



March 5, 2019

The Honorable Andrea Salinas
Chair, House Health Care Committee
State Capitol
Salem, Oregon 97301

RE: House Bill 2845 – Birth Centers

Dear Representative Salinas and members of the committee:

Providence Health & Services has been committed to serving women and families in the Northwest for over 160 years. We work hard to meet the needs and preferences of women in our community, while maintaining safe, high-quality standards of care. We work with a variety of providers across different settings – including contracting with four of the nine birthing centers accredited by the Commission for the Accreditation of Birth Centers in the state.

As participants on the work group that has been discussing this issue for nearly a year, Providence is grateful for the leadership showed by Rep. Keny-Guyer and the changes that have been made to address some of our concerns. As proposed, there remain a few issues that we would like the committee to consider before moving this proposal forward.

Birthing center reimbursement methodology

HB 2845 would require insurers to reimburse birthing centers using a similar methodology to that used for reimbursing hospitals, even though the cost and organizational structures of birthing centers and hospitals differ greatly. Providence would propose retaining the existing flexibility for insurers and birthing centers to agree upon reimbursements that best meet the needs of the community without increasing the costs for patients.

Mandated reimbursement

Providence works closely with women to ensure they have access to birth attendants and locations that best meets their needs. Our networks provide access to highly skilled physicians and certified nurse midwives in a variety of settings, including hospitals and birthing centers.

As proposed, HB 2845 would require insurers to reimburse direct entry midwives. Oregon only recently imposed minimal training requirements for direct entry midwives and required them to obtain a state license to practice¹, in an effort to increase quality and patient safety. Even with the state mandated training and licensure requirements for direct entry midwives, the gap between the education and training requirements for direct entry midwives and certified nurse midwives (CNM) is substantial. Since

¹ HB 2997 passed during the 2013 session

the state also requires² birth certificates to record the planned place of birth and attendant type, we would recommend that the state evaluate this data before mandating broad reimbursement requirements.

Thank you for the opportunity to provide comments and we look forward to further discussion.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Gluckman', written in a cursive style.

Robert Gluckman, M.D., MACP
Chief Medical Officer for Providence Health Plans

² HB 2380 passed during the 2011 session