

Michigan Doula Advisory Council Guidelines

Section 1: Background and Overview

Doulas are trained birth workers who provide non-clinical emotional, physical, and informational support to pregnant people and their families before, during, and after birth. Doula support is a safe and cost-effective intervention to improve birth outcomes. Doula services have been shown to positively impact the social determinants of health, support birth equity, and decrease existing health and racial disparities.

With the purpose of increasing access to doula services, improving birth outcomes, and reducing racial inequities, Michigan's Medicaid Program released a policy establishing doula coverage criteria as a preventive service and a covered Medicaid benefit. The policy became effective January 1, 2023.

Section 2: Goals and Objectives

The Michigan Doula Advisory Council (DAC) was created to inform the advancement of doula services in Michigan because of the Medicaid doula reimbursement policy. The goals/objectives include:

- a) Promote the advancement of doula services statewide in an effort for Michigan families to have equitable access to doula services.
- b) Provide advisement to the Michigan Department of Health and Human Services (MDHHS) Doula Initiative on policies, applications, and resource documents with the goal of making doula services accessible to families and increasing the Medicaid enrolled doula workforce.
- c) Expand the doula workforce by creating opportunities for individuals statewide to receive approved doula training and attend additional ad hoc trainings for doulas.
- d) Advise on continuing education content and offerings to benefit the statewide doula workforce and raise awareness of the benefits of doula services.
- e) Inform the MDHHS Doula Initiative regarding activities that promote access to doula care statewide.

Section 3: Membership Composition

The Michigan Doula Advisory Council will include representation from doulas across the state of Michigan. Priority will be given to developing a diverse council membership that represents, to the extent possible, the various communities and settings in which doula services are provided. Factors that will be considered when developing the council include:

- a) Equitable representation from the 10 Michigan Prosperity Regions
- b) Varied work settings including community-based, health and hospital systems, group organizations, individuals, other
- c) Doulas from tribal communities and serving tribal families
- d) Varied doula practice (labor and birth, postpartum, full spectrum, bereavement)
- e) Focus on serving specific communities including Black, Indigenous, People of Color (BIPOC) families, Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) families, or others
- f) Doulas with additional maternal child health specialized training (lactation, healthcare, community health, trauma informed, peer recovery, others)

Participation in the council is voluntary and members can resign from their positions at any time. Additionally, MDHHS may remove members from the Doula Advisory Council, as deemed necessary. Reasons for removal include but are not limited to: misconduct during meetings; pending criminal charges or convictions; and/or poor committee attendance or performance.

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Section 4: Membership Size

The Michigan Doula Advisory Council will not exceed 25 individuals, excluding MDHHS staff. Membership will have a 2-year term limit. To support new member voices, at least 25% of each membership term will be new members.

Roles and Responsibilities

1. Doula Advisory Council Members - The role of members is to provide expert guidance and input on doula services in Michigan:
 - a) Review/approve doula training organization curricula.
 - b) Inform technical assistance, process, and policy improvements for Medicaid-enrolled doulas.
 - c) Develop and inform continuing education opportunities for doulas.
 - d) Make recommendations broadly to improve access to and awareness of doula services.
 - e) Complete the required annual Bias, Diversity, Equity and Inclusion training (MDHHS provided).
 - f) Attend and actively participate in at least 50% of the scheduled meetings per year.
 - g) Act as voting members when appropriate.

2. MDHHS Staff Roles and Responsibilities: MDHHS staff, primarily from the Division of Maternal and Infant Health and Medicaid Policy Division, will provide consultation and support to the council including but not limited to:
 - a) Maintain membership, guidelines and responsibilities.
 - b) Coordinate meetings and manage logistics.
 - c) Collect, organize and elevate Doula Advisory Council recommendations and actions.
 - d) Provide updates on MDHHS and federal policies and procedures.
 - e) Promote transparency between the Doula Advisory Council and the MDHHS.
 - f) Provide staff support to move work products forward, track actions and evaluate outcomes.
 - g) Complete the required annual Bias, Diversity, Equity and Inclusion training (MDHHS-provided).
 - h) Staff do not act as voting members.

Section 5: Reimbursement

Michigan Doula Advisory Council members may be reimbursed for participation at a rate of \$20 per hour. Reimbursement will be made through the State of Michigan SIGMA system.

To be considered for appointment to the council, applications must be submitted to MDHHS-MIDoula@michigan.gov. Inclusion of a resume or curriculum vitae is optional.