

AMERICAN MIDWIFERY CERTIFICATION  
2015 Annual Report

The mission of the American Midwifery Certification Board (AMCB) is to protect and serve the public by leading the certification standards in midwifery. AMCB fulfills its mission through three primary activities: a national examination for initial certification as a nurse-midwife (CNM) or midwife (CM), a re-certification program for CNMs or CMs to assist certificants to fulfill their professional responsibilities to maintain competence, and through professional discipline.

AMCB annually evaluates changes it made to the fee structure in 2012 and was pleased to find that there continues to be no impact on its financial stability. AMCB will continue to seek ways to minimize financial burden to certificants whenever possible.

Year of Recertification	# Of Certificants Eligible to Recertify	% Recertified	# Chose to be put in Retirement Category
2006	551	93%	
2007	495	93.7%	
2008	458	92.1%	
2009	427	93.4%	
2010	402	90%	
2011*	1563	84.4%	87 (5.6%)
2012	2748	77.4%	115 (4.2%)
2013	2063	64.3%	100 (4.8%)
2014	2680	69.5%	147(5.5%)
2015	3120	84.3%	54 (1.7%)

\*Beginning in 2011 all certificants were required to begin recertifying. Before this, anyone certified prior to 1996 did not have to meet recertification requirements.

Since the move to all time-limited certificates, a small portion of the certificant pool continues to retire. AMCB continues to anticipate that the recertification pool will grow as the number of new certificants increases and the proportion of retired CNMs decreases or levels off (Table 1).

The national certification exam (NCE) has now been administered via computer-based testing (CBT) for 11 years. In collaboration with AMCB's testing partner, Applied Measurement Professionals (AMP), the NCE continues to be available 52 weeks of the year, 5 days each week and at least one Saturday per month, at 170 sites serving all 50 states of the U.S. Candidates for certification are able to take the examination at their convenience at any of AMP's testing sites as soon as their application is approved. Candidates receive official pass/fail results at the conclusion of their examination. AMCB issues wallet-sized certification cards in addition to certificates for ease in documenting current certification.

The number of newly certified CNMs and CMs decreased slightly, compared to 2014 by 2.3 percent, however, the number remains 22 percent greater compared to 2000 (Table 2).

Year	First Time Candidates	Total New CNM/CM	New CNM	New CM	Annual % Increase or (Decrease) in new CNM/CM
2000		458	451	7	N/A
2001		428	422	6	(6.6%)
2002		402	400	2	(6.1%)
2003		340	335	5	(15.4%)
2004		356	341	15	4.5%
2005	297	299	293	6	(16%)
2006	307	295	291	4	(1.3%)
2007	281	287	285	2	(2.7%)
2008	342	320	318	2	10.3%
2009	332	325	323	2	1.5%
2010	371	344	339	5	5.5%
2011	419	398	392	6	13.6%
2012	488	474	467	7	16%
2013	542	539	536	3	12.1%
2014	579	571	563	8	5.6%
2015	561	558 $\xi$	547	11	(2.3%)

Note: Total New CNM/CM includes successful first time and repeat testing  
 $\xi$  Overall increase in new CNM/CMs since 2000 is 22%

Traditionally, since 2000, AMCB has not reported on the number of total number of candidates who have taken the exam, or pass/fail statistics, however, changes in reporting requirements by AMCB's accrediting body, the National Commission for Certifying Agencies (NCCA) require that this information be included. Therefore, in this report additional information is included in Table 3 to meet these requirements. Future reports will continue to include this information.

Year	Total Candidates Examined	Pass Rate	Fail Rate	Total Number of CNM Certified	Total Number of CMs Certified	Total Number of Certificants
2015	610	560/91.8%	50/8.2%	11,111	99	11,210

Over the past four years, AMCB participated in meetings with the US Midwifery Education, Regulation, and Association (US MERA) workgroup. This workgroup has met through members of a steering committee throughout the year. These meetings, and the formation of a number of committees to address specific issues, have led to productive discussions on how to expand access to high quality midwifery care and physiologic birth for all women in all birth settings in the United States in alignment with global standards of the International Confederation of Midwives (ICM). Along with AMCB, the group included leaders from ACNM, ACME, MEAC, MANA, NACPM, and NARM. These meetings have led to the potential for collaborative efforts between CNM/CM organizations and CPM organizations.

The 2015 AMCB Board of Directors was composed of the following individuals:

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