

**The Florida Senate**  
**BILL ANALYSIS AND FISCAL IMPACT STATEMENT**

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

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Prepared By: The Professional Staff of the Committee on Commerce and Tourism

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BILL: SB 1456

INTRODUCER: Senator Osgood

SUBJECT: Doula Workforce Development

DATE: February 3, 2026

REVISED: \_\_\_\_\_

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Dike	McKay	CM	<b>Pre-meeting</b>
2.			ATD	
3.			FP	

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**I. Summary:**

SB 1456 creates the Doula Workforce Development Program within the Department of Commerce (department) to increase the doula workforce in the state. The program intends to reduce disparities in maternal and infant health outcomes through grants to doula training entities, focusing on communities with limited or few healthcare resources. The bill gives the department rulemaking authority to develop the grant process and implement the program. The bill also includes yearly reporting requirements for the department and appropriates funds for 2026-2027.

The bill takes effect on July 1, 2026.

**II. Present Situation:**

**Doulas**

Doulas are non-clinical professionals that provide support during and after pregnancy alongside medical professionals.<sup>1</sup> Doulas may specialize in pregnancy, birth, or postpartum issues, or offer support throughout the reproductive journey.<sup>2</sup> Among many other tasks, doulas can provide emotional support and patient advocacy before and during birth; assist with housework and childcare; and teach proper breastfeeding techniques.<sup>3</sup> Studies show that doulas improve health outcomes during pregnancy, “mitigating health disparities in groups at risk due to racial and

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<sup>1</sup> CLEVELAND CLINIC, *Doula*, available at <https://my.clevelandclinic.org/health/articles/23075-doula> (last visited Feb. 3, 2026).

<sup>2</sup> *Id.*

<sup>3</sup> *Id.*

socioeconomic stigmas via their roles as intermediaries between pregnant women and healthcare staff.”<sup>4</sup>

Further research shows that doula support can reduce healthcare expenditures during pregnancy and help avoid costly healthcare emergencies.<sup>5</sup> One model revealed that “a professional doula was potentially cost-saving up to \$884 and cost-effective up to \$1360 per doula.”<sup>6</sup> While some states have required Medicaid or private insurers to cover doula services, many people cannot afford doula services.<sup>7</sup>

Additionally,

[b]eyond cost savings, the broader health benefits of doulas are well documented across the pregnancy and care continuum... and include:

- a 15% improvement in the likelihood of having a spontaneous vaginal birth;
- a 40% reduction in the likelihood of cesarean births;
- a more than 20% reduction in the odds of preterm birth;
- a 10% reduction in the use of pain medications during labor;
- an average 41 minute reduction in total labor time;
- a four-fold reduction in babies with a low birth weight;
- a two-fold reduction in birth complication;
- a 35% reduction in the likelihood of having a negative birthing experience;
- a nearly 65% reduction in the odds of experiencing postpartum anxiety or depression; and
- a 20% improvement in the likelihood of breastfeeding initiation among Medicaid recipients.<sup>8</sup>

### III. Effect of Proposed Changes:

#### Doula Workforce Development Program

The bill creates the Doula Workforce Development Support Program within the department to provide grants and technical assistance to doula training entities to expand the state’s doula workforce. The program must prioritize support for entities service high-need regions, including:

- Urban counties with high maternal morbidity disparities;
- Rural areas with limited or no obstetric providers or maternity wards; and
- Communities affected by recent hospital closures or reductions in maternity services.

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<sup>4</sup> Alexandria Sobczak, et al., *The Effect of Doulas on Maternal and Birth Outcomes: A Scoping Review*, CUREUS 15(5), May 24, 2023), available at <https://pmc.ncbi.nlm.nih.gov/articles/PMC10292163/#abstract1> (last visited Feb. 3, 2026).

<sup>5</sup> Karen S. Greiner et al., *The Cost-Effectiveness of Professional Doula Care for a Woman's First Two Births: A Decision Analysis Model*, 64 J. MIDWIFERY WOMEN'S HEALTH 410 (2019), available at <https://pubmed.ncbi.nlm.nih.gov/31034756/> (last visited Feb. 3, 2026).

<sup>6</sup> *Id.*

<sup>7</sup> Ariel Eastburn, et al., NAT'L HEALTH LAW PROGRAM, *A Cost-Benefit Analysis of Doula Care from a Public Health Framework* at 10, available at <https://healthlaw.org/resource/a-cost-benefit-analysis-of-doula-care-from-a-public-health-framework/> (last visited Feb. 3, 2026).

<sup>8</sup> *See id.* at 12.

## Grants

Under the bill, the department may award competitive or formula-based grants to eligible doula training entities. The department is not allowed to use funds to directly recruit, hire, or employ doulas as state employees or contractors. Grant funds may be used for any of the following:

- Training, mentoring, or apprenticeship program expansion.
- Instructor compensation and curriculum modernization.
- Recruitment and support of trainees from high-need regions.
- Program administration, evaluation, and outreach.
- Business development training for doulas, including assistance with incorporation, insurance, marketing, and entrepreneurship.
- Stipends or workforce support for newly trained doulas, administered through the eligible entity.
- Partnership development with hospitals, Medicaid managed care plans, clinics, community health workers, Healthy Start coalitions, or other maternal health service providers.

The bill further grants the department rulemaking authority to implement this bill. The department must consider the following when developing grant criteria:

- The demonstrated capacity of the entity to train or mentor doulas.
- The geographic areas served and the documented need for doula workforce expansion.
- The entity's experience serving culturally diverse and high-disparity populations.
- Partnerships with workforce development boards or educational institutions.
- Plans for sustainability and long-term workforce placement.

## Reporting

Each year the department must submit a report to the Governor, President of the Senate, and the Speaker of the House of Representatives, which summarizes:

- Grant recipients and award amounts;
- The number of doulas trained, mentored, or supported by funded entities;
- The geographic distribution of program activities;
- Workforce outcomes, including business development successes and job placements; and
- Recommendations for program improvements.

## Funding

Additionally, the bill appropriates \$7.5 million to the department to implement the program. Up to \$500,000 of the funds may be used by the department for administrative expenses, program management, technical assistance, and data collection and evaluation. The remaining funds must be distributed as grants pursuant to s. 445.0075, F.S.

## Effective Date

The bill sets forth an effective date of July 1, 2026.

**IV. Constitutional Issues:**

## A. Municipality/County Mandates Restrictions:

None.

## B. Public Records/Open Meetings Issues:

None.

## C. Trust Funds Restrictions:

None.

## D. State Tax or Fee Increases:

None.

## E. Other Constitutional Issues:

None identified.

**V. Fiscal Impact Statement:**

## A. Tax/Fee Issues:

None.

## B. Private Sector Impact:

Indeterminate. Grants may increase the doula workforce, creating jobs and increasing revenue for doula support businesses.

## C. Government Sector Impact:

The bill appropriates \$7.5 million to the department for implementation. Funds appropriated under the bill which are not encumbered by June 30, 2027, must be returned to the General Revenue Fund.

**VI. Technical Deficiencies:**

None.

**VII. Related Issues:**

None.

**VIII. Statutes Affected:**

This bill creates section 445.0075 of the Florida Statutes.

**IX. Additional Information:**

- A. **Committee Substitute – Statement of Changes:**  
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

- B. **Amendments:**

None.

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This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

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