

Accompany Doula Care Request for Partnership

Building sustainable partnerships with community doulas to reach the birth experience that everyone deserves

June 2023

Attn: Christina Gebel, MPH, Doula (she/her/hers) Co-founder & Interim Executive Director Director of Strategic Partnerships & Research Accompany Doula Care



Introduction

When healthcare institutions partner with community doula organizations, significant improvements in maternal and infant health outcomes, birth equity within those outcomes, and cost of care savings are the result. Accompany Doula Care has a proven track record, supporting over 700 families within the last five years with high-quality doula support in the prenatal, birth, and postpartum periods. Accompany has exclusively supported families¹ on MassHealth, especially those facing medically high risk pregnancies and dealing with unmet social needs, who stand to benefit the most from doula support yet are often the least likely to have access to it. Accompany intends to continue that care model well into the future, making doula care accessible to all. In order to ensure the sustainability of that goal, Accompany is releasing the following Request for Partnership (RFP).

Purpose

Accompany Doula Care, or "Accompany," looks forward to reviewing requests for partnerships (RFP) in the summer and fall of 2023. Accompany defines "partnership" as a relationship between Accompany and a payer, hospital, clinic, or healthcare system, which intends to increase access to community doula support, grounded in shared values. Drawing from the diverse and experienced doulas we have on staff, the path to achieving health equity for all birthing families is more likely to succeed.

Background

Accompany now has five years of experience in creating and maintaining successful partnerships with healthcare institutions that have improved health outcomes including significantly lowering NTSV (Nulliparous, Term, Singleton, Vertex) cesarean rates and NICU stays. With one long standing partner, while working with largely medically or socially high risk birthing parents, the NTSV C-section rate was 6% in 2022 across members who worked with an Accompany doula. Moreover, with the same partner, our patient satisfaction rate is consistently over 95%.

With a diverse doula workforce that currently speaks at least 10 different languages, Accompany is able to provide culturally and linguistically congruent support. By partnering with healthcare institutions and establishing strong communication between Accompany and the healthcare staff - that includes clinicians, case managers, and wraparound support - we collaborate to meet the unmet social, behavioral and housing needs of birthing families.

Accompany is releasing this RFP ahead of the anticipated doula support benefit for MassHealth members in late 2023 in order to ensure the sustainability of our mission and the future of this

¹ Throughout this RFP, the words "families," "clients," "patients," or "members" may be used interchangeably to mean birthing persons (and their families) who are served by a doula.



work. In the five years since our inception, Accompany has aimed to continuously provide quality community doula support through building sustainable partnerships that align with our values, which include ensuring fair wages for doulas as well as stable funding for overhead costs necessary for providing quality services.

While Accompany applies for and appreciates grant support and other restricted funding opportunities, the longevity of a community doula organization depends on a model that has the likelihood of existing well into the future through true commitment from both parties to achieve a common vision. These grounding principles of caring for the families served, the doulas who serve them, and the partnership that wraps around that support is embedded throughout this request.

As Accompany has grown and prepares to deliver more services to families through the MassHealth doula benefit, we are seeking organizational partnerships based on a focused and values-based Request for Partnership (RFP), as detailed below.

Defining "Partnership"

Accompany is different from a traditional vendor relationship in that we view our relationship with your organization as a true partnership committed to the success of the model and the health of your patients or members. When in partnership, Accompany expects partners to commit to supporting the following shared values:

- a. Multi-level stakeholder engagement. Partners will commit to assembling all necessary staff and stakeholders in order to make the model and partnership successful. This may include clinical champions, payer/hospital/clinic leadership, care management, social workers, or other relevant groups.
- **b.** Assistance in troubleshooting. Partners will commit to be a thought partner or acting together in overcoming challenges or obstacles to providing quality doula support.
- c. Commitment to Racial Equity & Reproductive Justice: Providing culturally and linguistically congruent care and addressing systemic racism are paramount to our work towards birth equity for all. Accompany seeks partners who are equally committed to this goal.

The administrative start time for the partnership will occur in Q1 of 2024, anticipating a run-in period of 8-12 weeks of putting in place contracts, workflows, and payment mechanisms. NOTE: If a partnership is currently in place and is chosen to continue after the end of the existing agreement, this run-in period will be significantly shortened or not relevant.

Section1: Background

I. Our Story



Accompany Doula Care grew from a vision of six birth and postpartum doulas in Massachusetts who believed in the value of doula care as part of the birthing persons care team. The six co-founders believed in families having access to doulas from a variety of racial, ethnic and linguistic backgrounds and eliminating barriers to doula support for all families. The six co-founders began meeting in earnest in 2017. At that time, a window of opportunity in Massachusetts healthcare and the national landscape began to emerge. Inequities in maternal mortality and morbidity, particularly for Black birthing people, received long overdue national attention. As a result, interest grew in the clinical and public health sectors partnering to integrate community health workers, doulas, midwives, and birth centers in order to improve maternal and child health outcomes. Locally, the shift towards Accountable Care Organizations (ACOs) in MA, set up the goal of achieving Berwick's Triple Aim (improving population health, improving the patient care experience, and reducing costs of care in doing so).

Currently, Accompany has contracts with two ACOs, two hospitals, one community health center, and interest continues to grow. Due to growing interest and the anticipated MassHealth doula benefit, Accompany's leadership and Board have begun to reflect on how partnerships can serve the organization's mission and vision both now and well into the future.

For more about the impact of Accompany's first five years of services, look for our forthcoming Impact Report in Summer 2023 on *www.accompanydoulacare.com*.

II. Our Values

Our values have emerged in how we conduct ourselves as an organization and how we deliver services through our partnerships since we began delivering services in 2019. As our organization continues to grow in quality, we develop a deeper understanding of our evolving mission and the necessary values in achieving it:

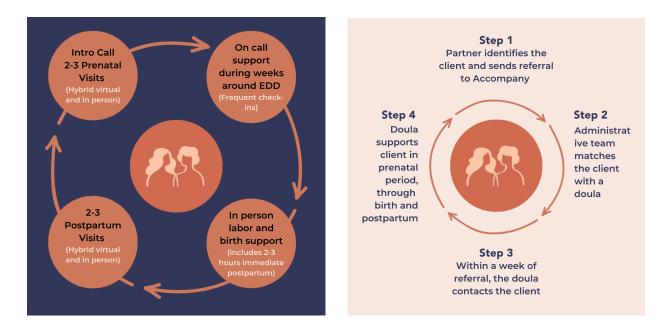
- a. Employing a diverse community doula workforce: We hire doulas who reflect the preferences and needs of the clients we serve. Our doulas identify with several races, ethnicities, religions, cultures, and come from various communities and career backgrounds. Several of our doulas are either bi- or multi-lingual.
- b. Centering client preferences in matching them with a doula. We believe that in centering client preferences when making a match with a doula, we are upholding the client's autonomy in choosing who is part of their care team, an opportunity not often available in the current maternity model of care.
- c. Working to eliminate health inequities. The majority of the clients referred to Accompany are medically high risk or have unmet social needs. Our doulas and staff serve as some of the many necessary stakeholders navigating clients to resources to meet these needs.



- d. Paying doulas a fair and sustainable wage. Our goal is that our doulas and staff are paid a livable, respectful, and sustainable wage in order to care for themselves, their families, and their communities. Accompany has increased wages for doulas several times since our inception and are active participants in national workgroups about equitable wages for community doulas. However, wages are but one piece of supporting doulas to best support others. Doula work is challenging, both emotionally and physically. Burnout, vicarious trauma/mental health, and managing long and often unpredictable on-call hours are challenges in doing community doula work. Accompany strives to make progress in all of these areas, in addition to fair pay.
- e. Mentorship and continuing education. Doulas who work for Accompany have a wide range of years of experience, from being new to doula care to having been a doula for 15+ years, attending thousands of births to date. By being in close contact with our Program Directors and Leadership staff, doulas are able to elevate concerns, share best practices, and improve the model of care. Accompany holds regular meetings as a group to share knowledge and receive continuing education to meet clients' needs.
- f. Integration into clinical care settings. In order for partnerships to be successful, every level of engagement must work towards that goal. Along with consulting on integration of doula care into clinical settings, what makes Accompany's model unique is the communication between Accompany, clinical teams, and care management. Open lines of communication underscores the success of our model. These conversations are crucial in ensuring unmet social and behavioral health needs are addressed.

III. Our Model

Our model includes two basic working relationships: that between your organization and Accompany Doula Care and that between the doula and the client.





In the Organization-Accompany working relationship, the following is mutually established and agreed to:

- Recruitment of members or patient to doula services by provider or payer
- Consent form facilitated by provider or payer
- Referral sent to Accompany between 24-28 weeks gestation, which normally includes the following types of information: Client name, DOB, contact information, race, ethnicity, preferred spoken language, preferences for doula match (race/ ethnicity/ language), additional support people for client (like a partner), EDD, planned site for delivery, obstetric provider name and contact information, pregnancy complications, behavioral health needs, unmet social needs information, and any other relevant information.
- Doula match made by Accompany and outreach to client
- Cadence of meetings between Accompany & your organization concerning any troubleshooting and navigation to address unmet social needs or behavioral health concerns
- Billing or invoicing for services rendered
- "Closing" the doula-client relationship
- Evaluation or feedback form
- Outcome data reporting

In the Doula-Client working relationship, the following is mutually established and agreed to:

- Doula outreach to client/patient to establish services
- 2-4 prenatal visits. Topics may include:
 - Doula-Client relationship building, as trust is paramount in this work; the first prenatal visit is often focused on building a trusting, understanding and professional rapport with the client
 - General reflection and client desires for pregnancy, preparing for labor and childbirth, and postpartum
 - Basic childbirth education
 - Comfort measures for labor
 - Developing birth preferences/plan
 - Reflections and preparation for prenatal visits with their medical provider
 - \circ $\;$ When to call and how to work with a doula
 - Preparation for immediate postpartum time (establishing feeding)
 - Unmet social and behavioral health needs if relevant (in collaboration with care management or provider)
- On call (with backup doula information shared) for continuous birth support



- 1 postpartum visit within the first week and 1-2 additional postpartum visits following the first week through 8-10 weeks postpartum. Topics may include:
 - Reflections and processing the birth and initial postpartum experiences
 - Breastfeeding/Human milk feeding support
 - Infant and parent sleep
 - Newborn care
 - Resource sharing for new parents and postpartum support
 - Encouragement to attend 6 week postpartum visit with provider
 - Family planning discussion
 - Postpartum depression warning signs
 - Unmet social and behavioral health needs if relevant (in collaboration with care management or provider)
- Ad-hoc text or phone interactions from the time of referral to the close of the doula/client relationship (note, this may require a waiver or consent from the patient or member)
- Elevating unmet social needs or behavioral health concerns to Accompany staff and partnered clinical/care management team

For more information about our Model, please see "Frequently Asked Questions About Our Model" in the Appendix of this document.

IV. Why Accompany Doula Care?

As MassHealth prepares to offer a doula care benefit in late 2023, members and patients will have the opportunity to receive services from doulas embedded within hospitals and/or organizations like ours. We at Accompany welcome and support the growing diverse landscape of doula work in Massachusetts and believe access will look different in each context and setting.

At Accompany Doula Care, we value the partnership just as much as we value the service delivery. Key aspects of our model lend well to partnering with hospitals, health centers, and payers, who may desire doulas for their member or patient population, but do not wish to take the lead in every area of upstart, implementation, and evaluation.

Working with Accompany Doula Care offers certain advantages including:

- An existing and diverse community doula workforce to meet the needs and preferences of our members or patients
- Experience in working with clients whose risk level is high, either medically or with several unmet social needs
- Workflows that support dynamic feedback and conversation between payer, care management, and clinical partners to offer the best support to families



- Regular client updates and data reporting
- A team of doulas and staff to ensure appropriate, skilled, and culturally congruent services are provided to birthing families
- An organized way to connect many patients with doulas that lead to a higher patient satisfaction while lowering costs of care for the healthcare institution.

A workforce that is:

- Mentored and supported by our staff and fellow doulas
- Supported by back-up doulas and on-call availability from staff members
- Engaged in continuing education
- Experienced in integrating into clinical care settings
- Vaccinated for communicable diseases, including COVID-19
- Trained on HIPAA compliance and use of encrypted platforms and protected devices
- Cleared by the MA CORI system

V. What Our Partners Are Saying

We are grateful for the following testimonials from our current partners:

"It's inspiring to see how many lives have been touched by this amazing partnership [with Accompany], and it serves as a wonderful example of how doula agencies can effectively partner with health plans to improve maternal and infant health outcomes. In our model, the doulas help us, and we help them to gain a more complete picture of the members' needs, allowing us all to better help meet those needs. Accompany Doula Care is a partner that goes above and beyond for our members, providing not just prenatal, labor, and postpartum support, but creating life-changing impact one client at a time. The culturally and linguistically tailored care provides an individualized experience for our members where they don't have to worry about being misunderstood, but rather can just focus on having a positive and healthy pregnancy. The doulas are compassionate, selfless, dedicated individuals who often put aside their own lives and personal commitments to prioritize the needs of the client. We couldn't ask for a better partner to do this work with." - Manager of Maternal and Newborn Health Programs

"One of the biggest indicators of the success and impact of Accompany Doula's partnership with our program is the members who call to request being paired with the same doula they had for a previous pregnancy. As a care manager, it makes my job easier, knowing our high-risk members are paired with a skilled birth doula, are having more frequent outreach, and are more likely to connect with me if they need additional support or resources during their pregnancy and postpartum time." – Maternal Newborn Care Coordinator



"My member really enjoyed working with her doula and was highly engaged in the program. She had a risk factor of advanced maternal age. She took advantage of the support offered by her doula, and despite conflicts during her labor and delivery, she had her baby vaginally with support from her doula. Her doula helped her advocate for herself and stay calm during her labor. The home visits her doula did [with her] supported her with the transition of now having three children. This member couldn't have thanked her doula enough during the satisfaction survey as she felt like being pregnant again after 10 years would not be as smooth of a process without her doula's support." - Maternal Newborn Care Coordinator

To apply to become a partner, please proceed to the next page of this document.



Section 2: Application

Having read the Request for Proposals (above) we invite you to respond to the following questions. Answers may be submitted in a separate .pdf file via email. Please note there is an Appendix following the application for further clarification of Frequently Asked Questions.

I. Organizational Profile

- 1. Name of Entity/Organization or Institution Requesting a Partnership:
- 2. Mission of the Organization:
- 3. Values of the Organization:
- 4. How does your organization demonstrate a commitment to racial and reproductive justice and/or anti-racism? How will (or does) that work extend into the integration of doulas into your organization and the various maternity care settings where your patients or members receive their obstetric care? (250 words or less)
- 5. How does your organization's idea of a partnership align with Accompany's as explained in this RFP? Please include examples of partnerships your organization holds or have held that exemplify this alignment. (500 words or less)
- 6. To what extent are doulas currently integrated into your organization or the hospitals/clinics where your members or patients seek care? (250 words or less)
- 7. Where do you envision integration of doula care being situated within your organization? Why do you feel that placement is strategic and supportive? Which cross-departmental or cross-team collaborations do you see as necessary to making (or continuing) successful integration? (500 words or less)
- 8. Who do you believe are key staff at your organization when integrating doula care? What are their roles and responsibilities? What cadence of meeting is most helpful for Accompany to maintain with these staff? (250 words or less)
- 9. Describe the workflow for integration of doula care or summarize any workflows already in place, if applicable. (250 words or less)
- How does your organization intend to partner with doulas in addressing unmet social needs or behavioral health concerns in the patient or member population you serve? (250 words or less)
- 11. What does your organization value when evaluating the impact of doula services for your members or patients? (250 words or less)



- 12. What expectations do you have in terms of reporting outcomes, the cadence of reporting, and the reasons why those indicators are valued at your organization? (250 words or less)
- II. Commitment to Sustainable Partnership & Funding
 - 13. Describe your organization's commitment to the sustainability of this partnership. Please include the intended source of funding for doula care and the likelihood for the continuation of that funding source. (250 words or less)
 - 14. As MassHealth finalizes the reimbursement rate for doula services, Accompany supports these efforts and the goal to increase access to doula care for all families. Within this overall goal, Accompany's intention is to continue to work with families that have complex medical and social needs. We will continue to employ doulas who receive mentorship and continuing education in order to best serve a high needs population.

In order to reach these goals and ensure the sustainability of our work, we intend to continue cost sharing the operational costs of our model. As we evaluate partnerships, knowing how the partnership can support this cost sharing is important. The goals of this cost sharing will be to help underwrite our organizational expenses in putting forth high quality services as well as preserve as much of, if not all, the reimbursement amount for services (as forthcoming from MassHealth) for the doula delivering those services. With each partnership contributing equitably, we can achieve these goals.

Since 2019, Accompany has carefully evaluated our costs and determined them to be roughly 1.6 times a good faith estimate of the average Medicaid reimbursement amount for doula services per client. Therefore, we offer two examples as a guidepost in determining the contribution:

MassHealth reimbursement contribution	Overhead cost sharing adjustment	Overhead cost per client, paid contractually, which is in addition to MassHealth reimbursement for services rendered	Total cost per patient or member for doula services (MassHealth + Overhead contributions)
\$1,200* (*good faith estimate of <i>average</i> amount of doula services rendered)	x 1.6	= \$1,920	\$3,120



The above adjustment gives some idea of the amount of overhead costs needed per member or patient who receives doula services. Alternatively, a different option to project cost sharing would be roughly \$30,000 per 15 clients referred to be invoiced quarterly.

Please describe the amount of funding that your organization can put towards equitably sharing these costs in a given contractual year. (250 words or less)

III. Priority Populations Served

- How many referrals do you anticipate providing in a 12-month period? Currently, Accompany contracts include a range from 30 - 100 referrals per contract. (100 words or less)
- 16. How does your organization intend to prioritize which members or patients are referred for doula care? Please discuss why you are prioritizing these groups. (Considerations may be race, ethnicity, language spoken, health risk, level of unmet social needs, delivery site, region of the state, etc.) (250 words or less)

IV. Other Considerations & Letters of Support

- 17. Are there any other considerations related to your organization, interest in doula care, organizational leadership, funding sources, goals/vision for a successful partnership, value and mission alignment, etc.? (250 words or less)
- 18. Along with your answers to the above, please submit relevant letters of support from organizational leadership, key staff members, or health care sites you anticipate having crucial buy-in in order to have a successful partnership. A minimum of two letters of support is strongly suggested. Please ensure all letters are included when submitting the responses to this application.

Section 3: Next Steps

All requests for partnership materials are due to Christina Gebel, MPH, Co-Founder and Interim Executive Director of Accompany Doula Care by Friday, August 18, 2023. Materials should be submitted by the close of business day (5 PM EDT) to *christina@accompanydoulacare.com*. For ease of submitting via email, all materials should be in PDF format in one single PDF document or separate clearly labeled documents.

Strong partnership proposals will be invited for an interview to discuss the application and to meet key stakeholders in the partnership. Interviews will be held in September 2023. Final decisions will be made on or before October 15, 2023.



The administrative start time for new partnerships will commence in Q1 of 2024, anticipating 8-12 weeks of putting in place contracts, workflows, and payment.

NOTE: Current partners with Accompany must still apply to the RFP in order to be considered for continuation of partnership in 2024. The partner organization and Accompany will set parameters as to how the contract should be revisited, grounds for renewal, annual review, evaluation of impact, and other important milestones.

To learn more about Accompany Doula Care, please visit *www.accompanydoulacare.com*.

Questions on this document? Please email *christina@accompanydoulacare.com*.

Thank you for your interest in partnering with Accompany Doula Care.

Section 4: Appendix

A. Frequent Asked Questions About Our Model

1. How many client referrals do you normally take?

The total amount of referrals in a given partnership period is negotiated and agreed to by your organization and Accompany. Considerations of this total number include the following factors:

- Availability of doulas by language, race, and geography
- Capacity of doulas, i.e., number of clients any one doula can offer services to in a given time period. We frequently flex our team and hire based on contractual needs.
- Whether each referral results in the full scope of services. We consider a client who receives between 2-6 total prenatal and postpartum visits in addition to continuous birth support to have received the "full scope of services."
- The total number of referrals Accompany can commit to across partnerships
- The uptake from members or patients who are offered doula services
- 2. How are your doulas trained?

The majority of our doulas are trained in the DONA International model, though several have received local training as well, such as through the *Birth Sisters* or *Cambridge Health Alliance*. Accompany evaluates each doula hire on an individual basis and is participating in the credentialing workgroup led by the MA Department of Public Health. Accompany also engages in regular mentorship with doulas as well as continuing education (racial justice,



trauma-informed care, etc.), while leveraging the benefits and added support of working as a doula in a group and learning from one another.

Beyond these points, the depth and experience of our doulas makes our team unique. Many come to doula work for personal reasons, sometimes as a second or third career, and some train as doulas to enhance their current work whether in healthcare, behavioral health, medical interpreting, or otherwise. Our doulas are able to use their other professional expertise to support the organization in multiple ways. As a larger group, our doulas support each other with a robust web of resources.

3. Do you offer services in person or virtually or both?

After the onset of COVID-19, Accompany pivoted to hybridized model that can now easily be activated when either the doula or the client tests positive for a communicable illness. All of our doulas use personal devices with a virtual private network (VPN) and anti-virus and malware software. Our doulas also use Mahmee, an online client management platform that is HIPAA compliant, for documenting services rendered in prenatal and postpartum visits, continuous birth support, and short engagements with clients via phone/text throughout the course of the relationship. Please note that these modes of communication may require additional waivers or consents. The default of the mode to deliver services (in-person vs. virtual) is agreed upon by the doula and the client or necessitated by infectious periods and risk (e.g., COVID-19).

4. What topics do you cover in prenatal and postpartum visits?

The value of our mentorship model and employing doulas who meet and learn from each other as a group is that our doulas are regularly offering ideas and feedback in a co-learning environment. That said, we offer a topical list for visits while balancing the desire for each doula-client relationship to be unique to the needs of each client. See above in the RFP for sample topics covered in prenatal and postpartum visits.

5. What does the overhead amount cost-share cover?

Some of our organizational costs beyond paying doulas for services includes:

- Staff salaries (Executive Director, Associate Director, Program Director, Operations Coordinator, Data Analyst, Billing, Grant & Research Management, Financial Management)
- Human resources, employment law, HIPAA compliance, IT, and business development consultants
- Services not included in the MassHealth reimbursement rate based on our four years of data



- Several communications with clients outside of formal prenatal/postpartum visits in the form of phone calls and texts (sometimes daily during critical times)
- Missed birth compensation (when a doula does not attend a birth through no fault of the doula) for having spent time on call
- Documentation and travel time
- Training and continuing education fees
- Liability and director/officers insurance
- Virtual office fees & staff in-person meeting spaces
- Banking, accounting, payroll, and bookkeeping fees
- Branding, website, and communications
- Staff meeting and travel expenses
- State filing fees and other 501c3 costs
- Other miscellaneous expenses
- 6. Have additional questions?

We are happy to provide information for additional questions not answered here. Please email *christina@accompanydoulacare.com* for further information.