Chanell Noise

**Project Memo**

When I was pregnant with my first child, I thought I did my due diligence. I read up on healthy eating habits, nursery tips and the costs associated with childbirth. NPR’s segment, Bill of The Month, seemed to have new parents’ bills as horror stories every other month. I knew I didn’t want to end up stick with a hefty hospital bill- so I read up on my policy and chose a healthcare team in-network with my private insurance.

Parenthood is of course ripe with surprises. And I was by my son’s hospital bill. All the preparation I did was for naught because my son was born without insurance. My story explains the costs associated with childbirth and maternal care. It also explains how folks get caught in the crosshairs with these hefty bills and why this problem persists. The red tape, puzzling jargon and lack of customer service in the medical industry puts unnecessary pressure on new parents.

1. **What is the overall topic of your story?**

The main topic is insurers and hospitals are negligent or problematic about childbirth billing. Sub-topics that help drive that main point home are steep maternal and pediatric costs and how these steep pricepoints affect families.

1. **Why is this story important?**

Childbirth is the most frequent reason for an inpatient hospital stay in the United States. Cesarean-sections or C-sections are the most common operating room procedure during inpatient hospital stays. (It is a different can of worms that C-sections happen in the U.S. more than in other countries by a long-shot.) Everyone is born, whether that’s in a hospital, birthing center or at home. Everyone is a newborn at the beginning of life and many folks don’t realize the costs associated with the beginning of life until they bring a life into the world.

The surprise red-tape of insurance left me hanging. I was left out to dry with a $6000 combined bill from the pediatrician that saw my son in his 2nd day of life and the hospital that delivered him. The insult to financial injury was that pediatrician that worked within the hospital didn’t technically work for the hospital I gave birth in. So I received to different bills. My story is common. Parents poke fun at their big bills on Instagram and TikTok. Media outlets interview new parents and sadly, grieving parents on their outrageous bills.

This story can help educate anyone who is pregnant, thinking of becoming pregnant or in the middle of a childbirth billing battle. That’s a ton of people.

1. **What benefit does structured data bring to this story? What can numbers tell you that people cannot?**

Structured data allows the nuance in costs associated to be made plain. Like personal narrative can highlight that no one birth story is like another- data on childbirth costs can highlight the changing numbers for each birth.

Childbirth costs vary from state to state and hospital to hospital. Whether a parent has private insurance, state-sponsored insurance or is uninsured also plays a role in the billing process. The story is two parts. The crazy numbers and how the crazy numbers affect people.

Data is essential for this kind of story.

1. **Ideas of at least three people-sources (types of people, if not specific names) who you can interview for your story (you will be required to have three sources besides the data in your final project as well. If these don’t pan out, that’s fine, but start thinking about it now.**

My own personal narrative (I have seen examples of stories like this where the reporter or editor share their personal experience alongside other interviewees) examples below:

[Nicole Ellis in the Washington Post](https://www.washingtonpost.com/video/entertainment/should-i-freeze-my-eggs/the-biological-clock-episode-1/2018/01/30/940f2bee-053f-11e8-aa61-f3391373867e_video.html)

[Bylthe Terrell in Science Vs](https://gimletmedia.com/shows/science-vs/emhlzzb)

My mother Monica Noise

My peers:

Mercedez Clark

Vaniah Temple

Alecia Braustein

Alicia Roy

Angela Mark

Amelia R.

My insurance company:

UHC (at the time)  
 ANTHEM BLUE CROSS BLUE SHIELD

Local hospitals billing departments

INOVA

JOHN HOPKINS

GEORGETOWN

Professionals

OB/GYNs (there are several at my practice that agreed to speak to me)

Doulas (there are several I interviewed as part of a larger story I’ve been working on in this program)

1. **Three ideas of what a reader will learn from your story, and how it will impact them.**

I imagine a reader will learn that either their parents or a parent-friend they know is bada--.

On a serious note, readers will most likely learn that many people are one medical bill away from bankruptcy. Readers may learn that they don’t understand their own insurance policies. Readers may begin to revise their birth plans or give their employer’s HR department a call. Folks may investigate getting insurance if they don’t already have some. People may learn the true costs of inpatient stays or learn what some of the medical terms they hear on tv or in their own life mean.

1. **What non-data, non-human interview research work you need to do to flesh out your idea. I imagine more will come up as you go, but explain where you plan to start.**

I am digging into every Bill of The Month story from NPR on new parents’ bills. I am reading the reports that are released by non-partisan groups on the rising costs of childbirth. I am constantly checking on my own insurance policy and calling for clarification. The story and the conversation on the insane costs and it effects on parents is already happening.

1. **Another data source that would help that you wish you had, which would bring better context to your story.**

Getting to talk to MORE parents and MORE hospitals’ billing departments would be awesome. In the interest of time- I feel limited to the local hospitals, including the one I gave birth in. They are more likely to answer my phone calls and field my emails.

It would also be amazing to talk to the families from the big publication stories. Again, in the interest of time and to diversify or make my story special- I will interview people I have access to that haven’t been interviewed for a pub.

**Other Cool Resources:**

<https://healthcostinstitute.org/hcci-research/understanding-variation-in-spending-on-childbirth-among-the-commercially-insured>

<https://www.nationalpartnership.org/our-work/resources/health-care/maternity/archive/the-cost-of-having-a-baby-in-the-us.pdf>

<https://www.hcup-us.ahrq.gov/reports/statbriefs/sb110.jsp>

<https://www.npr.org/sections/health-shots/2021/12/21/1065572001/a-hospital-asked-these-parents-to-pay-45-843-a-month-for-their-babys-nicu-stay>

<https://www.npr.org/sections/health-shots/2021/01/27/961196647/birthday-rule-blindsides-first-time-parents-with-a-mammoth-medical-bill>

<https://www.npr.org/sections/health-shots/2022/02/23/1082405759/an-80-000-surprise-bill-points-to-a-loophole-in-a-new-law-to-protect-patients>