The Need

Maternal mortality is far too high in New York and disproportionately affects Black women, regardless of their prenatal care, income and education levels. Preventive and supportive care must be systematically available and easily accessible to lower maternal mortality. Half of pregnancies in New York are covered by Medicaid, making Medicaid a key lever decreasing the number of women who die during pregnancy or childbirth.

New York's maternal mortality rate is on par with the US rate, which is the worst among economically developed nations.

Investments in maternal child health vary greatly by region in the state, leaving many women underserved because of where they live.

Black women in New York are 5 times more likely to die of pregnancy related causes than white women. This disparity is greater than for the US as a whole.

More than 80% of maternal deaths in the US are preventable.
**Maternal Mortality**

**Doulas Improve Outcomes**

Doulas are trained health care workers who support pregnant people before, during, and after pregnancy. Compared with hospital staff, doulas spend **six to eleven times more time** supporting their pregnant clients.

When doulas are part of the birthing team:
- Rate of C-sections **decreases** by 50%
- Use of oxytocin **decreases** by 40%
- Length of labor **decreases** by 25%

By reducing the need for medical interventions, doula care **lessens the likelihood of severe complications**. For example, complications such as death, cardiac arrest, blood clots, and infections are three times more common following a C-section.

It is estimated that doula care for patients covered by Medicaid can **save $58.4 million** annually.

**Doula services are reimbursed by Medicaid in**: Florida, Maryland, Minnesota, New Jersey, Oregon, and Virginia. **There are plans to expand coverage to doulas in**: California, Illinois, Indiana, Nevada, Rhode Island, & Washington, DC.

---

**The Solution**

1. **Ensure all women and birthing people on Medicaid have access to doula care** by including doulas as medical service providers for Medicaid recipients and direct the NYS Department of Health to submit corresponding Medicaid amendments and waivers. *(A.5958/S.1190)*

2. **Set reimbursement rates for doula services covered by Medicaid** by establishing a work group. *(A.5465/S.1876)*

3. **Facilitate easier access to doulas** by creating a community directory of doulas serving Medicaid recipients *(A.5435/S.1867)* and requiring maternal healthcare facilities to provide access to doulas and a directory of doulas available at that facility *(A.6168/S.5992)*.

4. **Ensure continuous care** by permitting doulas to be present in the operating room during C-sections *(S.5991)*.

---

*TheChildren'sAgenda*

Rochester, NY

www.childrensagenda.org

Contact: Jeffrey_Kaczorowski@urmc.rochester.edu