

**Testimony for Public Hearing
Appropriations Committee
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Bill Number: SB 764: AN ACT CONCERNING MEDICAID PROVIDERS

Chairs and members of the Appropriations Committee,

I write in support of **SB 764: AN ACT CONCERNING MEDICAID PROVIDERS**. As a practicing Certified Nurse Midwife in CT, and as the Director of the Nurse Midwifery DNP (Doctorate of Nursing Practice) Educational Program at Fairfield University, I support SB 764. Midwives scope of practice goes beyond attending birth, and midwives provide reproductive, gynecologic, and primary care services; therefore pay parity is crucial in all of these areas.

Certified Nurse Midwives/Certified Midwives should receive equal reimbursement rates as OB/GYNs for the same services at the same rate as OB/GYNs for many reasons: As a Certified Nurse Midwife, I along with my midwifery colleagues, improve access for Women's Reproductive Health in the State of Connecticut to improve maternal and child health outcomes, specifically in communities of color. Having equal reimbursement will save the state money by expanding the use of CNMs/CMs in Connecticut AND will attract and retain new graduates and promote midwifery in Connecticut. There are Women's Health practices that opt NOT to hire CNMs solely because of the current unequal reimbursement. Equal reimbursement would increase the number of midwifery jobs here in our state AND improve women's access to midwifery care. This access is vital if we want to improve maternal and child health outcomes for ALL women. Numerous research studies have shown that women cared for by CNMs/CMs have lower rates of cesarean births, which would be an overall saving in healthcare costs for Medicaid patients here in CT. DSS reimbursement for vaginal birth \$7,870 vs. \$10,973 for cesarean births: a \$3,100 differential. To further articulate the savings, for every 2.1% reduction in cesarean birth rates, the state of CT would save \$1 million dollars. Additionally, multiple studies conclude that midwifery care reduces prematurity rates and low birth weight rates, which decreases NICU admissions, saving the state money as well. **CT is lagging behind other states in the region (Rhode Island, New Hampshire, Vermont, Maine, and Massachusetts) that offer equal reimbursement for CNMs/CMs and OB/GYNs.**

In addition to providing midwifery care to women in CT, I have been the recipient of midwifery care during all 4 of my own children's births. I was not only safely cared for, but supported. The care I have received has been of the highest quality.

For your reference there are approximately 208 licensed midwives in CT. I urge the Committee and Connecticut lawmakers to support SB 764. The time for pay parity for midwives is now. This issue cannot wait for the maternity bundle, and moreover the maternity bundle ignores the other reproductive, gynecological and primary care services midwives provide. Pay parity for all midwifery services through BS 764 is imperative.

Thank you for your time,



Jenna LoGiudice, PhD, CNM, RN, FACNM