

SUPPORTING STATEMENT - PART A

Childbirth and Breastfeeding Support Demonstration Survey

OMB Control Number 0720-0070

Summary of Changes from Previously Approved Collection

- *The survey instrument has added two content questions and seven demographic questions, as well as updating the race/ethnicity question to be compliant with SPD-15.*
 - o *Q14: Open-ended question asking for feedback about giving birth in the Military Health System*
 - o *Q23: Question about outpatient lactation services*
 - o *Demographic questions: duty status, job category, partner duty status, branch of service, and rank.*
- *Race/ethnicity question (Q47) revised to comply with SPD-15*
- *The estimated burden decreased from 16,000 to 5,925 annual responses based on the real response rate observed in the last iteration of the survey.*
- *The estimated response time has been revised upwards by one minute to account for the additional questions.*

1. Need for the Information Collection

The survey is mandated by Section 746 of the William M. (Mac) Thornberry National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2021 (Public Law 116-283, enacted on January 1, 2021). Paragraph (e) delineates specific questions DoD is required to ask on the survey. These matters are covered by questions 3-7 and 32-50.

This survey will be used to evaluate the Childbirth and Breastfeeding Support Demonstration (CBSD), as part of the mandated Reports to Congress (Section 746, paragraph (f)). CBSD is a project that will cover services of certain extra medical providers (certified labor doulas, certified lactation consultants, and certified lactation counselors) over a 5-year period. The project is mandated by Congress in the same NDAA section, 746 of the NDAA for FY 2021.

Some questions may be used to evaluate more than one subject area. Questions 1 and 2 are screening questions that will aid in evaluation of responses to other questions. Questions that will be used to assist in the evaluation of maternal and infant outcomes (as required by Section 746 paragraph (f)(2)(B)(vi)) are 8-13, 16, 17, 21, 23, and 24. Questions that will be used to assist in evaluating the effectiveness of the CBSD project (as required by Section 746 paragraph (f)(2)(B)(viii)) are: 15, 22, and 28. Questions that will be used to assist in evaluating the quality of care under the CBSD (as required by Section 746 paragraph (f)(2)(B)(v)) are: 18-21, 25-27, and 29. Questions that will be used to assist in determining if adjustments to CBSD are needed (as required by Section 746 paragraph (f)(2)(B)(viii)) are: 22 and 28-30.

2. Use of the Information

The survey will solicit information from TRICARE beneficiaries who have given birth in the specified reporting period. The first reporting period was for beneficiaries who gave birth in calendar year 2021 and was followed by beneficiaries who give birth in each successive calendar year quarter through the end of 2026, with the final survey sent in early 2027. However, we are requesting the survey be renewed for a full 3-year period so that the DoD may continue to use it if the demonstration were to be extended beyond 2027.

Approximately 100,000 TRICARE beneficiaries give birth each year; about 60 percent of those births occur in private sector care and the other 40 percent in direct care (military treatment facilities [MTFs]). Transmitting the survey to the beneficiaries will be the same for both groups, though we are limited to surveying Active Duty Service Members for the direct care survey.

The survey will be conducted online through the Connect.gov portal. Eligible beneficiaries (i.e., beneficiaries who gave birth in the specified reporting period) will be sent an email with a link to the survey. One email address per private sector beneficiary will be provided to DoD by the TRICARE contractors who manage health care delivery. All beneficiaries who give birth and for whom DoD obtains an email address will be sent the survey, regardless of whether they choose to obtain medical benefits covered by the CBSD project (i.e., obtain the services of an eligible doula or lactation counselor or consultant).

Although the DoD does not allow direct care beneficiaries to participate in the CBSD project, DoD intends to survey this population in order to more accurately respond to Congress' survey requirements. Congress required that DoD survey all beneficiaries who give birth in the Military Health System. If only CBSD participants are surveyed, the results will not be fully accurate. However, due to limitations of our ability to collect emails from direct care, we are limited to surveying Active Duty Service Members (ADSMs). Although there are about 40,000 beneficiaries who give birth in direct care each year, we typically are only able to survey about 4,500 of them (approximately 11% of that population). In order to survey the direct care ADSM population, DoD will obtain email addresses from the Defense Manpower Database Center based on a list of ADSM beneficiaries who have given birth as listed in the Medical Data Repository. DoD will survey these beneficiaries using the same method as described above for purchased care beneficiaries.

Once the beneficiary completes the survey, the DoD will download the results from Connect.gov and send the results to the evaluation contractor for analysis. The end result of the survey will be data that can be used to develop mandatory Reports to Congress as well as recommendations for permanent implementation of some or all of the demonstration elements into the TRICARE Program. The DoD may also use the responses to narrative questions to consider changes to the TRICARE maternity care benefit outside of the CBSD. Since the survey was last approved, the DoD added a narrative question asking about the beneficiary's experience of giving birth as beneficiaries were providing this information in

response to CBSD-specific narrative questions; the DoD created this question to give beneficiaries a dedicated space to provide more general feedback.

3. Use of Information Technology

100% of the responses will be collected electronically through Connect.gov Survey platform.

4. Non-duplication

The information obtained through this collection is unique and is not already available for use or adaptation from another cleared source.

5. Burden on Small Businesses

This information collection does not impose a significant economic impact on a substantial number of small businesses or entities.

6. Less Frequent Collection

DoD will send the survey quarterly to beneficiaries who gave birth during the previous quarter. Beneficiaries will only be surveyed one time per pregnancy. If the collection is conducted less frequently, we will not have all the necessary data for reports and analysis, as required by law.

7. Paperwork Reduction Act and Other Guidelines

This collection of information does not require collection to be conducted in a manner inconsistent with the guidelines delineated in 5 CFR 1320.5(d)(2).

This collection's race/ethnicity question aligns with Figure 1 as described in the 2024 Statistical Policy Directive No. 15.

8. Consultation and Public Comments

Part A: PUBLIC NOTICE

A 60-Day Federal Register Notice (FRN) for the collection published on Monday, July 21, 2025. The 60-Day FRN citation is 90 FRN 34251.

Twenty-five comments were received during the 60-Day Comment Period. They are included below in the order they were received, as well as our Agency's response.

Comment ID: DOD-2025-HA-0212-0002**July 30, 2025**

I am an active duty officer and used the TRICARE childbirth and breastfeeding demonstration to cover the cost of a labor doula for the birth of my first child. I would say that this program is amazingly beneficial for military members and spouses because in most cases we are giving birth away from a traditional support network. In my case, I gave birth while stationed in Idaho but my parents live in North Carolina. Having a doula to help guide me through the child birth process and help me through the labor process was invaluable. There are a number of things that I never would have considered on my own and that my mom couldn't help with given she was so far away. I wouldn't have considered a doula had this program not been available. Of note, I would have liked to use this program for a lactation consultant but due to the contract change for Tri-west, none of the local consultants were able to get certified by the time I needed one. I was able to pay out of pocket but I am also an FGO, a junior officer or enlisted may not be able to do the same thing and the guidance I received from the consultant really helped me on my breastfeeding journey as a first time mom.

Comment ID: DOD-2025-HA-0212-0003**July 31, 2025**

I received care through Tricare's Childbirth and Breastfeeding Support Demonstration (CBSD). The support received was so important to me and I hope this is a benefit that other military families can benefit from for years to come.

Comment ID: DOD-2025-HA-0212-0004**July 31, 2025**

Because of the CBSD I was able to receive Doula support and lactation services during pregnancy, childbirth, and postpartum. Without the CBSD I wouldn't have been able to afford Doula or lactation services. As a first time mom, the CBSD has made my experience amazing. I am tremendously grateful for the CBSD and am hopeful to have it with my next pregnancy.

Comment ID: DOD-2025-HA-0212-0006**July 31, 2025**

I am a military spouse and dependent of an active-duty U.S. Marine. Through the Childbirth and Breastfeeding Support Demonstration (CBSD), I was able to access both doula services and lactation support, and I cannot overstate how valuable these services were to me and my family.

My experience with both providers was overwhelmingly positive. My doula supported me physically, emotionally, and mentally throughout my pregnancy, labor, and postpartum recovery. As a military spouse often navigating the demands of parenting with limited support, having a professional who could walk alongside me in such a personal and vulnerable season was truly empowering.

The lactation support I received after birth was also essential. I faced early breastfeeding challenges, and the in-home guidance from a certified lactation consultant helped me overcome pain, latch issues, and supply concerns. Without this support, I may not have been able to continue breastfeeding as long as I have.

The CBSD directly improved my birth experience and postpartum recovery. I felt more confident, informed, and emotionally supported—and I believe this had a positive ripple effect on my baby's well-being and our family as a whole.

One issue I encountered was that the referral and approval process was confusing and slow, which added unnecessary stress during pregnancy. There were also some delays in communication between Tricare and providers. Improvements in processing time, clearer instructions, and broader provider access would make this program even better.

I strongly urge the Department of Defense to make the CBSD a permanent benefit. Military families face unique challenges that affect maternal health and early childhood development. The support I received through this program made a tangible difference in my experience as a new mother, and I am deeply grateful for it.

In conclusion: Yes, I absolutely support the CBSD. Please continue—and expand—this program so more military families can receive the care and support they deserve.

Thank you for considering my experience.

Comment ID: DOD-2025-HA-0212-0007

July 31, 2025

Introduction: my name is Marisa [Last Name Redacted] and I'm a dependent of the Marine Corps and I utilized the CBSD Doula program from 11/2024 to 2/2025.

Experience: As a second time mom, I hired a doula in the interest of avoiding a second c section and high intervention birth. My doula was able to teach me safe labor encouragement strategies, help me labor at home and labor effectively in the hospital. She was able to instruct my husband on the best ways to support me. I was able to succeed in my goal for an unmediated VBAC and I credit my doula that achievement.

Benefits: I was able to avoid an operative birth, any pharmacological pain management or anesthetic involvement and have an uncomplicated recovery. I also believe my doula's involvement helped me have a successful postpartum period.

Issues: as the patient, I did not encounter any issues with the program, however, I do know my Doula did experience a delay in payment.

Proposal: I believe the CBSD is an imperative program to help moms have successful, low intervention births, that support healthy, postpartum periods, and build confidence in moms. These births are significantly lower cost to the insurer and support better postpartum outcomes for mom and baby. This program should be continued at low to no cost to mom's to foster a mutually beneficial relationship with Doulas who accept TRICARE.

Conclusion: I absolutely support the continuation of the CBSD!

Comment ID: DOD-2025-HA-0212-0005

August 1, 2025

We're a Navy Couple who used CBSD program for both Midwife and Doula services. This made having our firstborn child affordable and comfortable as tricare dependents. When it came to services we needed to get reimbursed thru tricare it wasn't too stressful and quick to receive. We definitely want this program to continue as both services prepared us for parenthood and gave us the confidence to grow our family and have two successful home births.

Comment ID: DOD-2025-HA-0212-0008

August 1, 2025

I am a dependent of the USAF and recently used a doula through the CBSD. Having a doula at this birth gave me redemption from a previously traumatic birth and completely changed my experience. I needed the CBSD's services and would've had another traumatic experience without them. Using a Doula through the CBSD was incredibly supportive during my birth because it gave me a sense of autonomy that I otherwise wouldn't have, my doula was also able to explain many of the medical aspects of things that I wouldn't have understood otherwise. She talked me through many hard decisions and helped me to make informed consent. I support the CBSD and needed it in order to have a successful birth experience!

Comment ID: DOD-2025-HA-0212-0009

August 1, 2025

My name is Lauren [Last Name Redacted], I wanted to speak out in support of CBSD. I received care from a Doula covered by TriCare during my first pregnancy and birth that occurred while my spouse was deployed. Without her presence, there would have been a potential likelihood that I would have had to deliver my first

child entirely on my own. Her services would not have been available to me without TriCare coverage, and I hope that option will continue to be available for future expecting moms.

Comment ID: DOD-2025-HA-0212-0010

August 2, 2025

I am a dependent who received the care of a Doula during my pregnancy and delivery. The support and knowledge of my Doula's capabilities helped me feel empowered and not afraid when it was possible my husband wouldn't make it to the birth of our child due to a military related separation. This program is beneficial to the mother, father and child. Military spouses rarely have family around during this huge transitional time of adding another baby to their families. Doulas can bridge the gap of familial support, teach the father how to help his spouse during child birth and beyond. The value of this program is immeasurable and I had a very positive experience with my Doula and the reimbursement process from Tricare.

Comment ID: DOD-2025-HA-0212-0011

August 6, 2025

The CSBD was an invaluable resource to me and my partner during pregnancy. As a military spouse who is away from family, our doula quickly became one of the most supportive people in our lives. This is an incredible resource for Tricare parents nationwide and should be continued beyond the expiry date. I completely support the CSBD and hope it is extended for families everywhere to benefit from.

Comment ID: DOD-2025-HA-0212-0012

August 6, 2025

Introduction: My spouse is in the Army, and I was able to hire a doula using CBSD.

Experience: My provider has been communicative, flexible, and supportive. CBSD has been instrumental in finding a supportive resource as my husband may not be present during the birth of our child. Not only has my doula been incredibly informative, but I feel as though my next childbirth will have a greater chance of success (I am attempting a VBAC).

Benefits: I am more prepared for labor by being more knowledgeable about the process.

Issues: The only issue I ran into was finding a doula. I got very lucky that my doula recently moved to my area; otherwise, no other doulas in the area accepted Tricare and I would not have been able to afford to pay out of pocket.

Proposal: Is there a reason many doulas in the area (I live right next to an Army base) don't accept Tricare? I suggest surveying doulas to discover any possible hurdles so that more doulas will be more likely to accept Tricare.

Conclusion: I support CBSD. It has been instrumental in my VBAC journey.

Comment ID: DOD-2025-HA-0212-0013

August 8, 2025

This was my first birth as a first time mom. My husband is an active duty soldier in the army the last 12 years. We decided to take our journey and begin the process.

I looked into both a doula and a lactation consult and was able to secure both. This allowed me to have a safe delivery and support that I would not have had other wise. In turn that allowed my husband to continue the mission with piece of mine as he was at warrant officer candidate school from pregnancy weeks 33 to 38. I had the support that my family could not provide as we are not close in location due to military. Please keep this program going as it was most important.

Comment ID: DOD-2025-HA-0212-0015

August 10, 2025

Good afternoon,

I am an active duty spouse and I utilized the doula services allowed by tricare last year for the birth of my daughter. I am also an RN IBCLC who worked at Portsmouth Naval on contract and am presently in network with Tricare East via a private lactation company so I know the value of these services. Having a covered doula to help prepare for childbirth and during childbirth helped my daughter avoid a c-section (she was breech) and my doula helped me to advocate for a version with my OB and was able to have a successful

vaginal delivery WITHOUT an epidural! A huge success and a huge savings to the costs associated with my birth. On a personal and professional level I have seen first hand the benefits to these services being covered not just to the birthing mother but also on the overall cost reduction for services rendered. Allowing this program to continue would continue to give families a supported birth with or without their service member present and reduce costs associated with surgical births, cost of formula, and the cost to mother's mental health of feeling alone in this vulnerable period of life. I am happy to further share my experiences and am available via email or phone. Warmly, Linda

Comment ID: DOD-2025-HA-0212-0014

August 11, 2025

Having access to a doula covered by Tricare gave me tremendous peace of mind during my second pregnancy. I did not have this option during my first pregnancy and ended up having a very medically complex and dangerous delivery. Knowing I would have support and direction from an advocate and professional during my next childbirth experience allowed me to enjoy other aspects of my pregnancy and to be more focused on my job in the Navy. Heather was professional, warm, knowledgeable, and offered me so much more time and support than any of my medical providers were able to. I would not have paid for a doula out of pocket if the insurance coverage was not available as I wasn't familiar enough with the services doulas offered to know if it was worthwhile.

Comment ID: DOD-2025-HA-0212-0016 & DOD-2025-HA-0212-0017

August 14, 2025

I'm Mikaela & my husband is in the Air Force. We got to use a doula that was completely covered by insurance for the pregnancy and birth of our first child. Having a doula was a tremendous help during my pregnancy and labor. I was able to have a safe and supported labor because of our doula. It was especially important because our family was too far away to be there. I fully support the CBSD because it gives military mom's the knowledge, support, and stability that is hard to have in this lifestyle and without insurance, many could not afford it.

Comment ID: DOD-2025-HA-0212-0018

August 14, 2025

I am a military veteran and dependent of an active duty Air Force service member. I've had 3 children and this last pregnancy and postpartum period, I was able to use doula and lactation support services that had not been previously covered by Tricare.

My experience this third time was so much better than prior experiences and both my baby and I, as well as my spouse, had better outcomes due to the support we received through the CBSD.

These positive outcomes included more knowledge regarding prepping for birth and baby such as having an idea of who in my village I planned to go for coffee with, help with babysitting my big kids when I needed a break or just coming over to help out in those early days, laboring positions and pushing positions, latch issues, clogged duct support, and so much more. My family, including my active duty spouse, had an easier transition and he was able to focus on his job more due to the doula and lactation support I received, proving to us, that the CBSD was beneficial for personal and professional reasons.

Conclusion: I absolutely support the CBSD and think it is a great resource for families whether they are expecting their first baby or their 12th.

Comment ID: DOD-2025-HA-0212-0019

September 4, 2025

I'm writing in regards to Tricare's Childbirth and Breastfeeding Support Demonstration (CBSD). I was fortunate enough to use this program with my second baby in 2023 and it will always have a lasting impact on my family's life. My second baby was premature and born at 32 weeks gestation. As a military family, we didn't have a support system/family to help us during this time. My doula was essential to providing me the care I needed physically, mentally, and emotionally during my son's birth and that wouldn't have been possible without the program. If this program is ended, so many military families who don't have a support system will have to face many hardships without a doula during the birth and postpartum process.

Comment ID: DOD-2025-HA-0212-0020**September 9, 2025**

I am an active duty member of the Air Force who used both the doula and lactation services during labor and postpartum. I went into birth equipped for a range of possibilities after the childbirth education my doula provided and she was right by my side through the labor and delivery experience. It was amazing to be supported through birth and to have her knowledge as things came up during labor. I am also very grateful for the multiple lactation consultants I have met with postpartum to help both my son and I in our breastfeeding journey. It would be amazing to have more tricare approved providers in the area for both doula and lactation services.

All in all, I absolutely support the CBSD and would love for it to continue so I can have the same great experience for my next pregnancy and post partum experience.

Comment ID: DOD-2025-HA-0212-0021**September 15, 2025**

Introduction:

I am a military spouse (dependent) who received care through the CBSD program. I utilized both lactation care and doula services.

My experience with the CBSD program was truly a game changer, especially as my family had just navigated a new move to Hawaii, which is a common challenge for military families and other times with no family support. Having access to a doula who understood the unique needs of military life, had resources, and could serve as an advocate made a significant difference. The support I received made my birth experience not only smooth but also positive, while alleviating the burden on my husband, who is an active-duty service member and preferred to step back from the direct aspects of childbirth. I would recommend these services over and over again to other families.

The program provided me with a positive birth experience, reduced stress, and helped me understand rules and limitations I would not have otherwise known. For example, I learned that VBACs are limited to certain hospitals in Hawaii, which is vital information for families relocating without local knowledge. The CBSD provided the support and advocacy I needed to successfully navigate these challenges.

The main issue I encountered was with the referral process. This became a significant obstacle when Tricare switched contractors and platforms in January 2025. The transition caused delays and confusion and left me with unanswered questions and hours on the phone with no productive help, which made accessing services more complicated than necessary.

I strongly recommend that the CBSD program be continued beyond its current expiration date. It should be made permanent and more accessible to military families across all locations. Streamlining the referral process and ensuring continuity of access during contractor or platform transitions would make the program even more effective.

To conclude, I fully support the CBSD program and strongly believe it should become a permanent benefit for military families. The services provided have had a profound and positive impact on my family and me, and expanding and improving the program would benefit countless others in the military community.

Comment ID: DOD-2025-HA-0212-0022**September 15, 2025**

Hello, I am the spouse of a retired US Army veteran. I am writing today about my 2 birth events (one while my spouse was active duty, and the second just 6weeks ago while he was retired). I have utilized both a doula, and lactation services for both births, and I am currently utilizing Lactation services.

Both times I used a doula I was very satisfied with my experience. I believe the presence of a doula helped to facilitate vaginal deliveries and helped within the postpartum period. While I had unavoidable complications with my first, my second was very different, but I feel my doulas support helped reduce the cascade of

interventions and gave me the confidence and support to have a fantastic vaginal delivery. I think my doula support in both cases reduced birth trauma. My doula was the only person present during my second birth and was integral to my ability to birth without fear.

My first breastfeeding experience would have ended as soon as it started without the guidance of experienced lactation professionals. My son and I both had issues and he lost too much weight which required weighted feeds and multiple visits to the lactation consultant, we needed to use a nipple shield, a supplemental nursing system, and do triple feeds. It was all a lot for a first time mom whose baby spent time in the NICU. However, without that support I certainly couldn't have been successful breastfeeding. Now, with my second baby I'm having some problems, though not as extensive as with my first, and a lactation consultant has significantly help us be successful on my second breastfeeding journey.

With my first the program was new, so my doula had a hard time being reimbursed, and was not fully reimbursed for all services provided, though she didn't hold it against me and she absorbed the cost which isn't fair to her. The next issue encountered is that in both states I gave birth in there was a single doula who was in network for this service. So if the doula and I didn't get along that would have been the end of that. If she had been fully booked my options would have ended. If there is a way to increase the amount of in network providers and make the process easier that would be beneficial especially in cities located very close to military bases because there only being one doula in large areas means many people are missing out on such a valuable service. The service also isn't very well known, and it may be because there are so few covered doulas or it's just not talked about enough.

Overall, I find both lactation and doula services incredibly beneficial and key factors in my successful delivery and subsequent nourishment of my children. I believe the CBSD program should be talked about more and hope it continues so more women can be empowered in birth and breastfeeding. The benefits of this program can't be stressed by me enough. Thank you.

Comment ID: DOD-2025-HA-0212-0023

September 15, 2025

Introduction:

I am a dependent of an Air Force service member and used the CBSD doula support services.

Experience and Benefits:

My doula was exceptional—knowledgeable, attentive, and available for one-on-one support in ways that doctors cannot provide during short appointments. During labor, she advocated for my preferences when I could not, bridging communication with the medical staff and providing emotional and practical support. She guided me through interventions I would never have known to request, such as preventing blood clots from the epidural and reducing tearing, which prevented later complications. She also helped reduce stress by providing comfort techniques and reassurance that my partner could not. Overall, her presence made the birth experience safer, less stressful, and far more positive.

Issues and Proposal:

The program was excellent, though expanding provider availability and streamlining referrals would increase access. I recommend more CBSD providers and clearer communication about available services to ensure all families can benefit.

Conclusion:

I strongly support the continuation and expansion of CBSD. It provides critical, individualized support that enhances both safety and wellbeing during childbirth for military families. Please continue and improve this program so more families can experience these benefits. Yes!

Comment ID: DOD-2025-HA-0212-0024

September 15, 2025

I had such a great experience with CBSD. My Wife and I felt very supported and much more comfortable with this important chapter in our lives knowing we had the full support of our Doula. I am grateful for the opportunity to have such an amazing service, and I cant wait to utilize it again in the future.

Comment ID: DOD-2025-HA-0212-0025**September 15, 2025**

So grateful that Tricare covered my doula service. With my husband being active duty and us being 2500 miles away from our nearest family, the uncertainty of who can actually be present is so real and so big. It became another anxiety that consumed me during pregnancy. To know that I could count on my doula to be there no matter what and to support me through the process, took away so much anxiety. Anxiety that no pregnant woman should have to face alone.

Comment ID: DOD-2025-HA-0212-0026**September 16, 2025**

As the wife of an active-duty United States Marine Corps service member, I want to share my personal experience with the services I was able to access thanks to Tricare's Childbirth and Breastfeeding Support Demonstration (CBSD).

The CBSD made an incredible difference in the outcome of my pregnancy, labor, delivery, and postpartum journey as a first-time mom. I gave birth to my daughter in May 2025, and thanks to Tricare's coverage under CBSD, I was able to receive professional support from a certified doula and an International Board-Certified Lactation Consultant (IBCLC).

Being stationed far from family, my doula served as a crucial source of emotional and physical support during labor. Her presence not only made my unmedicated birth safer and healthier, but also helped fill the gap left by being so far from our loved ones. She educated me on my birth options, helped me prepare mentally and physically, and supported me throughout labor and delivery, resulting in a healthy baby and a smooth recovery.

Postpartum, I had access to an IBCLC who provided a wealth of knowledge to ensure my baby and I had the most overwhelmingly positive breastfeeding experience. Without her help, my daughter would have continued to struggle with a lip and tongue tie, which she quickly identified and addressed. My daughter would not be as healthy and thriving as she is now without this invaluable support.

Accessing these services through the CBSD was straightforward, and both my doula and lactation consultant provided unparalleled care that was professional and compassionate. However, I did experience limitations on when coverage begins. Because services are tied to specific stages of pregnancy, it was difficult to prepare early for labor or schedule prenatal lactation support, which would have made an incredible difference in easing the transition into motherhood.

I strongly advocate for expanding the CBSD to allow earlier access to these services during pregnancy. Doing so would enable military families like mine to make informed choices, schedule care in a timely manner, and reduce last-minute stress due to local providers being in high demand.

This program is a lifeline for military families navigating pregnancy and parenthood far from home. I wholeheartedly support the continuation and expansion of the CBSD. Ensuring continued access to doulas and IBCLCs is vital to improving the health and well-being of both mothers and babies in our military community.

By providing this essential support, Tricare honors the service and sacrifice of military families and upholds a standard of care that all families deserve.

Comment ID: DOD-2025-HA-0212-0028**September 16, 2025****Experience and Benefits:**

I am a Navy dependent, and I was blessed to have access to a birth doula through the CBSD for the birth of my first child this spring. My provider was excellent. I have never in my life felt that I was truly known and looked out for by a medical professional in the way my provider made me feel that I was. She was extremely well educated and gave me numerous resources on pregnancy, labor, delivery, postpartum, breastfeeding, and

baby care. I felt so confident going into my birth that I was sure no complication could get in the way. I was given tools that most of the women I know who are in their child bearing years don't even know exist. I was made for motherhood, including the trial of labor and delivery, and I had nothing to fear. My doula helped me come to believe that earnestly. At 4 months postpartum I have since moved across the country and been left to care for my baby while my husband is deployed, and I still feel the support of my doula. She reaches out periodically to check in, but even if she didn't I would be left with the incredible memories of her calm and collected service to my husband and I in an immense time of need. She was the support we needed, as we had no family and only a few friends nearby to help us, just like so many other military families. I am so incredibly grateful for the CBSD. My birth experience was not only the happiest day of my life, but a day on which I felt most like myself: a woman who could and did sacrifice her body for her beloved. I know so many women who think that they simply can't succeed in childbirth from the get go, and plan to be heavily medicated or completely unconscious for the birth of their children. It is unnecessary, risky, and costly. The more women who receive the education I was privileged to receive, the more women who will find empowerment in their experiences.

Issues:

I encountered many difficulties in the referral process to receive coverage for my birth doula care. I was initially given a referral to a company which did not provide birth doulas. I requested a change to a company that did, the only one in my area. That company did not have a provider available to me, so I requested a referral to an independent doula that was out of network instead. They refused my request despite my explanation that I had no in-network options. Weeks and weeks of misunderstanding were finally resolved only when my eventual doula called the referral office herself to clear up the situation. Thank God she was familiar with Tricare's intricacies. I was very ready to give up. I think, generally speaking, many people I spoke to about my birth doula referral seemed to be totally unfamiliar with the term and what it is that they do. That is understandable, but it created quite a roadblock. After the birth, I was charged the full amount due to my doula provider. Thankfully, I never had to reach out to them to clear the situation up, because my doula recognized the mistake before me and again communicated on my behalf.

Proposal:

My only suggestion to improve the CBSD would be to increase employee understanding to ease the process of referrals and claims.

Conclusion: I heavily support the CBSD and I hope and pray that it is in effect for the birth of my future children during our family's time in the Navy. It is truly an invaluable benefit to military spouses and service members. I will never forget or cease to be grateful for its impact on our life and our family.

Comment ID: DOD-2025-HA-0212-0029

September 16, 2025

I am a military spouse who used my Tricare coverage of CBSD to have a doula present during my son's birth on 9/12/2025. If the military wants to continue to say that it is family friendly and supporting the families that support our troops, then these programs need to stay in place. We are moved all over the country away from our families and support systems and these programs make that feeling of isolation much more tolerable. I was able to give birth to my son with minimal complications in part due to the preparation from my doula. So not only is this benefit helpful for families I wouldn't be surprised if it lowered the costs that Tricare has to pay overall for births. There should be studies to look at doulas and lowered levels of postpartum depression. I would not be surprised because my doula made a huge difference. I was also able to go without an epidural so these programs need to be extended and more awareness given to spouses so they can take advantage of them. Discontinuing services like this would just show that our government doesn't truly care for those who serve and only out to serve the growing numbers of corporations buying representatives.

Comment ID: DOD-2025-HA-0212-0027

September 17, 2025

As a dependent of a service member (Navy Reserves), I used the doula service of the CBSD. Having the ability to access this service included with insurance has given me reassurance and peace for this upcoming birth. Its so valuable to have the comfort of an additional support person when you're going through an emotionally

and physically vulnerable time. Additionally, I've greatly benefited from the education this service has provided and not only would participate again for future births but recommend this service to all!

DHA Program Office Response:

Many commenters expressed their support for the demonstration. While these comments do not address the survey itself, we appreciate the support of the demonstration.

Several commenters shared difficulties experienced while participating in the demonstration. Consideration of changes to the demonstration are beyond the scope of this survey. However, we appreciate the feedback and may use it in other contexts as part of the demonstration.

A 30-Day Federal Register Notice for the collection published on Tuesday, September 23, 2025. The 30-Day FRN citation is 90 FRN 45754.

Part B: CONSULTATION

No additional consultation apart from soliciting public comments through the Federal Register was conducted for this submission.

9. Gifts or Payment

No payments or gifts are being offered to respondents as an incentive to participate in the collection.

10. Confidentiality

A Privacy Act Statement is not required for this collection because we are not requesting individuals to furnish personal information for a system of records.

A System of Record Notice (SORN) is not required for this collection because records are not retrievable by PII.

A Privacy Impact Assessment (PIA) is not required for this collection because PII is not being collected electronically.

As applicable, records will be maintained in accordance with the following records disposition schedules:

FILE NUMBER: 905-02

FILE TITLE: Quality Assurance Studies and Analyses of Healthcare Quality Standards

FILE DESCRIPTION: Files pertaining to the quality assurance analysis of DoD, other federal agency, State and local, and other healthcare standards including studies and analyses that result in issuance of new standards.

DISPOSITION: Permanent. Cut off upon completion of standard. Transfer to NARA 25 years after cutoff.

AUTHORITY: NC1-330-77-005, item 905-02a and 905-02c

FILE NUMBER: 905-03

FILE TITLE: Ad Hoc Quality Assurance Studies and Analyses of Healthcare Quality

FILE DESCRIPTION: Studies and evaluations on a "when required" basis, not resulting in issuance of new standards.

DISPOSITION: Temporary. Cut off upon completion of study. Destroy 5 years after cutoff.

AUTHORITY: NC1-330-77-005, item 905-02b

11. Sensitive Questions

Section 746 of the NDAA-2021 requires DoD to ask questions related to race/ethnicity, and other demographic information as part of the survey. DoD's questions are in compliance with OMB's current standards.

12. Respondent Burden and its Labor Costs

Part A: ESTIMATION OF RESPONDENT BURDEN

1) Collection Instrument(s)

Childbirth and Breastfeeding Support Demonstration Survey

- a) Number of Respondents: 5,925
- b) Number of Responses Per Respondent: 1
- c) Number of Total Annual Responses: 5,925
- d) Response Time: 10 minutes
- e) Respondent Burden Hours: 987.5

2) Total Submission Burden

- a) Total Number of Respondents: 5,925
- b) Total Number of Annual Responses: 5,925
- c) Total Respondent Burden Hours: 988

Part B: LABOR COST OF RESPONDENT BURDEN

1) Collection Instrument(s)

Childbirth and Breastfeeding Support Demonstration Survey

- a) Number of Total Annual Responses: 5,925
- b) Response Time: 10 minutes
- c) Respondent Hourly Wage: \$31.48
- d) Labor Burden per Response: \$5.25
- e) Total Labor Burden: \$31,106

2) Overall Labor Burden

- a) Total Number of Annual Responses: 5,925

b) Total Labor Burden: \$31,106

The Respondent hourly wage was determined by using the U.S. Bureau of Labor Statistics (<https://data.bls.gov/oes/#/industry/000000>).

13. Respondent Costs Other Than Burden Hour Costs

There are no annualized costs to respondents other than the labor burden costs addressed in Section 12 of this document to complete this collection.

14. Cost to the Federal Government

Part A: LABOR COST TO THE FEDERAL GOVERNMENT

Labor cost to the government calculated on government oversight of the survey portion of the contract, calculated at one hour per month for one GS-14 (\$611.64 annually) and one hour per month for one GS-13 (\$517.68 annually).

- 1) Collection Instrument(s)
Childbirth and Breastfeeding Support Demonstration Survey
 - a) Number of Total Annual Responses: 5,925
 - b) Processing Time per Response: 0 hours
 - c) Hourly Wage of Worker(s) Processing Responses: \$0
 - d) Cost to Process Each Response: \$0
 - e) Total Cost to Process Responses: \$0
- 2) Overall Labor Burden to the Federal Government
 - a) Total Number of Annual Responses: 5,925
 - b) Total Labor Burden: \$1,129

Part B: OPERATIONAL AND MAINTENANCE COSTS

- 1) Cost Categories
 - a) Equipment: \$0
 - b) Printing: \$0
 - c) Postage: \$0
 - d) Software Purchases: \$0
 - e) Licensing Costs: \$0
 - f) Other: The survey analysis portion of the contract supporting this survey is \$300,000.
- 2) Total Operational and Maintenance Cost: \$300,000

Part C: TOTAL COST TO THE FEDERAL GOVERNMENT

- 1) Total Labor Cost to the Federal Government: \$1,129

2) Total Operational and Maintenance Costs: \$300,000

3) Total Cost to the Federal Government: \$301,129

15. Reasons for Change in Burden

This is an updated collection with a revised associated burden. Nine survey questions are added to this survey for more targeted information collection on the demonstration. These additions have resulted in a slight increase in estimated response time (9 minutes to 10 minutes). However, overall, the estimated respondent burden has decreased because of a significant revision to our expected response rate based on the response rate observed in previous fielding of the survey.

16. Publication of Results

Results of the survey will be published in annual Reports to Congress, as required by Section 746 of the NDAA-2021. Data will be aggregated and used to evaluate the demonstration project, as well as to report on certain information required by Congress (for example, the number of single members who give birth alone). Additionally, DoD will compare responses between beneficiaries who utilize a service under the demonstration (either childbirth support or breastfeeding counseling/support) with those who do not use such services. DoD is using an independent contractor to assist in evaluation of the demonstration, to include survey results. Analysis includes examination of all free response text that respondents provide for additional insights; any Individually Identifiable Health Information or Protected Health Information included by beneficiaries in free text responses is removed from free text responses prior to analysis. Because of the novel nature of the benefit being provided under the demonstration project (nation-wide coverage of doulas and lactation consultants/counselors), DoD may consider publication of aggregate results in a medical journal in order to educate the public and the medical community on the demonstration's effectiveness and its impact on health outcomes.

17. Non-Display of OMB Expiration Date

We are not seeking approval to omit the display of the expiration date of the OMB approval on the collection instrument.

18. Exceptions to "Certification for Paperwork Reduction Submissions"

We are not requesting any exemptions to the provisions stated in 5 CFR 1320.9.