



NEW YORK STATE SENATOR

Samra G. Brouk

## Brouk Releases Report on State of Doula Care in New York

SAMRA G. BROUK August 22, 2023

| ISSUE: **DOULA CARE**

### Report Provides Recommendations for Implementation of Doula Care Medicaid Benefit

**ALBANY, NY** - New York State Senator Samra Brouk (D-Rochester) has released a report summarizing the state of maternal health and doula care in New York. The report contains policy recommendations to expand access to doula care, which is linked to improved maternal health outcomes, particularly for Black and Brown birthing people. Brouk, who welcomed her first child in 2022, credits doula care for her successful delivery and postpartum experience in a state where Black women are significantly more likely to die as a result of pregnancy-related complications than their white counterparts.

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*“There is no shortage of data that demonstrates the dismal state of maternal health in New York, particularly for Black and Brown women. We also know what a tremendous resource doula care can be for improving maternal health outcomes,” said Senator Samra Brouk. “As a Black mother, I can tell you that my doula made an incredible difference for me, my daughter and my family. New York has an obligation to do everything possible to promote maternal and infant health, and we can no longer make excuses—we must take steps to ensure that every family who wants a birth doula can access one.”*

**MATERNAL HEALTH**



Maternal mortality, which is the death of a woman during pregnancy, at delivery, or soon after delivery has [decreased by more than 30% worldwide](#) over the last twenty years. However, this progress is not seen in the United States, where maternal mortality has continued to increase—[rising by nearly ten percent](#) from 2020 to 2021 alone. New York State is one of the more dangerous states to give birth, [ranking 23rd overall in maternal mortality](#) when compared to other states.

For Black women in New York, the rate of maternal mortality is [51.6 per 100,000 births](#). For white women, the rate plummets to only 15.9. This disparity is especially heartbreaking, as data from the [New York State Department of Health](#) indicates that nearly 80% of these deaths are preventable, with racial discrimination playing a critical role in worsened health outcomes. This disparity [persists](#) across income and education levels.

Brouk's report outlines the three leading causes of maternal death in New York as embolism, hemorrhage, and mental health conditions. Brouk, who chairs the New York State Senate Committee on Mental Health, has introduced a series of legislation ([S2359](#), [S2039](#), [S7753](#)) designed to combat this crisis. Earlier this year, Brouk successfully secured a \$250,000 investment in this year's state budget to fund a maternal mental health workgroup, which will work to issue policy recommendations to improve access to maternal mental health care in New York State.

## **DOULA CARE**

Doulas are nonclinical professionals who provide physical, informational, and emotional support to the birthing parent and partner. Senator Brouk's report contains compelling data on doula efficacy, specifically with respect to combating maternal mortality. Studies have repeatedly demonstrated that families who use a doula [experience significant benefits](#) for both mother and child, receive a higher quality of care, and achieve cost savings. [The Journal](#)



of Perinatal Education has reported that doula-assisted mothers were 50% less likely to need a c-section and experienced a 25% reduction in the length of labor. To that end, doula support can have a positive effect on maternal mental health, and is associated with reduced rates of anxiety and unhappiness while increasing self-esteem and self-efficacy.

Senator Brouk has made expanding access to doula care a legislative priority (S1867A, S1876). Earlier this year, she hosted a Public Hearing: To receive testimony on how to identify and examine best practices for integrated doulas into New York's maternal healthcare system. Seventeen people testified at the hearing and additional people submitted written testimony. Witnesses agreed that there is an urgent need for New York to take concrete steps to rectify the racial disparities that exist in the state's maternal health systems, and pointed to doulas as a strong solution to improve health outcomes for both mother and baby.

During the hearing, witnesses addressed the benefits and limitations of the New York State Department of Health's Office of Health Insurance Programs Medicaid Doula Pilot Program, started in 2019. The pilot was initially planned for Kings County and Erie County; however, due to low reimbursement rates, the Kings County Pilot did not reach a preferred level of enrollment from local doulas. Under the pilot, 82% of claims are for prenatal visits, 6% are for labor and delivery support and 12% are for postpartum visits. The benefits of these services for patients are clear: 97% of respondents said having a doula improved or somewhat improved their childbirth experience, and 92% rated their doulas as good or excellent. In addition to low reimbursement rates, doulas who participated in the programs expressed a need for administrative support in Medicaid program enrollment.

## **POLICY RECOMMENDATIONS**



Despite the numerous, well-documented benefits of doula care to address maternal mortality and maternal mental health, services remain widely underutilized. In addition, cost has been identified as the **single most significant obstacle** to obtaining doula services nationwide. Doula reimbursement under New York State's Medicaid program would make this type of care more accessible; this is especially important in New York where **nearly half of all births are covered by Medicaid**.

Brouk's report outlines key policy recommendations to expand access to doula care and to address the maternal mortality crisis. The need to pay doulas a competitive, equitable rate for their services is essential to ensuring that doula care is accessible across New York State. Brouk recommends a reimbursement rate of \$1,930 for doula services, in accordance with the proposal submitted by the New York Coalition for Doula Access. This rate, which has earned the support of the City of New York, would cover:

- Eight prenatal/postpartum visits at \$85 each (\$680 with an average visit time of 2 hours)
- Continuous labor support and associated costs at \$1250

The report underscores the importance of "direct and sustainable collaboration" between the state and community-based doula organizations and training programs, and offers recommendations for what such collaboration could look like. Suggestions include regular discussion education and training criteria, developing training materials to aid doulas in navigating the Medicaid billing process, and the creation of culturally competent data collection mechanisms.

Brouk's report also calls for a funding mechanism to support community-based doula organizations with recruitment, training, and administrative work. Without adequate state support and funding, community doula organizations will be unable to effectively implement programs that will truly make Medicaid doula services available to the most



vulnerable people in our state.

Brouk's final policy recommendation is to elevate doulas from "visitor" status in medical and hospital establishments. This change will allow doulas to fully integrate into the birthing team in various healthcare facilities in a way that acknowledges the breadth and importance of their work.