|  |  |  |
| --- | --- | --- |
| (Ideas to ask) | **Positives** | **Negatives** |
| **Internal Factors*** Human resources
* Physical resources
* Financial resources
* Activities and processes
* Past experiences
 | **Strengths*** Others that have achieved this OR (how did they do it?)
* Low cost/low intervention
* Low C/S rate
* Good outcomes and patient satisfaction
* Early discharge from triage/hospital
* CMS looking for patients satisfaction, reduced LOS, outcomes
 | **Weaknesses*** System inefficiency
* Tension between MMC and revenue generation (longer visits)
* Hard to identify contact people (contacts)
* Lack of leadership/business skills in education
 |
| **External Factors*** Future trends - in your field or the culture
* The economy
* Funding sources (foundations, donors, legislatures)
* Demographics
* The physical environment
* Legislation
* Local, national, or international events
 | **Opportunities*** Physicians (if share same pot of money and midwives ↑reimbursement to 100% 🡪 will increase the pot for everyone
* Hospital benefits, lower resource utilization
* OB shortage
* Insurance companies
* MC (CMs) outcome driven (midwives can point out good outcome)
* BID/Lahey merger ↑bargaining power
 | **Threats*** Physicians (do not want to lose money)
* MC ↑asking for reimbursement when they have ↓funding
* MMS lobby power
 |

**SMART Action Plan:**

* Printed resources (script)
* Keep talking/networking
* Kill them with kindness
* Send flowers on…
* Know who your players are
* Know billing department

**GOAL: 100% reimbursement in MA equal pay for procedure**

We will achieve 100% reimbursement\* for CNMs in MA from Medicaid by Dec, 31st 2020.

\*100% reimbursement = CNM reimbursed @ 100% physician rate for the same services