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October 29, 2024

Robert Goldstein, MD, PhD, Public Health Commissioner Massachusetts Department of Public Health

250 Washington Street

Boston, MA 02108

RE: Birth Center Regulations 105 CMR 140.000, 105 CMR 130.000, 105 CMR

142.000

Dear Dr. Goldstein,

Thank you for the opportunity to comment on these proposed regulations for freestanding birth centers in Massachusetts. The American Association of Birth Centers (AABC) holds national expertise and decades of experience in the safe operation of birth centers. We are available to consult with the state DPH or to provide information or resources as needed in your work to license birth centers in Massachusetts.

AABC supports the comments submitted by the Bay State Birth Coalition and Zev Colsen, CPM. Additionally, we would like to highlight the following points.

Deemed Status for Accreditation – AABC recommends that birth centers accredited by the Commission for the Accreditation of Birth Centers (CABC) be granted deemed status. CABC accreditation is an extensive review process that assures a birth center is operating in compliance with the national *Standards for Birth Centers.* Accredited birth centers are recognized in the ACOG / MSFM Levels of Maternal Care.

Birth Attendant and Clinical Director– Recommend language such as “licensed maternity provider” in lieu of listing all the types of providers. This will allow the regulations to remain current should another credential gain a pathway to licensure, such as the Certified Midwife (CM).

Birth Assistant – The AABC Standards for Birth Centers and the Freestanding Birth Center Model State Regulations (long form) do not delineate requirements for birth assistants beyond the requirement for at least two

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persons currently trained in basic life support services (CPR) and neonatal resuscitation (NRP).

Birth assistants are not required to be RNs because it is not needed to provide safe care in freestanding birth centers. Birth assistants work under the direct supervision of the midwifery provider. It is essential that birth assistants be appropriately trained to assist the midwifery provider in labor, birth and postpartum periods. Data from 40 years of birth center experience show that the birth center model provides safe, satisfying, high quality care for childbearing families.

Determination of Need – Recommend that the regulations are explicit that birth centers are exempt from a Determination of Need requirement. Exempting birth centers from this requirement will reduce the barriers and burdens that this process presents to birth centers. The AABC Position Statement on Certificate of Need is available at [https://www.birthcenters.org/position-statements.](https://www.birthcenters.org/position-statements)

AABC has developed resources for states developing birth center regulations. We recommend the Department of Health review the AABC Toolkit: Best Practices in Birth Center Regulations. It provides materials that define key terms, review common regulatory barriers and introduce model regulatory language to align birth center licensing with best practices and national standards.

Access the toolkit at [https://www.birthcenters.org/products/toolkit-regs.](https://www.birthcenters.org/products/toolkit-regs)

Thank you for the opportunity to comment on these proposed regulations for licensing birth centers. We are available to answer any questions you may have about these or other changes in the future. Our hope is that these new regulations preserve high quality evidence-based care that promotes increased access and decreased disparities.

Respectfully,

Kate E Bauer, MBA Jill Alliman, DNP, CNM, FACNM

Executive Director Chair, AABC Government Affairs Committee