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Revolutionizing Maternal Care in Rural Oregon: The Power of Traditional Health Worker Doulas

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Need for Doulas

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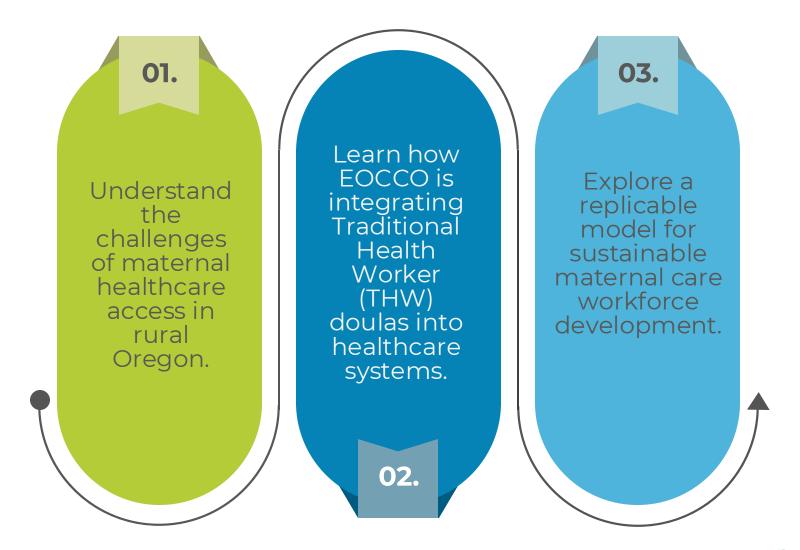
Birth Doulas

03

EOCCO's Birth Doula Program



Session Objectives





The Need for Doulas

Setting the stage





U.S. Maternal Landscape

- In 2023, there were 11.4 **live births** per 1,000 women.
- **Infant mortality** was 5.6 per 1,000 live births.
- Severe maternal morbidity occurred at a rate of 88.2 per 10,000 delivery hospitalizations.
- Maternal mortality was 18.6 per 100,000 live births.

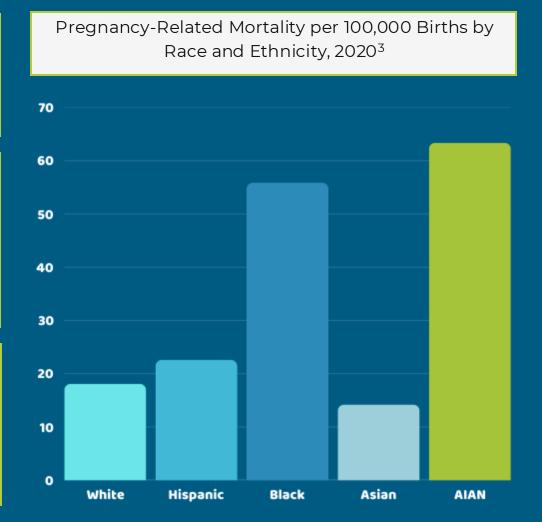


U.S. Maternal Landscape: Racial Disparities

AIAN and Black people are more than **three times** as likely as White people to experience a pregnancy-related death 2020³

2020-2022, **Infant mortality rate** (per 1,000 live births) **highest for Black infants (10.6)**, followed by American Indian/Alaska Natives (8.1), Hispanics (4.8), Whites (4.4) and Asian/Pacific Islanders (3.6)²

Black, AIAN, and Native Hawaiian or Pacific Islander (NHPI) women have higher shares of preterm births, low birthweight births, or births for which they received late or no prenatal care ²





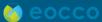
U.S. Maternal Landscape: Racial Disparities



AIAN, Asian or Pacific Islander, and Black women report symptoms of perinatal depression compared to about **one in ten** White women³

▼ It's Time To Act.

Recent data shows that more than eight out of ten (84%) pregnancy-related deaths are preventable.³



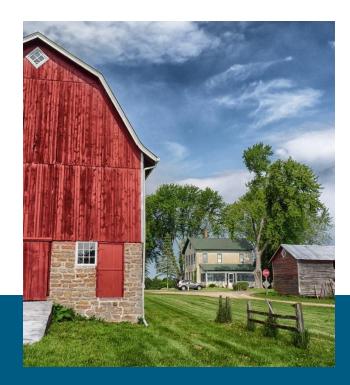


U.S. Maternal Landscape: Rural Disparities

In 2021, the **highest pregnancy- related mortality ratios** were found among women residing in the most rural classifications.⁴

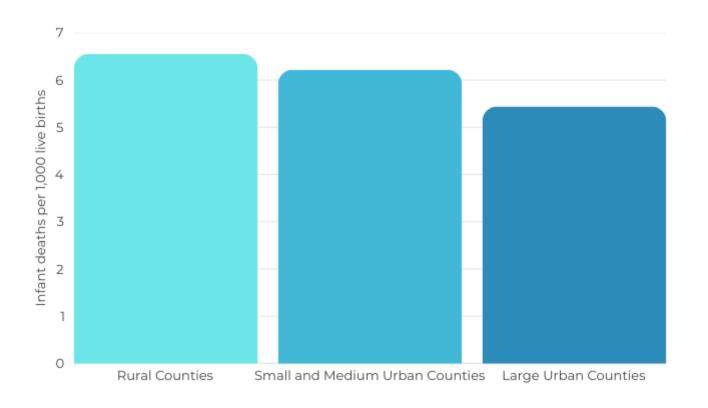
Rural Challenges 5:

- Hospital closures
- Access to care
- Insurance coverage
- Workforce supply and distribution



Infant Mortality Rates

By urbanization in the U.S.



Overall Infant mortality is higher in rural counties (6.55) compared to large urban (5.44) ones.⁶









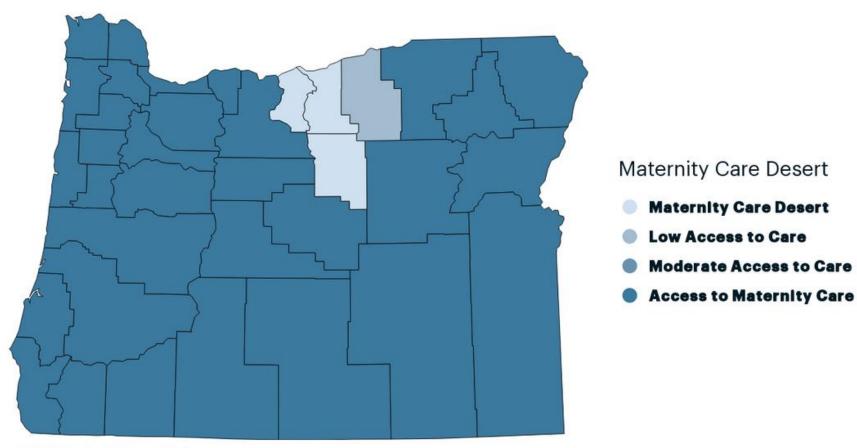
Oregon Maternal Care 2,3

- Maternal mortality was 16.6 per 100,000 live births.
- In 2022, 177 infants died before their first birthday, an infant mortality rate of 4.5 per 1,000 live births.
- In Oregon, 1 in 14 babies (7.2% of live births) had low birthweight.
- Between 2021 and 2023, Black infants (11.2%) were about twice as likely as White infants (6.5%) to be born with low birthweight.



Oregon Maternity Deserts

Oregon, 2021



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EOCCO counties Baker*, Sherman, Gilliam, Morrow, and Wheeler are maternal care deserts.



Oregon Maternal Care: Going the Distance



Time & distance to birthing place

- Urban: 6.8 miles, 12.6 minutes
- Rural: 34.6 miles, 50.3 minutes

Access to birthing place

- Urban: 4.2% >30 minutes
- Rural: 19.4% >30 minutes

Pregnant individuals in maternity care deserts **travel 5 times farther** than those with full access to maternity care.







1. Increase Accessibility

Five counties in EOCCO's region experience maternal care deserts. Increase access to care.

2. Provide more support

Rural areas lack resources to support community wellness and total maternal care. Offer additional supports without burdening providers.

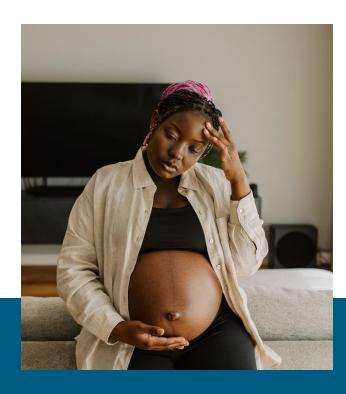
3. Increase Equity

Maternal and infant health disparities reflect broader underlying social and economic inequities. Provide support that addresses SDoH and increases positive birth outcomes.



Responding to Maternal Care Gaps

- 1. How can EOCCO drive change?
- 2. How can EOCCO support our birthing persons and promote positive birth outcomes?
- 3. How can we collaborate with the state, other CCOs, CBOs, providers, and members to create something that works?
- 4. Can we build on that a program that already exists? How can we add value?



Birth Doulas

Understanding their role



Birth Doula Definition

Birth doulas provide non-medical support to pregnant persons during pregnancy, birth, and postpartum.





Scope of Practice

Care Coordination and System Navigation

Coordinate with involved systems of care

Assist with referrals

Assist with creation of birth plan

Connect people to community and/or social service resources Outreach and Direct Service

Provide anticipatory guidance before, during and after birth

Support client informed decision-making

Outreach

Coaching and Social Support

Assist with transitions between providers and phases of care

Referral to social service and/or community resources Advocacy, Organizing, and Cultural Mediation

Serve as cultural liaison

Advocate for client's needs before, during and after birth Education

Increase health literacy

Support stress management

Share culturally appropriate and accessible health education and information Assessment, Evaluation and Research

Not applicable





Role in Community

• Educators Provide information about pregnancy,

childbirth, postpartum

• Advocates Support client and helps them achieve

goals

• **Referrers** Connect clients to resources and work

with organization to find resources

• **Liaisons** Work within clinical team and act as a

bridge between clients and care team

• Collaborators Communicate with client, other doulas,

organizations, and care teams to provide

quality care

• **Learners** Continually learn to improve services





Importance of Birth Doulas⁷

9%

12%

INCREASE IN SPONTANEOUS VAGINAL BIRTHS

31%

DROP IN USE OF PITOCIN

28%

FEWER CESAREANS

DROP IN USE OF PAIN MEDICATION



34%

FEWER NEGATIVE BIRTH EXPERIENCES



40

MINUTES SHORTER LABOR



INCREASED BREASTFEEDING WITH PRENATAL AND POSTPARTUM DOULA CARE





Birth Doulas & Care Teams

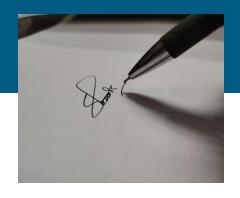
- Can collaborate with maternal care teams but don't need hospital employment.
- Can work independently and be reimbursed through Medicaid, increasing feasibility.
- Offer individualized, out-ofclinic support across prenatal, birth, and postpartum care.
- Emphasize client autonomy and respect.







Doulas as Providers







1. Become OHAcertified

Complete training, 3 births, and resource guide to be state certified.

2. Obtain an NPI

Doulas can obtain an NPI under doula taxonomy (can be sole proprietor, organization)

3. Enroll as an Oregon Medicaid Provider

Enroll with DMAP (State/EOCCO) and bill/get reimbursed for rendered doula services.

EOCCO's Doula Landscape

At time of survey:

- EOCCO had five doulas, but only one was actively serving clients.
 - Most doulas were unsure how to work within the EOCCO system
 - Received minimal outreach or support.
- Doula need is significant, with 1,200-1,700 births annually

Before promoting doula utilization, EOCCO recognized the need to build a sustainable doula workforce and support existing doulas.





Every pregnant

EOCCO member is

offered a birth doula,

create a sustainable

doula network.





EOCCO's Birth Doula Training Program

Building the Foundation for Doula Excellence





Designing the Program

Create a comprehensive program that supports all aspects of EOCCO's doula network goals

- Expand the doula workforce and integrate them into the EOCCO network.
- Provide one-on-one support and encourage direct communication with EOCCO.
- Focus on building a long-term, sustainable solution.

Developed key branches:

- 1. Training
- 2. Outreach and support
- 3. Supervision and continued guidance

Cohort 1 Spring 2024

- 14 participants
- 8-week class, 70 hours
- 2x weekly virtual trainings with EOCCO
- 4-day in-person training with Mother Tree Birth at OSU Hermiston Ext
- Funded by Healthy Rural Oregon

Cohort 2 Fall 2024

- 11 participants
- 5-week class, 70 hours
- 2x weekly virtual trainings with FOCCO
- 1-day in-person training in Hermiston at OSU Hermiston Ext
- 5-day virtual training with Doula Love
- Funded by The Roundhouse Foundation

Partnered with BMCC to offer non-degree course credit



Demographics

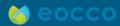
Counties			Job Profiles		
Baker	Malheur	Quality	Social Work	Medical	
Morrow	Wasco	Specialist		Assistance	
Umatilla	Benton	Patient Support Specialist	Student	Community	
Union	Wallowa		Administration	Health Worker	
Wheeler	Multnomah	Ultrasound Technician			
Harney	Others		Case worker		
		Retiree		Supervisor	



For Doulas trained with EOCCO

- Support to get required three births to become OHA-certified
- Monthly meetings with cohorts to check-in
- Offer volunteer doula contracts to access EOCCO's network and hub benefit
- Offer referrals from EOCCO doula referral form





Referrer Information "Referrer" means the person filling out this form, including clinics, providers, community partners, individuals, and other organizations. Referrer Name * First and Last Name Referrer Email * **Referrer Phone Number** Relationship to Patient * Select or enter value Would you, as the referrer, like a follow-up when the patient has been matched to a birth doula? * You will receive the follow-up via the contact information you provided. Select or enter value Send me a copy of my responses Submit

Existing Doulas

- Created member and provider-facing doula information flyers
- Share in clinic meetings, mail to pregnant members, feature in newsletters
- Offer independent contractor contracts to gain access to EOCCO network and hub benefits, simplified billing, referrals
- Accessible scheduling for 1:1 assistance
- Offer mentorship opportunities with new/training doulas



Is your patient expecting a baby? Refer them to a birth doula.



Birth doulas help pregnant people and their families with personal, non-medical support during pregnancy, childbirth and after the baby is born. They've been shown to lower the rate of C-sections, epidurals and the length of labor.

Why a birth doula?

Birth doulas support all kinds of people and families, including people who:

- Speak a language other than English
- Have culturally specific needs
- Have experienced infant loss
- Are adopting or choosing adoption
- Have limited support or are single

EOCCO members get access to a birth doula and their services at no cost to them, including:

- · Visits during and after pregnancy
- · Labor and birth support
- · Emotional and physical support

If your patient would like to learn more about birth doulas and the services they provide, be sure to give them EOCCO's patient-facing birth doula flyer.



How to connect your client with a birth doula

Make a referral using EOCCO's birth doula referral form. Visit tinyuri.com/eoccobirthdoulareferral (or scan the QR code) and enter your patient's information. EOCCO will connect your patient with a birth doula nearby and follow up with you to confirm.



¿Está esperando un bebé? Obtenga atención de una doula de parto sin costo



Las doulas de parto ayudan a las embarazadas y a sus familias al brindarles apoyo personal y no médico durante el embarazo y el parto, y luego del nacimiento del bebé. Se ha demostrado que reducen la tasa de cesáreas y epidurales, y la duración del trabajo de parto.

Las doulas de parto pueden ayudarla a prepararse para recibir a su bebé y darle apoyo durante el trabajo de parto y el parto. Pueden abogar por usted y ayudarla a tener la mejor experiencia de parto posible.

¿Es una doula de parto la opción correcta para mí?

Las doulas de parto ofrecen apoyo a diferentes tipos de personas y familias, entre las que se incluyen las siguientes:

- personas que hablan un idioma distinto al inglés;
- personas que tienen necesidades culturales específicas;
- personas que han sufrido la pérdida de un bebé;
- personas que están por adoptar u optar por la adopción;
- personas que tienen apoyo limitado o son solteras.

Apoyo para todas las etapas del embarazo

Como afiliada de EOCCO, puede obtener acceso **sin costo alguno** a una doula de parto y a sus servicios, entre los que se incluyen los siguientes:

- consultas durante el embarazo y después del parto;
- apoyo durante el trabajo de parto y el parto;
- apoyo emocional y físico;
- acceso a recursos locales;
- apoyo para la lactancia;
- · respuestas para sus preguntas.

EOCCO Birth Doula Dashboard



Welcome to EOCCO's Birth Doula Dashboard!

This dashboard is designed to help contracted Birth Doulas see at a glance, the status of their billing submission and other important rollup information. You can see the status of your billing claim and submit new claims at the bottom of the dashboard.

You'll also find helpful links and relevant information to refer clients to a Birth Doula, supporting documents, and contract information.

If you have any questions, please email the EOCCO team THW@eocco.com or book time with the THW Liaison

Helpful Links

Forms & Sheets

- Birth Doula Referral Form
- REQUIRED: Birth Doula Billing Form
- REQUIRED: Birth Doula Data Reporting Form
- Birth Doula Claim Submissions

Flyers & Handouts

- @ Birth Doula & Referral Flyer (for providers)
- @ Birth Doula Flyer (for members)
- @ THW Flyer (for members)

Billing & THW Certification

- @ THW Quick-Start and Billing Guide
- ⊗ EOCCO Doula Billing Policy
- @ Become an EOCCO Provider

Events & Information

· Become a listed provider on EOCCO's Provider Portal | Join here

Want to be searchable and finable through EOCCO? Join EOCCO's Provider Registry! All certified Birth Doulas are encouraged to add their information to the Provider Portal so members can search by specialty type and contact you for services. Fill out the form above so we can list you!

· Onboard onto Unite Us | Email THW@eocco.com

Unite Us is a virtual platform to send, receive, and manage patient referrals across a network of providers, CBOs, and community resources. Unite Us also has built in social needs screening (OHA-compliant), allowing you to provide a plethora of resources to your clients!

· NEW Doula Billing Codes (eff. 7/1/24)

Birth doula billing codes have officially changed as of July 1st to T1033. All claims for doula services must use these new codes, or the claims will be automatically denied. For more information, refer to the THW Quick-Start and Billing Guide (page 14). If you are using EOCCO's Billing Form, you do not have to update anything.

Trainings

· Billing for THWs (cohosted with NEON): Register here

Refresh your knowledge on how to bill Medicaid using the CMS-1500 form for Fee-For-Service. We'll also cover ILOS, HRS, and HRSN! This is the perfect way to brush up on your skills and gain FREE CEUs! 1.5 CEUs offered.



Supervision & Guidance

Bolstering the THW doula workforce into sustainability

- Providing 1:1 TA
 - Through THW Liaison booking link
 - EOCCO Website
 - EOCCO Newsletter
- Monthly cohort check-ins
- (Re)certification support every step of the way
 - Worksheets & guides on steps to become a provider
 - One-on-one & group TA
 - EOCCO DMAP provider enrollment



Birth Doula Training Program

- Return of >\$35,000
- 31 births supported
- 4 trainees OHA-certified

Birth Doula Network

- From five to 42 doulas (including trained and OHAcertified)
- 25 trainees, four OHA-certified contracted
- Doulas representing all 12 EOCCO counties (& beyond)
- No doulas have left the service area since the program launched.

While too little data to measure birth outcome trends, doulas report increased client autonomy and improved birth preparation.



Lessons Learned

Collaboration is essential

Early leadership buy-in matters!

Development of support structures are key

Sustainability and change take time

Be flexible and adaptable (it won't be perfect)

Relationships drive progress—invest in them





Continuing maternal support

- Train more doulas, offer training in different parts of service area and in Spanish to ensure linguistically and culturally appropriate services
- Continue collaborating with providers to encourage doula referrals
- Build a maternity care system to ensure all members have doula opportunity





Contact Information

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