



## 2013 ACNM Benchmarking Project: Summary Data

### 2013 ACNM Benchmarking Report

For the 2013 calendar year data reporting cycle, 234 practices submitted data to the ACNM Benchmarking Project. A total of 232 (24%) practices entered complete data with all six mandatory variables. This represents a 6.4% increase in participation from the 2012 calendar year reporting cycle, and is a record high in terms of the absolute number of practices participating. The data includes a total of 97,158 births and the work of over 979 nurse-midwife/certified midwife (CNM/CM) FTEs. Any practice with a minimum of one CNM/CM who was an active ACNM member was eligible to participate in the data submission process. Participating practices represented a variety of geographic areas including 44 states.

In 2013, Birth Tracks and The American Association of Birth Centers Perinatal Data Registry provided their participants the opportunity to have aggregate, practice level data submitted via a collaborative data merge project. This eliminated the need for manual submission by practices already using these high quality data registries. In 2013, 192 (82%) practices submitted data using the ACNM website portal, 27 (11%) of practices submitted using Birth Tracks and 15 (6%) of practices submitted using the AABC PDR.

#### The 2013 ACNM Benchmarking data represents:

- 82,214 vaginal births
- 3,827 trials of labor after cesarean (TOLAC). (*Reporting an average vaginal birth after cesarean (VBAC) success rate of 76.7%*)
- 1,287 homebirths (17% increase from 2012)
- Approximately 3,658 birth center births (128% increase from 2012). (*83% of which occurred in CABC Accredited Birth Centers- a 22% increase from 2012*).
- Over 78,696 hospital births
- \$122 million dollars of billed services
- Over \$51 million dollars of provider salaries

**Of the 184 practices that reported practice site location:**

- 51% are urban
- 32% are metropolitan
- 16% are rural

**Of the 218 practices that reported practice type:**

- 67% are independent, midwife-led practices
- 14% are shared practice models with exclusive midwifery caseloads
- 10% are combined practice models with physicians
- 8% did not report a model
- 1% reported "other"

**When classified by the total number of births per year:**

- 65 high birth volume-( $\geq 500 - 999$  births/yr)
- 78 moderate birth volume-(200 – 499 births/yr)
- 61 medium birth volume-(51-199 births/year)
- 24 low birth volume-( $<50$  births/year)

**Of the 204 practices reporting medical risk status category of the practice caseload:**

- 16% were complex medical/obstetrical risk
- 56% were moderate medical/obstetrical risk
- 28% were low medical/obstetrical risk

**PRIMARY third party payer types:**

- 41.7% private insurance
- 31.8% Medicaid
- 22% unreported
- 2.4 % self-pay
- 2% managed-care

**Of the 203 practices that reported primary practice sites:**

40%-Community-based hospitals, 40%-Tertiary care hospitals,

13%-Homebirth setting, 7%-Birth center