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**HOUSE FAMILIES, AGING & HUMAN SERVICES COMMITTEE
CHAIRWOMAN MANCHESTER**

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Chairwoman Manchester, Vice Chairman Cutrona, Ranking Member Liston and members of the House Families, Aging, and Human Services Committee thank you for the opportunity to provide proponent testimony today on House Bill 142. My name is Hope Lane and I am a Policy Associate with The Center for Community Solutions, a nonprofit, nonpartisan think tank that aims to improve health, social and economic conditions through research, policy analysis and communication.

For the past several years, Community Solutions has been committed to analyzing Ohio's escalating maternal and infant health crisis to raise awareness and seek policy solutions to improve outcomes for families in our state. In doing so, we have explored policy changes such as increasing the availability of data as well as compared our healthcare practices with those of neighboring states. We quickly identified that for favorable birth outcomes, women need more than just access to care but rather a combination of clinical skills and relationship-based care. For this reason, Community Solutions has worked tirelessly alongside the leadership in both the legislative and executive branches and with communities across the state for the inclusion of doula services in the list of Ohio's covered Medicaid benefits.

The involvement of doulas into the normal course of care before, during and after child birth has proven to provide better birth outcomes for mothers and infants compared to those that are without. Doula assisted mothers are four times less likely to have a low-birth-weight baby, two times less likely to experience a birth complication involving themselves or their baby and significantly more likely to initiate breastfeeding. Additionally, with the support of doulas, many women can forego risky and costly interventions such as epidurals, cesarean sections, need for oxytocin augmentation and hysterectomy.ⁱ

One of Community Solutions' priorities is to ensure a cost-effective Medicaid program and thus we are sympathetic to concerns over additional costs to Ohio's Medicaid program and subsequently its taxpayers, especially as we begin to recover from an unprecedented public health crisis. However, the physical, emotional and informational support to women that doulas provide will ultimately save our state millions of dollars per year while simultaneously

saving lives. For example, the average price of a cesarean section in Ohio is \$21,431.11.ⁱⁱ Considering over 50 percent of Ohio's babies are born onto the Medicaid program, there is significant cost savings in reduced cesarean sections alone. And if Medicaid coverage for doula services is coupled with the implementation of other policies focused on infant and maternal health such as the implementation of Alliance for Innovation on Maternal Health (AIM) bundles, Ohio's Medicaid program and hospitals can decrease the cost of labor and delivery across the board. In fact, in 12 states with this type of access, nearly \$58.4 million was saved and 3,288 preterm births were avoided.ⁱⁱⁱ

I want to thank you again for the opportunity to provide proponent testimony on House Bill 142 as Community Solutions always values the chance to weigh in on policy that would greatly impact the health and wellbeing of Ohioans. We would welcome the chance to share additional research that we have conducted in this space, and I'm happy to answer any questions you may have at this time.

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ⁱ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3647727/>

ⁱⁱ <https://www.communitysolutions.com/research/cost-price-common-procedures-ohios-hospitals/>

ⁱⁱⁱ <https://www.sph.umn.edu/news/study-shows-doula-care-is-cost-effective-associated-with-reduction-in-preterm-and-cesarean-births/>