A Birth Center Primer for Hospitals: Achieving Seamless Collaboration and Advancing Equity Through Community-Based Care











Learning Series: 6 sessions designed to meet hospital needs and priorities

Session 1: Assessing Readiness and Centering Equity	Friday, September
in Your Hospital's Birth Center Strategy	

Friday, September 8 · 1:00 - 2:30pm EST

Session 2: Developing Eligibility Criteria and Collaborative Care Guidelines

Wednesday, September 20 · 6:00 – 7:00pm EST

Session 3: Designing Transport Workflows and Maximizing Collaboration Across Facilities

Tuesday, October 3 · 1:00 – 2:00pm EST



Thursday, October 19 · 2:00 – 3:00pm EST

Session 5: Preventing and Learning From Sentinel Events

Monday, October 30 · 3:00 – 4:00pm EST

Session 6: Planning and Conducting Effective Emergency Drills for Community Birth Monday, November 13 · 4:00 – 5:00pm EST

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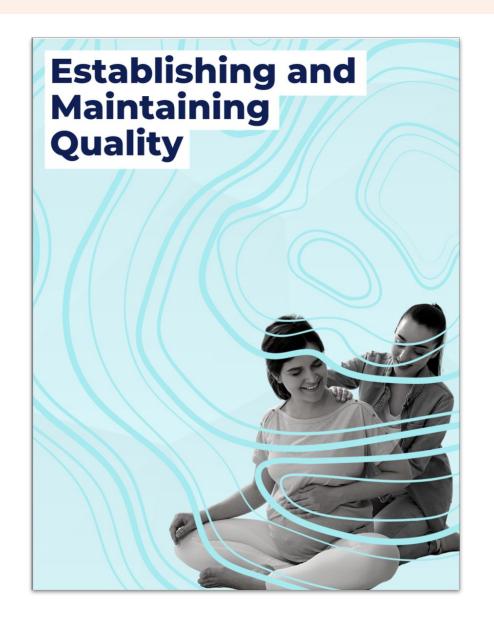


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 - Navigate to <u>A Birth Center Primer for Hospitals: Promoting Seamless</u>
 <u>Collaboration Between Hospital and Freestanding Birth Centers |</u>
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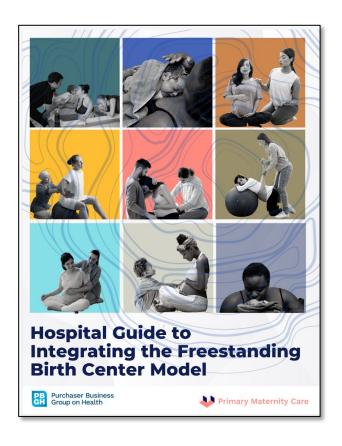
Today's Agenda

- Learning Series Review
- Meet Our Expert Panelists
- Critical Concept Review
- Model Deep Dive
- Q+A

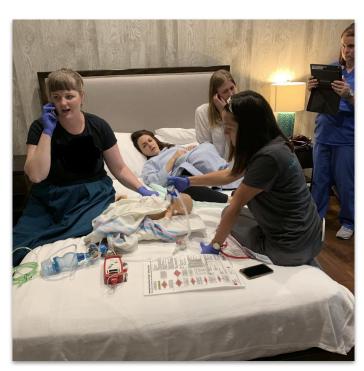


A Comprehensive Program to Drive Integration









Session 4 Beyond Transfer: Exploring Financial, **Programmatic and Administrative Integration Between Birth Centers** and Hospitals

Session Objectives

- Identify potential revenue and efficiency opportunities from deeper integration with community birth providers and facilities, including referral volume, marketing or education/outreach integration, and grant opportunities.
- 2. Articulate ways hospitals can use their power to **promote** sustainability and safety of community birth options.
- 3. Discuss trends in **value-based care initiatives** that integrate community-based services and providers.

Introducing Expert Panel



Dr. Richard Thigpen, MD, FACOG; Vanderbilt University Medical Center



Leseliey Welch, MPH, MBA; Birth Center Equity, Birth Detroit



Ashley Couse, INHC, CBE, CD; Vanderbilt Birth Center / VUMC



Claudia Jennings; Administrative, Billing and Operations Specialist, Primary Maternity Care (Co-facilitator)



Brynn Rubinstein, MPH; Consultant, Primary Maternity Care (Co-facilitator)

Session Concepts + Tools

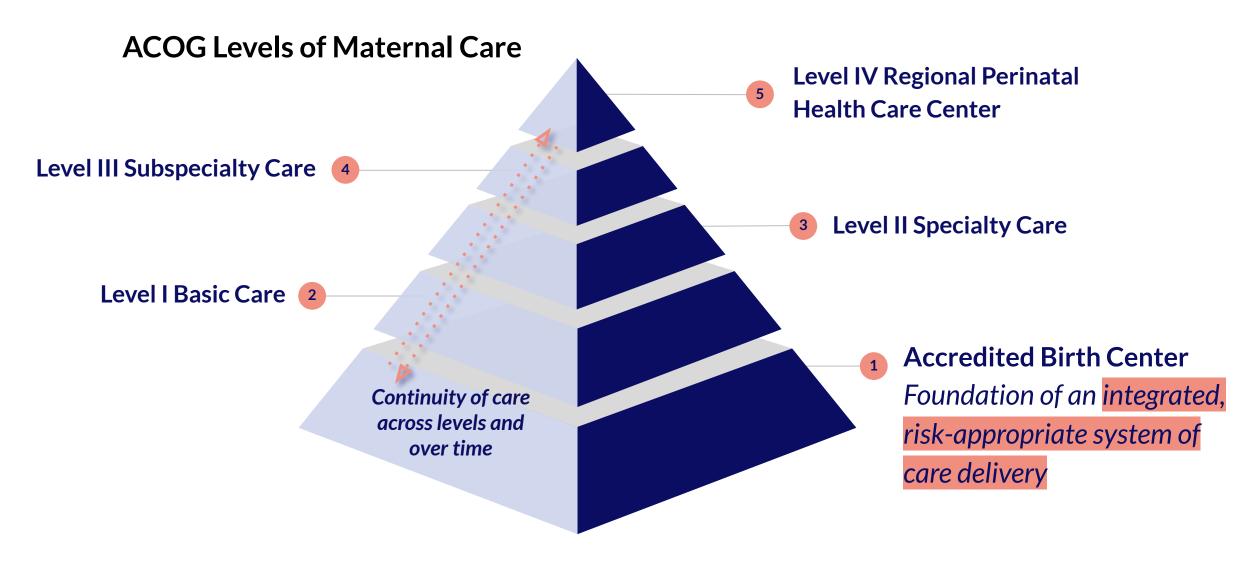
Concept Review

- Levels of care
- Systemic challenges to sustainability
- Revenue and value opportunities
- Model deep dive:
 - Vanderbilt Birth Center +
 Vanderbilt University Medical
 Center

Tools

AABC: "Getting Payment Right: How to
 Unlock High-Value Care Through Appropriate
 Birth Center Reimbursement

Meaningful and Intentional Integration



Integration framework: Birth center as a hub

The birth center is an entry point and hub for other co-located services for a mixed-risk population

Integrated with

OB/GYN Providers

Hospital

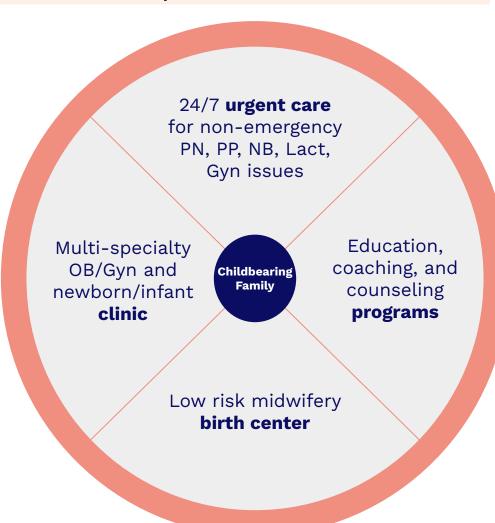
Women's specialty care

Pediatrics

Family practice

Behavioral health

Emergency and non-emergency transport services



Extended with

Community outreach and engagement

Telehealth

Home health

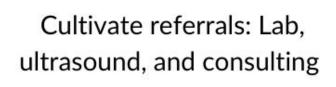
Panel Question

Outside of transfer during a birth, what are ways that birth center clients access hospital services, and vice versa?

Revenue Opportunities

External and internal grants including research, collaborative projects between hospitals and birth centers, and hospital community initiatives

Performance rewards for quality via value based payment



Attract prenatal patients from new populations/catchments

"We cast a wide net for who comes to the birth center. Many of these folks would have never used our collaborating hospital for ultrasounds, labs, etc., or selected to have their care there. We estimate that 75% of our transfers are individuals who would not have delivered at that hospital if they had not come to the birth center."

—Hospital leader in health system that acquired a birth center

Be intentional about realizing value & revenue opportunities







Panel Question

How can hospitals and health systems use their position of power (relative to birth centers) to promote sustainability of community birth options?

Addressing systemic challenges to birth center sustainability

Challenge

Ways Hospital Can Help

Contracting + reimbursement for birthing care were designed around hospitals + physicians

Advocate for fairer compensation for unreimbursed or poorly reimbursed aspects of birth center model

Fee-for-service rewards more intervention + shorter appointments, so hospitals design their services accordingly

Design and staff to accommodate longer appointment times and lower throughput

Without national billing standards, birth centers independently determine which codes local health plans accept.

Include birth center leaders in contract negotiations and discussions

Promoting birth center care in value based arrangements

Cost savings derived from implementing value-based care models should result from improved quality and patient outcomes achieved via midwife-led birth center care, not by paying less for birth center services that are comparable to services delivered at the hospital.

Recommended Actions:

- 1. Conduct robust data collection, including preterm birth, vaginal birth, breastfeeding rates, NICU admission, etc. by provider type and site of service
- 2. Tie payment incentives to quality metrics meaningful to patients and outcomes
- Expand professional services of midwives and the birth center to a mixed-risk population with planned hospital birth
- 4. Designate community-based maternity services as essential preventive and supportive care and ensure they are paid for as part of an enhanced care model

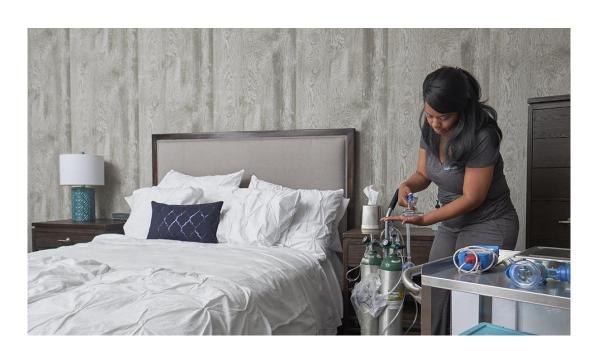
Panel Question

How does administrative (including financial) integration impact patient experience?

Model Deep Dive: Vanderbilt Health System



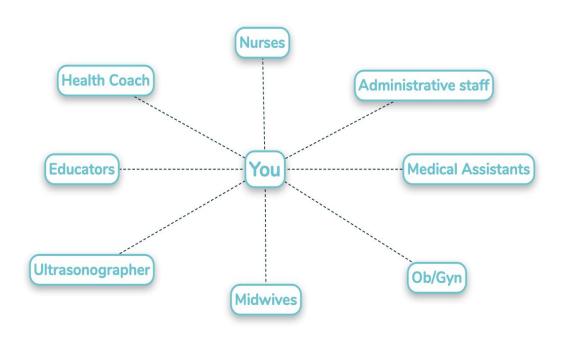
- Learn the expectations of care.
- Learn how to take a stake in your own care.
- Assess where you are now with your health.
- We meet you where you are.



Birth Center Model of Care

Model Deep Dive: Vanderbilt Health System







Crystal CNM

Grace CNM



Taylor RN

Taneesha CNM











Kristin CNM

Ebby RN









Ellie RN

Carlyn RN



Hannah CNM







Kaitlyn RDMS



Traci RN

Kathleen CNM



Meet the smiles

behind the masks

Gina CNM

Heather CNM





Abbey RN



Una CNM

Haley CNM







Heather



Cylie RN



Janina PSS







Maddye CNM

Donica CNM

Emily CNM

Olivia RN



indra CNM

Breckin







Dr. Thigpen









Jenissa CNM Please let us know if you have...

Phoebe

Questions?

Contact us at: info@primarymaternitycare.com



Revenue Opportunities

What enhanced opportunities does intentional integration drive?

Cultivate referrals: Lab, ultrasound, and consulting



Performance rewards for quality via value based payment

Attract prenatal patients from new populations/catchments

"We cast a wide net for who comes to the birth center. Many of these folks would have never used our collaborating hospital for ultrasounds, labs, etc., or selected to have their care there. We estimate that 75% of our transfers are individuals who would not have delivered at that hospital if they had not come to the birth center."

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Grants from hospital community initiatives
Larger collaborative grants between hospitals and birth centers (HRSA grants)
Research grants