyist):
 - 1610 Water St SW Olympia, WA 98501
 - From there, you will follow your team lead to appointments; also, basecamp
- Time TBD: Group photo in LEG rotunda
- Noon: Lunch option at Amber's, Order ahead by TODAY!
And Venmo @washingtonmidwives
- After Lobbying (4/5pm): Gather for Debrief:
 - RSVP needed for head count by Monday! Apps will be provided thanks to She Births Bravely!
 - Drinks, & limited dinner menu will be available to order



Thank You Very Much to our Sponsor!

- Breakfast
- Apps at Debrief!



SHE BIRTHS BRAVELY

Childbirth Class Doula Services Birth Plan Articles Seattle Birth Tub Rental Home

CREATE A BIRTH YOU LOVE

we help birthers create healthy, happy births

[Learn More](#)

[Get Personalized Birth Plan Now!](#)

[Take our quiz: What Does Your Birth Plan Say About Your Personality?](#)

Gain Confidence In Your Ability To Give Birth

Women who take childbirth classes or work with a doula are less likely to need interventions and more likely to have a successful vaginal birth. Let us help you understand and unlock your innate ability to give birth.

Better Understand Your Options

There are many ways to reduce the amount of pain felt in labor and cope with contractions. Discover how to stay calm, centered and present for the birth of your child, epidural or not.

Communicate More Easily With Care Providers

Your hopes and dreams for your birth matter. When you can communicate easily with your care providers, you can have more say in your labor, get the support you need and have a greater sense of control through the process.

<https://shebirthsbravely.com/>

Logistics



- Order lunch by **TODAY** & RSVP for debrief (drinks/dinner) by **Monday**
- Please Complete our quick Form if you need to cancel
- Day of Group Text Option (WhatsApp)
 - Stay on at end for help if needed
- Wear a purple scarf if you want!
- All Details can be found in this Doc:
<https://docs.google.com/document/d/13romL-zB1youZ9IAGkEaqkrFODfBRG8TPslyJFaFBr8/edit>

Day of Reminders



MIDWIVES' ASSOCIATION
OF WASHINGTON STATE

Midwife Lobby Day

Thursday, Feb 15, 2024!

LEGISLATIVE AGENDA



[washingtonmidwives.org/2024](https://www.washingtonmidwives.org/2024)



MIDWIVES' ASSOCIATION
OF WASHINGTON STATE

Midwife Lobby Day

Post-Visit Response Sheet

Feb 15, 2024



Please Complete one Form after each Visit

<https://forms.gle/LSnmrCZEgAUTAzLi7>

If you have never been to a Lobby Day



Watch our pre-recorded VIDEO for:

- Logistics including parking info (Note no Dash bus)
- Lobbying Tips
- Why Lobby Day is So Important

www.youtube.com/watch?time_continue=4&v=6PsXM2jn7Ps

If you like to feel overprepared (Documents):

- The 9 Steps of a Lobby Day Visit
- Reading to help you prepare
- Schedule, Links & Resources
- LM Fact Sheet

www.washingtonmidwives.org/lobbyday



Quick Reminders:

- We will do our visits in teams so you can just observe if you want
- VIDEO for more info:

https://www.youtube.com/watch?time_continue=1&v=6PsXM2jn7Ps&feature=emb_logo

- Have fun!



Eternal Reminder to also
update your contact info at:
<https://maws.wildapricot.org> &
click on the icon to login.



MAWS is so grateful to our consumer members!



Gratitude

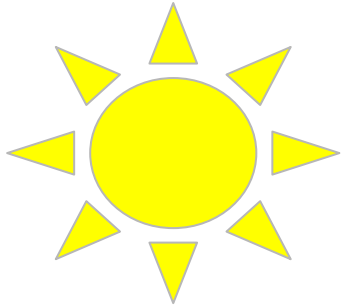
So many thanks!
Especially:



- [Amber Ulvenes](#), our lobbyist, who puts so much of her heart, brain & time into this works for us than she has to & she opens her home to us!
- [To all of you](#) for being here and being engaged despite all that is going on!
- MAWS Legislative and Health Policy Team who meets weekly from October through May and every other week during the rest of the year. Come join us!

Thank You!

Questions?



The
future is
bright &
beautiful!



Thanks for joining us today and
see you in Olympia on Thursday,
Feb 15, 2024!

Check your email or the MAWS
website for the most up-to-date
information about Lobby Day
www.washingtonmidwives.org

Keep up the good work in the
field!

*And Team Leads please stick
around!*

