June 19, 2019

The Honorable Andrew M. Cuomo  
Governor of New York State  
NYS Capitol Building  
Albany, NY 12224

Dear Governor Cuomo,

On June 14, 2019 DONA International (commonly referred to as DONA) first became aware of New York State Bill A00364B and its counterpart in the Senate S03344-B, "An act to amend the public health law to provide the requirements for professional certification for certified doulas." Both bills passed yesterday and will be coming to you for signature. DONA International is urging you not to sign these bills. Instead, we urge the New York State Assembly to revise this bill and seek input from a broad coalition of local New York state doulas and doula organizations with membership in New York State.

DONA International is the world’s first, largest, and leading doula certifying organization. Founded in 1992, we professionalized the doula role. We have certified over 13,000 doulas and have over 5,000 members, most of whom are in the United States. DONA International’s vision is “A doula for every person who wants one.” This year we have seen the enthusiasm of states to pass legislation that would allow for the reimbursement of doulas though Medicaid payment systems.

While these state-level bills that would provide Medicaid coverage for doulas could serve to further our mission, we are concerned about several elements of the A00364B/S03344-B bill because they would in reality limit the accessibility of doulas for the populations most in need – those most starkly affected by inequities that lead to disparities in maternal mortality and morbidity. This legislation was introduced to "standardize who may be reimbursed for doula services". There are several points in this legislation that pose a concern for DONA International and could be detrimental to DONA birth and postpartum doulas, the doula profession at large, and mothers, birthing people, families and infants.

• DONA is concerned about this language: "Use of title. Only a person certified under this section shall be authorized to use the title "certified doula"." We are concerned about the possibility that this could lay the groundwork for the criminalization of doulas who are not certified through the state. We have seen the criminalization of midwives, due to similar legislation, limit the access of birthing people to qualified midwives. It has been especially detrimental to midwives of color, which only contributes to the maternal mortality and morbidity disparities in the United States by limiting families’ access to culturally reflective care. We suggest changing the language to “state certified doula” and clarifying that this certification is completely optional. Doulas must be able to continue to use the word ‘certified’ in association with certifications earned through their own certifying organizations. We recommend adding language to clarify that hospitals cannot discriminate against doulas who choose not to certify with the state.

• DONA is concerned about this requirement: "Character. Be of good moral character as determined by the department." Character & Fitness sections in laws are usually reserved for highly regulated professions, like doctors, lawyers, etc. This standard groups doulas into a medical model that does not apply to our profession. Doulas, by definition, do not perform any medical or clinical tasks. We should not be regulated in the same way that healthcare providers are. DONA is especially concerned about the implications of a board reviewing doula applications and being able to determine ‘good moral character’ when we consider the absolute necessity of doulas that reflect the communities they serve, and the opportunity for bias in this process to have a detrimental impact in this space. We cannot allow racism, classism, sexism, or other forms of discrimination to have the opportunity to have an impact on the doulas available to families through a program that is meant to "target maternal mortality and

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reduce racial disparities in health outcomes”.

- DONA is concerned about the Examination requirement. Research shows that entrance exams can be a barrier to higher education that most significantly impacts people from marginalized communities. We are concerned that the same is true for certifications. DONA International has an assessment to test basic knowledge as part of its comprehensive, experiential certification process. Regardless of the difficulty of the state exam, we know that the mere presence of an “exam” could be a deterrent for certification especially among doulas from communities currently under-represented in doula work, like communities of color and communities affected by poverty. It is critical that we are growing the number of doulas from these communities, and we should eliminate barriers to the profession, not create new ones.
- DONA recommends removing the fee as this will create a barrier to certification.

We acknowledge that these bills are proposed as part of your initiative to reduce maternal mortality and improve newborn health. Several doulas and doula organizations have consistently expressed concerns with New York State’s current [Doula Pilot Program](#), to test the feasibility and efficacy of Medicaid coverage for doula services. Specifically, DONA International and others have concerns regarding some of the requirements for participation in the program and the low reimbursement rates for doulas. We urge you not to sign bills A00364B/S03344-B into law, and to seek input from New York state doulas and doula organizations with members in New York on the best way to achieve Medicaid coverage for doulas that will not limit the accessibility of doulas. We also urge you to await preliminary results from the Doula Pilot Program before codifying this un-tested legislation.

Currently, the state legislation to provide Medicaid coverage for doulas is vastly different in its language and scope from one state to the next. There is no best-practice for this legislation, as of yet. It is critical that New York state take a measured approach to proposing legislation around Medicaid coverage for doulas so as not to create barriers to access to doula care by unnecessarily limiting the doulas that can provide such care, as this bill would do.

We welcome your call for discussion on this legislation.

Thank you,

Rina Rios (New York State resident)
On behalf of the DONA International Board of Directors

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