February 8, 2022

To: The Honorable Delores G. Kelley, Chair, Senate Finance Committee

Re: Letter of Information - Senate Bill 166 - Maryland Medical Assistance Program - Doula Program

Dear Chair Kelley:

On behalf of the Maryland Hospital Association’s (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 166. This bill raises questions since Maryland Medicaid proposed regulations, supported by the Doula Technical Advisory Group, to create a permanent Medicaid doula benefit.1 Doulas were expected to be eligible to enroll in Medicaid and begin billing for services this month. Two bills introduced this session, SB 503/HB 669 codify the proposed regulations. While perhaps duplicative, these bills align with the recommendations of the Doula Technical Advisory Group in contrast with SB 166.

The Health Services Cost Review Commission allocated $8 million to Medicaid to support maternal and child health goals in the Statewide Integrated Health Improvement Strategy.2 Half of this funding, including the federal match, will be used to create the permanent Medicaid benefit for doula and home visiting services. The reimbursement model allows up to eight prenatal or postpartum services in addition to attendance during labor and delivery, per birthing parent. Each prenatal or postpartum visit would include up to 60 minutes.

Research shows positive outcomes for patients who work with doulas, especially women of color and women with lower socioeconomic status.3 These outcomes include increases in breastfeeding initiation and vaginal deliveries. Allowing Medicaid reimbursement increases access to doulas for patients who otherwise could not afford it.

Maryland hospitals support the role of doulas, but there are many questions about the proposed regulations and legislation. We look forward to working with the legislature to support the state’s intent to grant Medicaid reimbursement for doula services.

For more information, please contact:
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1 Maryland Register (December, 2021)