

Commercial Insurance & Fee Policy

Doula benefits are great! Let me help you understand how I leverage your benefits, while preserving high-quality care.

When I work with a client using doula insurance benefits, I bill for the full benefit amount (all prenatal visits, in-person birth support, and extended postpartum visits). The benefit is not designed to be split across birth AND postpartum work, without greatly sacrificing the quality of care given by both the Birth or Postpartum Doula. My process and level of commitment to you require that we utilize all the hours of support covered by your insurance.

Please review your insurance coverage before our consultation. I am more than happy to answer your questions, and it is helpful when you are familiar with your plan.

Here are a few resources to help you identify what your plan covers:

[MediCal & HealthNet Benefit Breakdown](#)

[Kaiser Benefit Breakdown](#)

For Anthem, BCBS, and private benefits programs, you pay upfront, and I issue a Superbill for you to be reimbursed directly.

Why I charge for non-covered services

Doula care is fundamentally different from medical care, and it doesn't fit neatly into an insurance model built around clinical visits and shift work.

Doula insurance benefits are typically set about \$1,000 below the average doula fee in the Bay Area, and excludes compensation for critical services we provide. I want to be sure that my equitable approach to caring for you also preserves the longevity of my work. **I bill for your full benefit and ask for a supplement of \$600-1000, determined by a sliding scale survey to cover services not compensated by your insurance plan.**

What your insurance benefits don't cover

- We live on-call, making real sacrifices to our own schedules and routines to be ready for you at any hour.
- We support labors in dynamic ways — staying in close communication via phone long before we join you at your home or the hospital. We adapt our support to a variety of circumstances including unusually long labors.
- We stay by your side for upwards of 18 hours at a birth — far beyond any normal shift worked by your hospital care team.
- We invest in your family emotionally, becoming genuinely involved in the inner workings of your home life, and personal wellbeing.

- We're available for last-minute schedule changes and middle-of-the-night calls, holidays included.
- We give energetic, compassionate care built on a lasting relationship — you're in our minds at all times, and we check-in routinely by phone and text.

Insurance doesn't pay differently depending on how long we are supporting your birth (day or night), our training and credentials, or years of experience. It doesn't pay us to be on-call. It only pays for hourly work — and this kind of care can't be accurately valued in that model.

Why doula support is more powerful without regulation

Doula benefits give more families access to our care, which I believe is essential. But bringing doulas fully into the healthcare system also means regulating — and limiting — the kind of care we can provide. This has already begun in small ways, like agreements in the insurance contracting process that define what doulas can and cannot do in the hospital room.

Traditionally, a doula serves as an independent witness to your birth. If something happens during your birth that makes you feel less cared for or unsafe, that independence lets us help identify and push back against things like:

- Pressure to make a decision, or judgment of your feelings of what is right and wrong
- Non-consent, or proceeding without real consent
- Your needs, questions, or preferences being ignored or dismissed
- Non-collaboration with you — remember, YOU are the primary decision-maker in your birth — or counseling that goes against your wishes for your care or your baby's.

A doula never wants to come between you and your care team. But our independence lets us act as a layer of protection and validation, so you can birth as freely as possible within the bounds of health and safety. Folding doulas into the regulated healthcare industry, despite us occupying a non-medical role, erodes the security we often provide to you during a vulnerable experience.

Where your fee goes

My fee isn't just the hours I spend with you. Here's how a typical engagement breaks down in time, based on my own practice.



Not pictured, because they aren't hourly: roughly one month of on-call availability for every client, and about 40% of the

fee going toward self-employment taxes and health insurance.

An equitable approach

For families who qualify for Medi-Cal or are facing financial hardship, I take a different approach. I adjust fees individually so that cost is never the reason someone goes without doula support — while still protecting the long-term sustainability of my practice.

If this applies to you, please make it known, so that I can meet you where you're at.