

116TH CONGRESS
2D SESSION

H. R. 9016

To require the Secretary of Veterans Affairs to establish a pilot program to furnish doula services to veterans.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 17, 2020

Mrs. LAWRENCE (for herself, Mrs. LESKO, Ms. DEAN, and Miss GONZÁLEZ-COLÓN of Puerto Rico) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To require the Secretary of Veterans Affairs to establish a pilot program to furnish doula services to veterans.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Delivering Optimally
5 Urgent Labor Access for Veterans Affairs Act of 2020”
6 or the “DOULA for VA Act of 2020”.

7 **SEC. 2. PILOT PROGRAM ON DOULA SUPPORT FOR VET-** 8 **ERANS.**

9 (a) FINDINGS.—Congress finds the following:

1 (1) There are approximately 2,300,000 women
2 within the veteran population in the United States.

3 (2) The number of women veterans using serv-
4 ices from the Veterans Health Administration has
5 increased by 28.8 percent from 423,642 in 2014 to
6 545,670 in 2019.

7 (3) During the period of 2010 through 2015,
8 the use of maternity services from the Veterans
9 Health Administration increased by 44 percent.

10 (4) Although prenatal care and delivery is not
11 provided in facilities of the Department of Veterans
12 Affairs, pregnant women seek care from the Depart-
13 ment for other conditions may also need emergency
14 care and require coordination of services through the
15 Veterans Community Care Program under section
16 1703 of title 38, United States Code.

17 (5) The number of unique women veteran pa-
18 tients with an obstetric delivery paid for by the De-
19 partment increased by 1,778 percent from 200 deliv-
20 eries in 2000 to 3,756 deliveries in 2015.

21 (6) The number of women age 35 years or older
22 with an obstetric delivery paid for by the Depart-
23 ment increased 16-fold from fiscal year 2000 to fis-
24 cal year 2015.

1 (7) A study in 2010 found that veterans return-
2 ing from Operation Enduring Freedom and Oper-
3 ation Iraqi Freedom who experienced pregnancy
4 were twice as likely to have a diagnosis of depres-
5 sion, anxiety, posttraumatic stress disorder, bipolar
6 disorder, or schizophrenia as those who had not ex-
7 perienced a pregnancy.

8 (8) The number of women veterans of reproduc-
9 tive age seeking care from the Veterans Health Ad-
10 ministration continues to grow (more than 185,000
11 as of fiscal year 2015).

12 (b) PROGRAM.—

13 (1) IN GENERAL.—Not later than one year
14 after the date of the enactment of this Act, the Sec-
15 retary of Veterans Affairs shall establish a pilot pro-
16 gram to furnish doula services to covered veterans
17 through eligible entities by expanding the Whole
18 Health model of the Department of Veterans Af-
19 fairs, or successor model, to measure the impact
20 that doula support services have on birth and mental
21 health outcomes of pregnant veterans (in this section
22 referred to as the “pilot program”).

23 (2) CONSIDERATION.—In carrying out the pilot
24 program, the Secretary shall consider all types of

1 doulas, including traditional and community-based
2 doulas.

3 (3) CONSULTATION.—In designing and imple-
4 menting the pilot program the Secretary shall con-
5 sult with stakeholders, including—

6 (A) organizations representing veterans,
7 including veterans that are disproportionately
8 impacted by poor maternal health outcomes;

9 (B) community-based health care profes-
10 sionals, including doulas, and other stake-
11 holders; and

12 (C) experts in promoting health equity and
13 combating racial bias in health care settings.

14 (4) GOALS.—The goals of the pilot program are
15 the following:

16 (A) To improve—

17 (i) maternal, mental health, and in-
18 fant care outcomes;

19 (ii) integration of doula support serv-
20 ices into the Whole Health model of the
21 Department, or successor model; and

22 (iii) the experience of women receiving
23 maternity care from the Department, in-
24 cluding by increasing the ability of a

1 woman to develop and follow her own
2 birthing plan.

3 (B) To reengage veterans with the Depart-
4 ment after giving birth.

5 (c) LOCATIONS.—The Secretary shall carry out the
6 pilot program in—

7 (1) the three Veterans Integrated Service Net-
8 works of the Department that have the highest per-
9 centage of female veterans enrolled in the patient
10 enrollment system of the Department established
11 and operated under section 1705(a) of title 38,
12 United States Code, compared to the total number
13 of enrolled veterans in such Network; and

14 (2) the three Veterans Integrated Service Net-
15 works that have the lowest percentage of female vet-
16 erans enrolled in the patient enrollment system com-
17 pared to the total number of enrolled veterans in
18 such Network.

19 (d) OPEN PARTICIPATION.—The Secretary shall
20 allow any eligible entity or covered veteran interested in
21 participating in the pilot program to participate in the
22 pilot program.

23 (e) SERVICES PROVIDED.—

24 (1) IN GENERAL.—Under the pilot program, a
25 covered veteran shall receive not more than 10 ses-

1 sions of care from a doula under the Whole Health
2 model of the Department, or successor model, under
3 which a doula works as an advocate for the veteran
4 alongside the medical team for the veteran.

5 (2) SESSIONS.—Sessions covered under para-
6 graph (1) shall be as follows:

7 (A) Three or four sessions before labor and
8 delivery.

9 (B) One session during labor and delivery.

10 (C) Three or four sessions after post-
11 partum, which may be conducted via the mobile
12 application for VA Video Connect.

13 (f) ADMINISTRATION OF PILOT PROGRAM.—

14 (1) IN GENERAL.—The Office of Women’s
15 Health of the Department of Veterans Affairs, or
16 successor office, shall—

17 (A) coordinate services and activities under
18 the pilot program;

19 (B) oversee the administration of the pilot
20 program; and

21 (C) conduct onsite assessments of medical
22 facilities of the Department that are partici-
23 pating in the pilot program.

24 (2) GUIDELINES FOR VETERAN-SPECIFIC
25 CARE.—The Office shall establish guidelines under

1 the pilot program for training doulas on military
2 sexual trauma and post traumatic stress disorder.

3 (3) AMOUNTS FOR CARE.—The Office may rec-
4 ommend to the Secretary appropriate payment
5 amounts for care and services provided under the
6 pilot program, which shall not exceed \$3,500 per
7 doula per veteran.

8 (g) DOULA SERVICE COORDINATOR.—

9 (1) IN GENERAL.—The Secretary, in consulta-
10 tion with the Office of Women’s Health, or successor
11 office, shall establish a Doula Service Coordinator
12 within the functions of the Maternity Care Coordi-
13 nator at each medical facility of the Department
14 that is participating in the pilot program.

15 (2) DUTIES.—A Doula Service Coordinator es-
16 tablished under paragraph (1) at a medical facility
17 shall be responsible for—

18 (A) working with eligible entities, doulas,
19 and covered veterans participating in the pilot
20 program; and

21 (B) managing payment between eligible en-
22 tities and the Department under the pilot pro-
23 gram.

24 (3) TRACKING OF INFORMATION.—A doula pro-
25 viding services under the pilot program shall report

1 to the applicable Doula Service Coordinator after
2 each session conducted under the pilot program.

3 (4) COORDINATION WITH WOMEN'S PROGRAM
4 MANAGER.—A Doula Service Coordinator for a med-
5 ical facility of the Department shall coordinate with
6 the women's program manager for that facility in
7 carrying out the duties of the Doula Service Coordi-
8 nator under the pilot program.

9 (h) TERM OF PILOT PROGRAM.—The Secretary shall
10 conduct the pilot program for a period of 5 years.

11 (i) TECHNICAL ASSISTANCE.—The Secretary shall
12 establish a process to provide technical assistance to eligi-
13 ble entities and doulas participating in the pilot program.

14 (j) REPORT.—

15 (1) IN GENERAL.—Not later than one year
16 after the date of the enactment of this Act, and an-
17 nually thereafter for each year in which the pilot
18 program is carried out, the Secretary shall submit to
19 the Committee on Veterans' Affairs of the Senate
20 and the Committee on Veterans' Affairs of the
21 House of Representatives a report on the pilot pro-
22 gram.

23 (2) FINAL REPORT.—As part of the final report
24 submitted under paragraph (1), the Secretary shall
25 include recommendations on whether the model

1 studied in the pilot program should be continued or
2 more widely adopted by the Department.

3 (k) AUTHORIZATION OF APPROPRIATIONS.—There
4 are authorized to be appropriated to the Secretary, for
5 each of fiscal years 2021 through 2026, such sums as may
6 be necessary to carry out this section.

7 (l) DEFINITIONS.—In this section:

8 (1) The term “covered veteran” means a preg-
9 nant veteran or a formerly pregnant veteran (with
10 respect to sessions post-partum) who is enrolled in
11 the patient enrollment system of the Department of
12 Veterans Affairs under section 1705 of title 38,
13 United States Code.

14 (2) The term “eligible entity” means an entity
15 that provides medically accurate, comprehensive ma-
16 ternity services to covered veterans under the laws
17 administered by the Secretary, including under the
18 Veterans Community Care Program under section
19 1703 of title 38, United States Code.

20 (3) The term “VA Video Connect” means the
21 program of the Department of Veterans Affairs to
22 connect veterans with their health care team from
23 anywhere, using encryption to ensure a secure and
24 private session.

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