

118TH CONGRESS  
1ST SESSION

# H. R. 6331

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

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## IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 9, 2023

Mr. DAVIS of North Carolina (for himself and Mrs. GONZÁLEZ-COLÓN) introduced the following bill; which was referred to the Committee on Veterans' Affairs

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## 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 2023”  
6 or the “DOULA for VA Act of 2023”.

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 seeking care from the De-  
13 partment for other conditions may also need emer-  
14 gency care and require coordination of services  
15 through the Veterans Community Care Program  
16 under section 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;

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; and

19 (3) at least one Veterans Integrated Services  
20 Network—

21 (A) located in or serving a Frontier State  
22 (as defined in section 1886(d)(3)(E)(iii)(II) of  
23 the Social Security Act (42 U.S.C.  
24 1395ww(d)(3)(E)(iii)(II))) where more than  $\frac{1}{3}$   
25 of the population lives in frontier land; and

1 (B) serving populations experiencing high-  
2 er average risk and prevalence for maternal  
3 mental health disorders, including American In-  
4 dian or Alaska Native veterans.

5 (d) OPEN PARTICIPATION.—The Secretary shall  
6 allow any eligible entity or covered veteran interested in  
7 participating in the pilot program to participate in the  
8 pilot program.

9 (e) SERVICES PROVIDED.—

10 (1) IN GENERAL.—Under the pilot program, a  
11 covered veteran shall receive not more than 10 ses-  
12 sions of care from a doula under the Whole Health  
13 model of the Department, or successor model, under  
14 which a doula works as an advocate for the veteran  
15 alongside the medical team for the veteran.

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

18 (A) Three or four sessions before labor and  
19 delivery.

20 (B) One session during labor and delivery.

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

24 (f) ADMINISTRATION OF PILOT PROGRAM.—

1           (1) IN GENERAL.—The Office of Women’s  
2 Health of the Department of Veterans Affairs, or  
3 successor office (in this section referred to as the  
4 “Office”), shall—

5                   (A) coordinate services and activities under  
6 the pilot program;

7                   (B) oversee the administration of the pilot  
8 program; and

9                   (C) conduct onsite assessments of medical  
10 facilities of the Department that are partici-  
11 pating in the pilot program.

12           (2) GUIDELINES FOR VETERAN-SPECIFIC  
13 CARE.—The Office shall establish guidelines under  
14 the pilot program for training doulas on military  
15 sexual trauma and post traumatic stress disorder.

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

21 (g) DOULA SERVICE COORDINATOR.—

22           (1) IN GENERAL.—The Secretary, in consulta-  
23 tion with the Office, shall establish a Doula Service  
24 Coordinator within the functions of the Maternity

1 Care Coordinator at each medical facility of the De-  
2 partment that is participating in the pilot program.

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

6 (A) working with eligible entities, doulas,  
7 and covered veterans participating in the pilot  
8 program; and

9 (B) managing payment between eligible en-  
10 tities and the Department under the pilot pro-  
11 gram.

12 (3) TRACKING OF INFORMATION.—A doula pro-  
13 viding services under the pilot program shall report  
14 to the applicable Doula Service Coordinator after  
15 each session conducted under the pilot program.

16 (4) COORDINATION WITH WOMEN’S PROGRAM  
17 MANAGER.—A Doula Service Coordinator for a med-  
18 ical facility of the Department shall coordinate with  
19 the women’s program manager for that facility in  
20 carrying out the duties of the Doula Service Coordi-  
21 nator under the pilot program.

22 (h) TERM OF PILOT PROGRAM.—The Secretary shall  
23 conduct the pilot program for a period of five years.



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

4 (j) REPORT.—

5 (1) IN GENERAL.—Not later than one year  
6 after the date of the enactment of this Act, and an-  
7 nually thereafter for each year in which the pilot  
8 program is carried out, the Secretary shall submit to  
9 the Committee on Veterans’ Affairs of the Senate  
10 and the Committee on Veterans’ Affairs of the  
11 House of Representatives a report on the pilot pro-  
12 gram.

13 (2) FINAL REPORT.—As part of the final report  
14 submitted under paragraph (1), the Secretary shall  
15 include recommendations on whether the model  
16 studied in the pilot program should be continued or  
17 more widely adopted by the Department.

18 (k) AUTHORIZATION OF APPROPRIATIONS.—There  
19 are authorized to be appropriated to the Secretary, for  
20 each of fiscal years 2024 through 2029, such sums as may  
21 be necessary to carry out this section.

22 (l) DEFINITIONS.—In this section:

23 (1) COVERED VETERAN.—The term “covered  
24 veteran” means a pregnant veteran or a formerly  
25 pregnant veteran (with respect to sessions post-

1 partum) who is enrolled in the patient enrollment  
2 system of the Department of Veterans Affairs estab-  
3 lished and operated under section 1705(a) of title  
4 38, United States Code.

5 (2) ELIGIBLE ENTITY.—The term “eligible enti-  
6 ty” means an entity that provides medically accu-  
7 rate, comprehensive maternity services to covered  
8 veterans under the laws administered by the Sec-  
9 retary, including under the Veterans Community  
10 Care Program under section 1703 of title 38, United  
11 States Code.

12 (3) VA VIDEO CONNECT.—The term “VA Video  
13 Connect” means the program of the Department of  
14 Veterans Affairs to connect veterans with their  
15 health care team from anywhere, using encryption to  
16 ensure a secure and private session.

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