October 24, 2024

To Whom It May Concern,

On behalf of CHOICES Center for Reproductive Health, I write to express our support for the Massachusetts Department of Public Health’s ongoing revision of birth center guidelines. As an organization dedicated to providing comprehensive reproductive healthcare, including midwifery-led care, we commend your efforts to revise these guidelines to reflect the evolving scope of midwifery practice and birth centers.

We understand that the draft guidelines prohibit certain practices in birth centers, including abortion. This is found in Section 140.906: “Prohibited Practices” under item B: “(B) The following practices are prohibited in a birth center:(1) Surgical proceduresincluding, but not limited to**,** forceps delivery, tubal ligation, **abortion**, or Cesarean section.” While our Memphis clinic no longer provides abortion care due to the Dobbs decision, we offered these services until August 2022 and continue to provide abortion care at our clinic in Carbondale, Illinois. Our experience has shown that midwives are well-equipped to provide safe, compassionate, and effective abortion care, both procedural and medical, in alignment with state law and patient needs.

We strongly urge the Department to **remove abortion from the list of prohibited practices in birth centers**. In Massachusetts, certified nurse midwives (CNMs) and nurse practitioners (NPs) are legally authorized to provide procedural abortion care following a 2020 ROE Act. This care also *must* be covered by insurance, especially for low-income people. So our Massachusetts colleagues point out that MassHealth must revise 130 CMR 457.000 that establishes the requirements for the provision and payment of freestanding birth center. Specifically. 457.408: “Noncovered Services Section (A) surgical procedures such as forceps delivery, tubal ligation, **abortion**, or cesarean section” By allowing birth centers to offer and be reimbursed for abortion services, the Department and state would support the provision of holistic, person-centered care that aligns with the philosophy of midwifery.

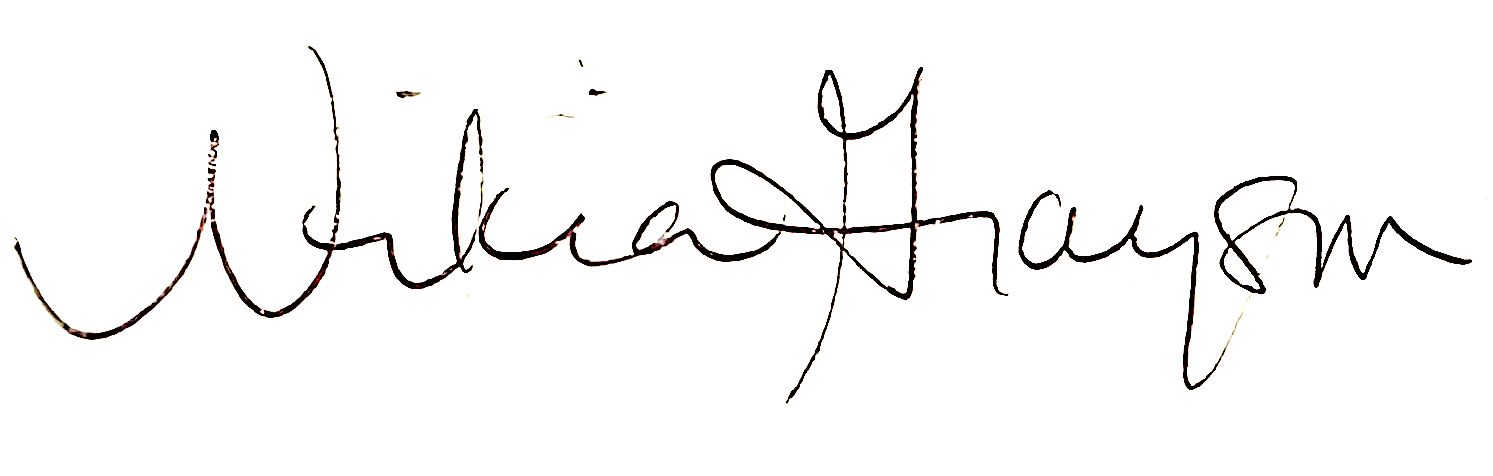
Our midwives have seen the profound impact of providing abortion care in a community-based, midwifery-led setting. Birth centers are spaces that foster trust, empowerment, and person-centered care, making them ideal environments for patients seeking comprehensive reproductive health services. Expanding abortion access in these settings ensures that people receive care in a familiar, supportive, and compassionate space, thereby improving patient experiences and outcomes.

Additionally, denying birth centers the ability to offer abortion care undermines both patient autonomy and the full scope of midwifery practice. The inclusion of abortion services in birth centers is essential to upholding reproductive rights and ensuring equitable access to care across communities. Removing abortion from the list of prohibited practices would align with Massachusetts’ existing policies and the broader goal of reproductive justice.

We encourage the Department to embrace this vision of inclusive, patient-centered reproductive healthcare by amending the guidelines to allow abortion care in birth centers. Doing so will support midwives in delivering the full spectrum of reproductive health services, thereby ensuring that all people have access to the care they need in a community-centered setting.

Thank you for your consideration.

Sincerely,



Dr. Nikia Grayson, DNP, CNM, FNP-C, FACNM  
Chief Clinical Officer,

CHOICES Center for Reproductive Health

1203 Poplar Avenue

Memphis, TN 38104