



To our respected Delegates and Senators for the State of Maryland:

My name is Jessica Kent, and I am the President and Executive Director for The Birthing Circle (TBC), one of Maryland's largest pregnancy, birth, and postpartum nonprofits. One of the cornerstone programs for TBC is our Doula Project, a community doula program supporting low income, marginalized, and high risk families through their birthing journeys. We have approximately 20 doulas on our team, provide services to hundreds of families each year, and serve a majority of the geographic area of Maryland.

As well as running TBC, I am also a doula who has been working full time with these families for four and a half years. I have formal undergraduate education in Politics and Gender Studies, I am a trained Crisis Counselor, a certified labor doula, and a trained postpartum doula and infant care specialist. I have a specialty in Trauma Informed Care, and train other doulas in specialty topics such as the intersections of trauma and birth, cultural competency, and LGBTQ inclusive healthcare. I am also currently writing a full curriculum for Perinatal Community Health Workers and training CHWs in Frederick and Washington County to have this Perinatal specialty.

I am writing today to oppose SB110 as it is currently written.

For two years, I have been working on public health policy research with the goal of having Medicaid reimburse doulas. I have spoken to every state that has currently legislation to this end, and have a workforce group of 15 people, including midwives, nurses, and doulas, and that is majority women of color.

In this research, we have clearly identified that when other states have put forward legislation that is flawed, it is not simply a slower process, but it actually causes outright damage to doulas as a profession, and to birth outcomes as a whole, especially among marginalized groups. I do see similar flaws in SB110, and I hope Maryland legislators may avoid making these same mistakes.

First, to only have listed the handful of accepted certifying agencies is a serious flaw. Under this bill, I personally would not be eligible for reimbursement, despite the fact that I do have a certification as well as years of specific experience, higher level trainings, and that I even train other doulas to serve this population. When other states have attempted to add in more options after the fact, it has not been successful. TBC's Doula Project has reduced cesarean rates for our clients by 50%; this is a massive impact, but this bill would not include the majority of our doulas or clients.

Second, this failure to build in a system where other certifying agencies and work experience and trainings may be "grandfathered in" as eligible will be particularly limiting access to doulas of color, and doulas representing other marginalized groups. If the intent behind this bill is in part to reduce the drastic racial disparities that we see in birth outcomes, we must examine how implementation will affect those demographics. The World Health Organization lists representative perinatal care (being able to choose a provider who is from a similar demographic as you) as a critical recommended step in improving birth outcomes all over the world. We know that the best public health policy experts in the



world recommend this; may our state not take steps that specifically work against that recommendation.

Third, the fiscal note offering \$600 as a reimbursement price is, frankly, insulting. This devalues the work that doulas do, and disincentivizes doulas from serving Medicaid clients, paying \$300+ for a certification, or even being able to do doula work at all and make a living wage. If you are offering less than half of what is the standard rate of doula care in Maryland, how does that send a message to doulas that you support them, or to families that you believe they are worth the care?

As I mentioned above, simply having me in the room at a birth reduces the cesarean rate by 50%. This, at a minimum, saves that family (or the state) over \$3,000 PER BIRTH. I would actually contend that doula care saves even more money, if we also account for the cost of pregnancy, birth, and postpartum complications that doulas affect, as well as reducing emotional trauma during birth and the incurred mental health costs postpartum. I have intervened with families in a way that has literally resulted in saving their babies' lives; yet the value that is given to this invaluable skillset and devoted profession is simply \$600?

Fourth, I do believe that good public health policy should be done well. This bill was not put forth with major Maryland stakeholders included in the writing of the bill. I believe in the power of our legislators enough that I hold you to a higher standard of research and planned implementation, especially when the impact is something that affects birth – it will impact life and death scenarios; may we take care as we wield law making power that affects something as important as this.

Fifth, I do advise that birth healthcare policy be inclusive in its language. I have many clients who are LGBTQ, and do not identify as women. Trans men and nonbinary people give birth. Especially with the success of Maryland's new driver's licenses changes, and the option of official forms being updated to be trans inclusive, it is specifically Exclusive to write a bill that only lists women as possible clients eligible for reimbursed care. All birthing people deserve the same access to healthcare, and our legal wording is often the determining factor for whether care may be received or not. Write it well.

I am so appreciative that doulas are being discussed and given this time and attention by our legislators. However, because I know just how big of a difference a doula can make, and I know how important the birthing period is, I must request that the profession be honored, and that legislation supporting Medicaid reimbursement be held to a higher standard than we see in SB110.

Many thanks for your work and your time,

Jessica Kent

Executive Director, Doula, Mom