

## Sample Policy Memo for MPA Grad School Application-Jackie Vaughn

### Policy Recommendation:

### *Medicaid Reimbursements for Birth Doulas in Washington State*

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#### Proposed Policy

The disparities in Black and Indigenous perinatal health outcomes compared to White pregnant people are due to racism and intersecting systems of oppression<sup>1</sup>. Because racism is embedded in the healthcare system, we need alternative solutions to support pregnant and birthing people. An alternative to licensed health care providers is a birth doula. Birth doulas are trained to provide non-clinical emotional, physical, and informational support for people before, during, and after labor and birth<sup>2</sup>. Medicaid reimbursements for birth doulas is a policy that would make birth doulas accessible to Medicaid-eligible families. The average cost of a doula can range from \$750 to \$1,500, making accessing doula care inaccessible for many low-income communities. Creating a pathway for birth doulas to bill Medicaid in the state of Washington, this would increase access to a proven strategy for reducing health disparities for some of our most vulnerable families in Washington.

#### Potential Impact

- ☐ It is proven that “people with doula support are two times less likely to experience birth complications and four times less likely to have a low-birth-weight baby.”<sup>3</sup> That is due to patient education, doula advocacy on behalf of the patient, and the continued presence of doulas throughout labor and delivery.
- ☐ Access to doula care is also a tool for addressing the disparities in perinatal health outcomes due to racism. “While doulas cannot eliminate individual and institutional racism in the medical system, doulas can help improve the maternal health experience and address health disparities by reducing the impacts of racism and racial bias on pregnant and postpartum people of color.”<sup>4</sup> Mainly when doulas from their community can provide culturally congruent care.
- ☐ Doula care not only improves health outcomes but it also improves the birthing experience. Through continuous care and attention to comfort details, it is described as a “person-centered care model.”<sup>5</sup>

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<sup>1</sup> U.S. Department of Health and Human Services. (2021, April 26). *Systemic racism, a key risk factor for maternal death and illness*. National Heart Lung and Blood Institute. Retrieved February 1, 2023, from <https://www.nhlbi.nih.gov/news/2021/systemic-racism-key-risk-factor-maternal-death-and-illness>

<sup>2</sup> ADVANCING BIRTH JUSTICE: Community-Based Doula Models as a Standard of Care for Ending Racial Disparities Executive Summary 2019

<https://everymothercounts.org/wp-content/uploads/2019/03/Advancing-Birth-Justice-CBD...>

<sup>3</sup> Uplifting Birth Justice Through Doula Care. Birth Justice Network and Forward Together. 2019.

<https://blackmamasmatter.org/wp-content/uploads/2019/03/2019-Doulas-Access-1.pdf>

<sup>4</sup> How Can Doulas Help Address Racial Disparities in Care?. National Health Law Program. 2020

<sup>5</sup> Guarnizo, T., Clark, M., CCFadmin, Whitener, K., Gardner, A., & Park, E. (2021, December 15). *Lessons learned from early state experiences using Medicaid to expand access to Doula Care*. Center For Children and Families. Retrieved February 1, 2023, from <https://ccf.georgetown.edu/2021/12/15/lessons-learned-from-early-state-experiences-using-medicaid-to-expand-access-to-doula-care/>