



DOULAS

The Texas Doula Association recommends that the Texas legislature consider Medicaid (Health and Human Services) reimbursement for Perinatal Doula Services during this legislative session (the 88th-R 2023).

RECOMMENDATIONS FOR DOULAS:

The American College of Obstetrics and Gynecology list doulas as one of the top recommendations for improving health care. “Evidence suggests that, in addition to regular nursing care, continuous one-to-one emotional support provided by support personnel, such as a doula, is associated with improved outcomes for women in labor.” The Texas Maternal Mortality and Morbidity Review Committee also recommends Implementation of the multidisciplinary recommendations from the American Heart Association’s Call to Action: Maternal Health and Saving Mothers: A Policy Statement from the American Heart Association including incentivizing “quality improvement and the provision of historically underused, services (eg, maternal health education, home visits, midwifery care, and doulas) and to deprioritize the provision of unnecessary care.”

WHAT DO DOULAS DO:

- Doulas are non-medical members of the care team, who provide emotional, physical, and educational support during pre-conception, pregnancy, labor and birth, and 12 months postpartum.
- Doulas provide families with research and education to support positive birth outcomes.
- Doulas are trained to know what is “normal” in pregnancy and postpartum, so that if the birthing person experiences symptoms outside of normal, doulas refer families back to health care providers.
- Doulas support the whole family, including dads/partners, grandparents, adoptive parents, and other family and friends who will support the care-taking of the family.

EVIDENCE FOR DOULAS:

- 25% decrease in the risk of Cesarean; the largest effect was seen with a doula vs. continuous support person (39% decrease)
 - 8% increase in the likelihood of a spontaneous vaginal birth; the largest effect was seen with a doula vs. continuous support person (15% increase)
 - 10% decrease in the use of any medications for pain relief
 - Shorter labors by 41 minutes on average
 - 38% decrease in the baby’s risk of a low five minute Apgar score
 - 31% decrease in the risk of being dissatisfied with the birth experience; mothers’ risk of being dissatisfied with the birth experience was reduced with continuous support provided by a doula or someone in their social network (family or friend), but not hospital staff
- (Evidence-Based Birth <https://evidencebasedbirth.com/the-evidence-for-doulas/>)

TEXAS DOULA REIMBURSEMENT ACT : HB 3394

- This bill was written by doulas in the Texas Doula Association, with consultation from other states who have implemented doula reimbursement for Medicaid and private health care recipients.
- Includes 12 visits for families prenatally through one-year postpartum
- Includes processes for implementing Medicaid reimbursement across the state, and includes scope of doulas, reimbursement, credentialing, registry, and more.

BY SUPPORTING DOULA CARE FOR ALL MEDICAID MEMBERS, TEXAS WILL IMPROVE PHYSICAL AND MENTAL HEALTH OUTCOMES, REDUCE COST TO THE HEALTH SYSTEM, AND INCREASE ACCESS TO COMMUNITY-BASED CARE FOR FAMILIES