

# OVERDUE

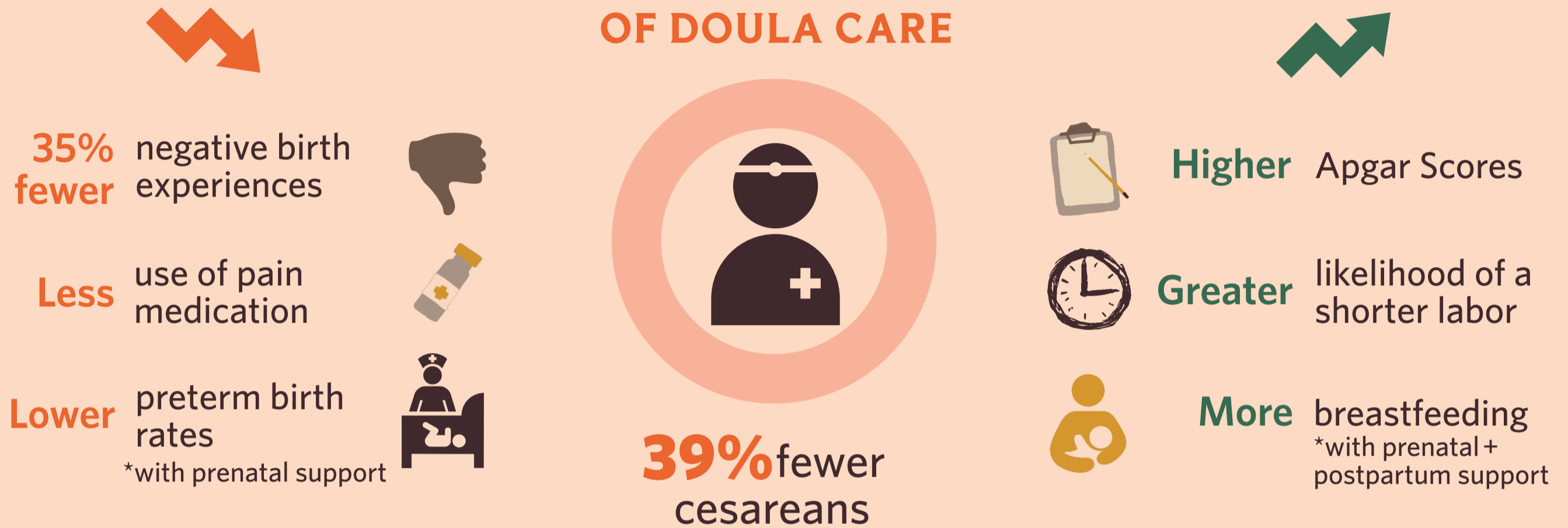
## MEDICAID & PRIVATE INSURANCE COVERAGE OF DOULA CARE

Updated 2019



*If a doula were a drug, it would be unethical not to offer it.* Adapted from John Kennell, MD<sup>1</sup>

### HEALTH BENEFITS OF DOULA CARE<sup>2,3,4</sup>



*Continuous labor support by a doula is "one of the most effective tools to improve labor and delivery outcomes."*  
American College of Obstetricians and Gynecologists and Society for Maternal-Fetal Medicine<sup>5</sup>

### WHAT DOULAS DO<sup>6</sup>

Doulas are trained and experienced in providing support before, during, and after birth

*Doulas and family members work together as a support team.*

#### PROVIDE INFORMATION



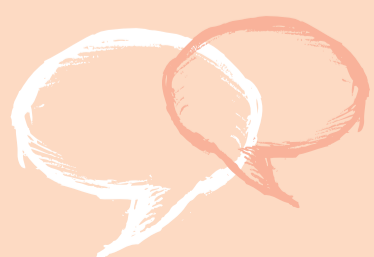
- Resources
- Referrals
- Answers to questions about labor + birth

#### GIVE EMOTIONAL SUPPORT

- Relaxation techniques
- Encouragement
- Calm environment



#### ENCOURAGE COMMUNICATION



- Positive dialogue
- Informed decision-making
- Self-advocacy

#### OFFER HANDS ON SUPPORT

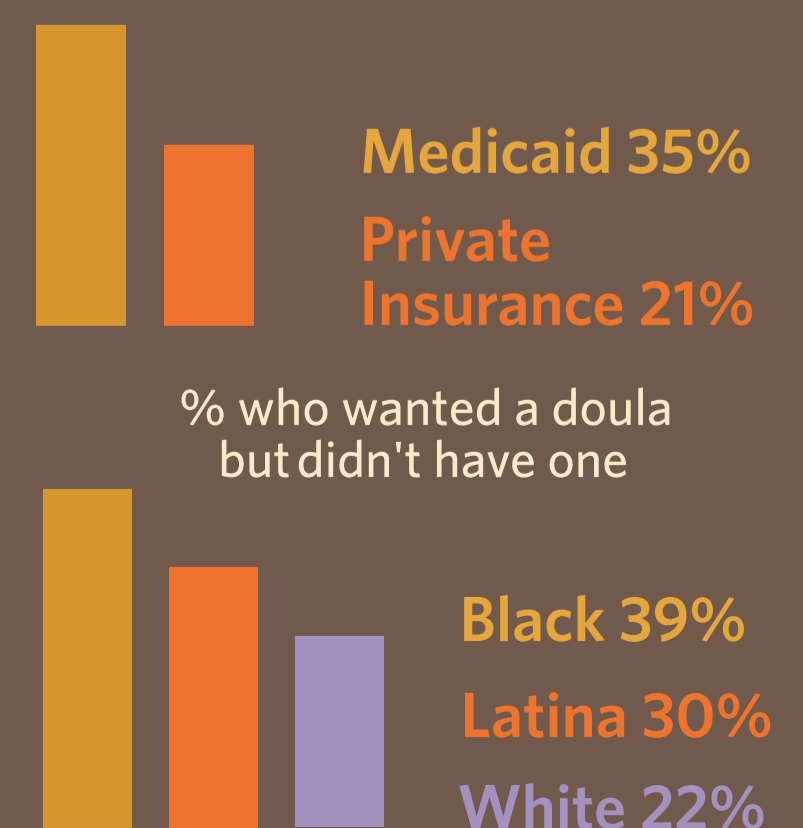
- Walking + position changes
- Massage
- Breastfeeding support



### UNMET NEED<sup>7</sup>

Doulas attended just **6%** of births in 2011-12

Black, Latina + Medicaid-enrolled women were more likely to want doula support... but not have it



# SPENDING

In 2013, hospitals billed

**\$126 billion<sup>8</sup>**

for maternal & newborn care



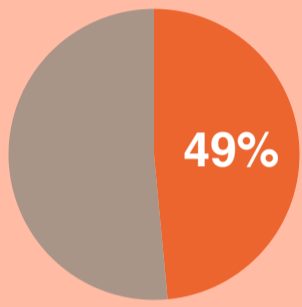
## MORE IS SPENT

on childbirth care than any other type of hospital care<sup>9</sup>

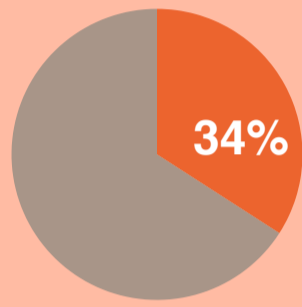
A small reduction in cost per birth would have a

## BIG effect

Maternal + newborn hospital stays account for<sup>10</sup>



of Medicaid hospital stays



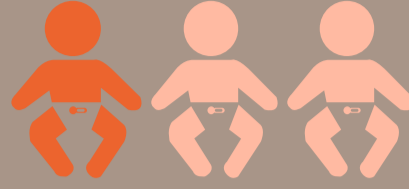
of privately insured hospital stays

# POTENTIAL COST SAVINGS



## 1 in 3 births

is by cesarean<sup>11</sup>



56% more than in 1996 but this hasn't made moms or babies healthier!<sup>5</sup>

Cesarean births cost

**50% more**

than vaginal births<sup>12</sup>

Over **\$9,537** more for private insurance



Over **\$4,459** more for Medicaid

(includes all maternal and newborn care costs)

Doulas lower spending by:



### DECREASING

- 1st + repeat cesareans
- epidurals
- complications
- chronic conditions
- preterm births

### INCREASING

- breastfeeding

Decreasing cesareans by

**39%**

would save more than



for private insurance



for Medicaid

each year

# STRATEGIES TO EXPAND DOULA COVERAGE



Federal or State legislation establishing doula coverage



Centers for Medicare and Medicaid Services guidance and technical assistance to states



Review by U.S. Preventive Services Task Force for inclusion as a recommended service



State Medicaid coverage of doulas as "non-licensed" service practitioners or through a DSRIP or 1115 waiver

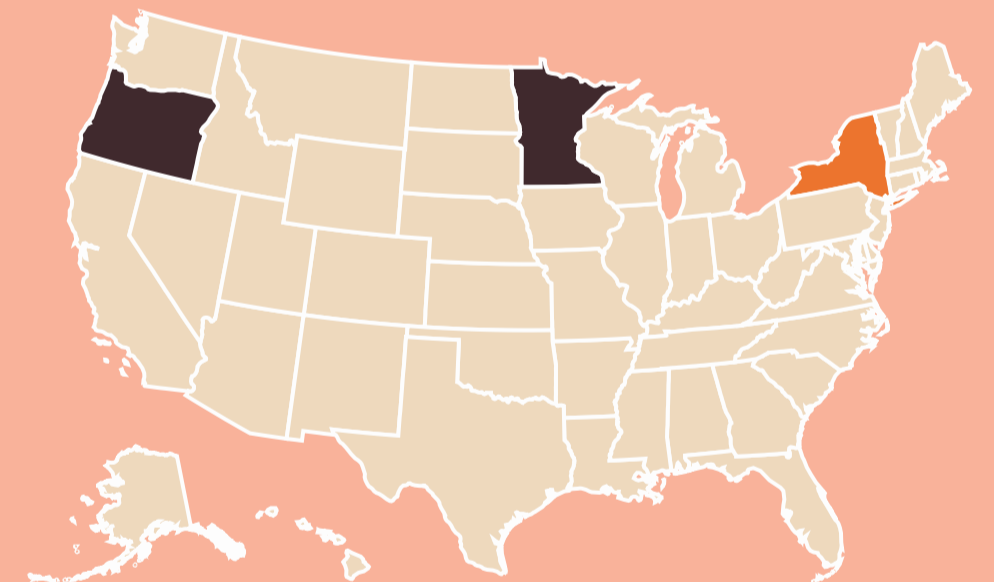


Agreements between insurers/managed care organizations with doula agencies/groups



Including doula coverage within innovative payment and delivery systems

## In the States



**Oregon + Minnesota** have implemented Medicaid coverage of doula support

**New York** has a pilot program currently in just one county

**Many States** are pursuing legislation to increase access to doulas to reduce disparities in care and outcomes for women of color and low-income women.<sup>13</sup>

LEARN MORE IN THE ISSUE BRIEF ON INSURANCE COVERAGE OF DOULA CARE at

**Every Mother Counts**

[www.everymothercounts.org/resources/](http://www.everymothercounts.org/resources/)

**National Partnership for Women & Families**

[www.nationalpartnership.org/doula](http://www.nationalpartnership.org/doula)

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**EVERY MOTHER COUNTS**