

Testimony in Support of House Bill 2015 House Committee on Health Care

Speaker of the House Tina Kotek April 3, 2017

Thank you for the opportunity to testify today on House Bill 2015.

A doula is professional who provides personal, non-medical support to women and families throughout a pregnancy. They provide uninterrupted support during labor and support women and families throughout the postpartum period.

Doulas provide established, cost-effective services that are proven to combat racial and ethnic disparities in health outcomes for mothers and children. House Bill 2015 builds on previous legislative efforts to ensure pregnant women in Oregon have access to doula services under Medicaid.

In 2011, the legislature requested the ability to reimburse doula services through Medicaid in our original waiver with the federal government. We established the Traditional Health Worker Commission (THW) and embedded traditional health workers, including doulas, in our long-term plans to deliver high-quality, culturally competent care and to achieve Oregon's "Triple Aim" of better health, better care and lower costs.

Unfortunately, we are still falling short of the vision to provide access to culturally specific doula services for Oregonians who want them. We haven't built the workforce necessary to meet the needs of culturally diverse mothers and families: today there are only 33 doulas on the traditional health worker registry. In addition, low reimbursement rates, coupled with expensive certification programs, make recruitment from specific communities exceptionally difficult.

HB 2015 sets the floor for Medicaid (Fee-for-service and Coordinated Care Organizations) at a rate of no less than \$350 for 4 home visits and delivery.

The -2 amendment:

• Adds \$75 for a back-up doula per practice requirements;

- Provides some financial security for prospective doulas and help bolster recruitment efforts:
- Requires the Oregon Health Authority (OHA) to consult the THW Commission on an ongoing basis to revise fee assumptions to address workforce recruitment, retention, and new research;
- Requires the documentation of billing challenges to identify ways to streamline services and payment for individual doulas; and
- Ensures every pregnant woman in Oregon who is eligible for doula services through Medicaid is aware of this benefit.

At the start of 2016 we convened an informal workgroup of stakeholders to outline barriers to service and road blocks to service reimbursement. Since then, we engaged the Oregon Health Authority to bundle doula services into a single service-package and to increase the reimbursement rate. This effort was unsuccessful. HB 2015 -2 represents a continued conversation and a concrete step to supporting this workforce and the mothers and children they serve.

Thank you for taking up this important issue.