

QUESTION: Provide details about the five-year pilot demonstration project commissioned to examine the use and efficacy of doulas. Please describe the purpose and manner in which it will be conducted, locations of the pilot and describe who is eligible to participate. It is the Committee's understanding that Active-Duty servicewomen may not be eligible to participate.

HEALTH AFFAIRS RESPONSE:

The Assistant Secretary of Defense for Health Affairs (ASD(HA)) announced the Childbirth and Breastfeeding Support Demonstration (CBSD) in a Federal Register (FR) notice published on October 29, 2021 (86 FR 60006). The CBSD establishes coverage of the services of three new classes of extra-medical TRICARE-authorized providers: certified labor doulas (CLDs), certified lactation consultants, and certified lactation counselors. The CBSD also adds childbirth support services, provided by CLDs, as a benefit under TRICARE and expands the existing breastfeeding counseling benefit to include group breastfeeding counseling sessions.

The purpose of the demonstration is to study the impact of adding these providers and services on cost, quality of care, and maternal and fetal outcomes for the TRICARE population, as required by Section 746 of the William M. (Mac) Thornberry National Defense Authorization Act for Fiscal Year 2021 (NDAA-2021). The CBSD also studies the appropriateness and administrative feasibility of making coverage under the TRICARE Program permanent. The demonstration began on January 1, 2022, and will be conducted for a period of 5 years covering eligible beneficiaries in the 50 United States and District of Columbia. Eligible beneficiaries in overseas locations will be covered under the demonstration beginning January 1, 2025, until termination of the CBSD.

The CBSD is limited to services occurring in private sector care (PC). TRICARE statutory and regulatory restrictions on providers, from which the NDAA-2021 demonstration offers relief, apply to care administered under PC. By contrast, Military Medical Treatment Facilities (MTFs) under direct care are not prevented from hiring such providers under existing statutory and regulatory authorities. Some MTFs already have lactation consultants on staff, from whom beneficiaries are eligible to receive services. Currently, no MTFs have doulas on staff; however, many MTFs do permit beneficiaries to bring a doula with them during labor, whether that doula be a volunteer, paid for by the family, or reimbursed under another program. The evaluation of maternal and fetal outcomes will not be impacted by the limitation of the demonstration to PC.

The demonstration is available to TRICARE Prime and TRICARE Select beneficiaries who receive care in PC under the managed care support contractors (MCSCs). TRICARE Overseas beneficiaries will be eligible to participate in the demonstration beginning January 1, 2025, when the demonstration expands to overseas locations. Not included in the demonstration are TRICARE for Life, United States Family Health Plan, and Continued Health Care Benefit Program beneficiaries. Excluding beneficiaries not under the MCSCs or the Overseas Program (beginning January 1, 2025) reduces the administrative burden of the demonstration, while covering 60 to 65 percent of births that occur under the Military Health System. Any potential permanent expansion would revisit inclusion of beneficiary categories excluded under the demonstration.

Active duty service members (ADSMs) are not excluded from participation in the CBSD; rather, ADSMs, like all TRICARE beneficiaries under the demonstration, must receive their care under PC (for childbirth support services, this means they must give birth in a hospital in the private sector). The DHA recently issued a clarification to its implementation of the CBSD that will aid eligible ADSMs in participating, by clarifying that if a beneficiary assigned to an MTF is referred to PC for labor and delivery, that referral shall be assumed to include a referral for childbirth support services, and no other referral is required. Additionally, a beneficiary who receives care at an MTF, including ADSMs, could receive breastfeeding counseling services under the CBSD even if they gave birth at an MTF, so long as that care was received in the private sector. Early CBSD data has found that ADSMs are participating in both the childbirth support part of the demonstration (doula care) and breastfeeding support (lactation consultants/counselors).

Covered childbirth support services include up to six antepartum or postpartum visits with a doula, plus one continuous labor support visit during the delivery. Covered breastfeeding support visits align with the existing TRICARE benefit, which allows up to six prenatal or postnatal individual breastfeeding counseling sessions. The CBSD also adds coverage for group breastfeeding counseling/classes, which count towards the beneficiary's six visits.

The demonstration is anticipated to cost \$51.16M in health care and administrative costs. Increased costs to the TRICARE Program for breastfeeding counseling are estimated at \$7.05M, while \$40.18M are estimated for the childbirth support benefit. The childbirth support benefit estimate includes a calculation for offsets from C-section reductions. There is substantial uncertainty surrounding the estimate, given that no commercial insurers and only a few Medicaid programs reimburse for childbirth support services. The overall estimate includes approximately \$3.93M for administrative costs related to credentialing, billing, and contractor reporting requirements.