**OVERDUE**

**MEDICAID & PRIVATE INSURANCE COVERAGE OF DOULAS CARE**

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

**HEALTH BENEFITS**

- 9% drop in use of pain medication
- 31% less use of Pitocin
- 34% fewer negative birth experiences
- 40 minutes shorter labor
- 12% more spontaneous vaginal births
- Higher Apgar scores
- Increased breastfeeding with prenatal and postpartum doula care

**WHAT DOULAS DO**

Doulas provide emotional, informational & physical support before, during & after birth for childbearing women and their partners.

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

- Family members have long-term, close relationships with the mother-to-be.
- Doula is trained and experienced at providing labor and birth support.

**INFORMATION**

- Prenatal & postpartum resources & referrals
- Answering questions about labor and birth

**EMOTIONAL SUPPORT**

- Relaxation techniques
- Encouragement
- Calm environment

**COMMUNICATION**

- Foster positive communication with doctors, midwives & nurses
- Support informed decision making
- Help women advocate for themselves

**HANDS ON SUPPORT**

- Walking & position changes
- Massage
- Hydrotherapy
- Breastfeeding support

**UNMET NEED**

Just 6% of women had labor support from a doula in 2011-12

Of those who did not use a doula, more vulnerable women were more likely to have wanted doula support

- Medicaid 35%
- Private Insurance 21%
- Percent of women who wanted - but did not have - doula support

- Black 39%
- Latina 30%
- White 22%
In 2013, hospitals billed $126 billion for maternal & newborn care.

1 in 3 births is by cesarean but this hasn't made moms or babies healthier!

Cesarean births cost 50% more than vaginal births.

$9,537 more for private insurance
$4,459 more for Medicaid
(includes maternal and newborn care costs)

Reducing spending on childbirth care by even a small percentage would have a big effect!

Maternal & newborn stays account for
- 49% of Medicaid hospitalizations
- 34% of privately insured hospitalizations

Doulas lower spending by
- Decreasing cesareans (an average of 28%)
- Repeating cesareans
- Epidurals
- Complications
- Chronic conditions
- Increasing breastfeeding

Decreasing cesareans 28% would save
- $174 billion for private insurance
- $659 million for Medicaid each year

STRATEGIES TO EXPAND COVERAGE

- Federal or State legislation mandating 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 via "non-licensed" service practitioner rule, DSRIP or 1115 waiver
- Agreements between insurers or managed care organizations with doula agencies or groups
- Including doula coverage within innovative payment and delivery systems

2 States Oregon + Minnesota have passed legislation leading to Medicaid coverage of doula support

LEARN MORE IN THE 2016 ISSUE BRIEF ON INSURANCE COVERAGE OF DOULA CARE at

Choices in Childbirth www.choicesinchildbirth.org/our-work/advocacy-policy/doulacoverage/  
Childbirth Connection http://transform.childbirthconnection.org/reports/doula/

Selected References:

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