State Medicaid Approaches to Doula Service Benefits

Maternal mortality rates continue to increase in the United States, with significant racial, ethnic, and socioeconomic disparities in birth outcomes. States are using a variety of approaches to provide doula services within their Medicaid programs to address inequities. Doulas provide continuous physical, emotional, and information support to people before, during, and shortly after childbirth. Current evidence suggests that pregnant people who receive doula care are more likely to have a healthy birth outcome and a positive birth experience. Because of these improved outcomes there is the potential for cost-savings over time for state Medicaid programs. States are increasingly seeking federal authorization to provide doula services as an optional benefit under their state Medicaid programs to pregnant beneficiaries. This chart highlights key components and features of states’ Medicaid doula benefits as of August 21, 2023. Please contact Anoosha Hasan (ahasan@nashp.org) with updates or questions.

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<th>State</th>
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<tr>
<td>California</td>
<td>State Plan Amendment</td>
<td>Obtain a National Provider Identifier (NPI)</td>
<td>Fee-for-service (FFS)</td>
<td>Doulas may:</td>
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<td>Effective Date: January 1, 2023</td>
<td>Submit a Provider Application for Validation and Enrollment (PAVE) electronic application to enroll in the Medi-Cal program</td>
<td>Initial visit (90 minutes): $126.31</td>
<td>Practice and bill independently OR</td>
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<td>Benefit Category: Preventive Services and Freestanding Birth Center (as a professional service)</td>
<td>Doulas can enroll through the Training Pathway or the Experience Pathway</td>
<td>Up to eight perinatal visits: $60.48 per visit</td>
<td>Practice and bill as part of a doula group</td>
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<td>Training Pathway: Provide a Certificate of Completion for required training; attest to having supported at least three births as a birth doula</td>
<td>Support during labor and delivery (including stillbirth): $544.28</td>
<td>Contract with managed care plans</td>
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<td>Experience Pathway: Attest to working as a doula for at least five years; provide three written client testimonial letters or professional letters of recommendation</td>
<td>Support during abortion or miscarriage: $250.85</td>
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<td>Up to two extended, three-hour postpartum visits: $180 per visit</td>
<td>Doulas must receive a written recommendation from a physician or other licensed practitioner</td>
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<td>Up to nine additional postpartum visits (requires an additional recommendation from a physician or other licensed practitioner)</td>
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| Maryland  | • [State Plan Amendment](link)  
  • Effective Date: January 1, 2022  
  • Benefit Category: Preventive Service | • Must be enrolled with Maryland Medicaid’s electronic Provider Revalidation and Enrollment Portal ([ePREP](link)) as a fee-for-service Medicaid provider  
  • Attest to being trained and certified by a [Maryland Medicaid approved organization](link)  
  • Have adequate liability insurance | Fee-for-service  
  • The reimbursement rate is:  
    - 8 total prenatal or postpartum visits:  
      - $16.62/15 minutes of prenatal care, up to four units per visit; and  
      - $19.62/15 minutes of postpartum care, up to four units per visit  
    - Flat rate of $800 for labor and delivery services | • Practice and bill independently: OR  
  • Practice and bill as part of a doula organization  
  • [Contract with Medicaid managed care organizations (MCOs)](link) to be reimbursed for services provided to HealthChoice participants |
| Michigan  | • [State Plan Amendment](link)  
  • Effective Date: January 1, 2023  
  • Benefit Category: Preventive Service | • Complete a doula training program by an organization approved by the Michigan Department of Health and Human Services (MDHHS)  
  • Register with the MDHHS Doula Registry  
  • Enroll as a Medicaid provider by:  
    - Obtaining a Type 1 (Individual) National Provider Identifier (NPI)  
    - Completing an online application in the [Community Health Automated Medicaid Processing System](link) (CHAMPS) | Fee-for-service and Managed Care Organizations dependent on beneficiary enrollment  
  • A maximum of six total visits during the prenatal and postpartum periods and one visit for labor and delivery are eligible for reimbursement  
    - $75 per visit for prenatal and postnatal visits  
    - $700 for attendance at labor and delivery  
  • All prenatal and postpartum visits must be at least 20 minutes long to be eligible for reimbursement  
  • Additional visits can be requested through the existing Medicaid program prior authorization process | • Practice and bill independently OR  
  • Practice with a Medicaid-enrolled organization or clinic that bills on their behalf |
| Minnesota | • [State Plan Amendment](link)  
  • Effective Date: July 1, 2014  
  • Benefit Category: Extended Service | • Complete a state-approved doula training  
  • Register on the state’s doula registry (requires an application and fee) | Fee-for-service  
  • The reimbursement rate is:  
    - $47 per prenatal or postpartum visit and $488 for labor and delivery; and  
    - Covers up to seven sessions, including labor and delivery | • Doulas may not practice or bill independently  
  • A supervising physician, nurse practitioner, or certified nurse midwife must [bill and supervise](link) all doula services |
| Nevada   | • [State Plan Amendment](link)  
  • Effective Date: April 1, 2022 | • Must have approved doula certification from the [Nevada Certification Board](link) | Fee-for-service  
  • The reimbursement rate is:  
    - $50 for each prenatal and postpartum visit, up to 4 visits reimbursable during | • Practice and bill independently: OR |
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| New Jersey  | • Benefit Category: Preventive Service | • Enroll as an individual Nevada Medicaid Provider Type (PT) 90 | prenatal, antepartum, and/or up to 90 days of the postpartum period                     | • Practice and bill as part of a doula organization  
• Link to provider agencies (e.g., obstetric physicians, midwifery practices, independent providers)  

Medicaid Managed Care Organization (MCO):  
• Must cover at a minimum the services as listed under FFS |
|             |                            |                                         | o $150 for labor and delivery  
|             |                            |                                         | o Maximum reimbursable rate per pregnancy is $350 |
|             | • State Plan Amendment     | Complete a state-approved doula training and requirements | Fee-for-service  
• The reimbursement rate is:  
|             | • Effective Date: January 1, 2021 | Enroll as a Medicaid provider | o $1,065 for up to 8 visits and labor support (standard doula care);  
|             | • Benefit Category: Preventive Service |                                         | o $1,331 for up to 12 service visits and labor support (enhanced doula care for pregnant beneficiaries age 19 or younger); and  
|             |                            |                                         | o $500 flat rate for attendance during delivery |
|             |                            |                                         | $100 value-based incentive payment if the doula performs at least one postpartum service visit and the client is seen by an obstetric clinician for a postpartum visit after a labor and delivery claim.  

Doulas may:  
• Practice and bill independently  
• Join a provider agency or clinic and bill independently; OR  
• Enroll as a managed care organization (MCO) provider |

New Jersey:  
• Complete a state-approved doula training and requirements  
| Oklahoma    | • State Plan Amendment     | Enroll as a SoonerCare contracted provider  
• Obtain a National Provider Identifier (NPI)  
• Use the taxonomy number required by the state  
• Possess one of the following certifications by an organization recognized by the Oklahoma Health Care Authority:  
|             | • Effective Date: July 1, 2023 | Birth doula  
|             | • Benefit Category: Preventive Services | Postpartum doula  
|             |                            | Full-spectrum doula  
|             |                            | Community-based doula | Fee-for-service  
|             |                            | Reimbursement rates:  
|             |                            | Eight prenatal/postpartum visits: $64.45 per visit  
|             |                            | One labor & delivery visit:  
|             |                            | o Cesarean delivery-only visit: $325.45  
|             |                            | o Vaginal delivery-only: $468.55  
|             |                            | o Vaginal delivery after previous cesarean delivery: $527.78  
|             |                            | o Cesarean delivery following vaginal delivery attempt: $546.50  
|             |                            | • Doula providers will use the appropriate code modifier for all procedure codes.  
|             |                            | • Visits have a minimum duration of 60 minutes and may be conducted in person or via telehealth, but the Labor & Delivery Care visit may not be conducted via telehealth.  

Doulas may:  
• Practice and bill independently  

Oklahoma:  
• Eight prenatal/postpartum visits: $64.45 per visit  
• One labor & delivery visit:  
|             |                            | Cesarean delivery-only visit: $325.45  
|             |                            | Vaginal delivery-only: $468.55  
|             |                            | Vaginal delivery after previous cesarean delivery: $527.78  
|             |                            | Cesarean delivery following vaginal delivery attempt: $546.50  

Doulas must be referred by a physician or other licensed practitioner |
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<td>Oregon</td>
<td>State Plan Amendment</td>
<td>Complete a state-approved doula training and requirements</td>
<td>The doula will work with the beneficiary to determine how many visits will occur during the prenatal period or postpartum period. Prior authorization is required for additional visits, for beneficiaries with extenuating medical circumstances.</td>
<td>Doulas may: Practice and bill independently; OR Work with an organization or clinic that bills on their behalf A licensed obstetric provider must request the services</td>
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<td>Rhode Island</td>
<td>State Plan Amendment</td>
<td>Enrolled as a Medicaid provider Certified by Rhode Island Certification Board Completed 20 hours of relevant education/training, per RICB requirements</td>
<td>Fee-for-service reimbursement based on pregnancy stage (prenatal, labor/delivery, postpartum) A doula may not receive more than $1,500 per pregnancy Up to 3 prenatal visits ($100 per visit), labor and delivery (regardless of the duration of the birthing process) ($900), and 3 postpartum visits ($100 per visit) If a member does not use all three prenatal visits and/or 1 labor and delivery visit, the visits can be reallocated to postpartum visits A doula must visit with the member for at least 60 minutes to bill each prenatal/postpartum visit</td>
<td>Doulas: Practice and bill independently; OR Practice and bill as part of a doula collective group; OR Be employed by an entity that bills for their services In order to submit claims for managed care organization (MCO) members, doulas must enroll as MCO providers.</td>
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<td>Virginia</td>
<td>State Plan Amendment</td>
<td>Complete doula training, which must include core competencies (perinatal support services, labor support), community-based/cultural competency training, and care coordination. Doula trainings must be approved by the Virginia Department of Health (VDH) Be certified by an entity designated by VDH Enroll as a Medicaid provider</td>
<td>Fee-for-service The reimbursement rate is: $859 for up to 8 prenatal/postpartum visits and labor support $50 value-based incentive payment if the doula performs at least one postpartum service visit and the client is seen by an obstetric clinician for one postpartum visit after a labor and delivery claim $50 value-based incentive payment will be made if the doula performs at least one postpartum service visit (this may be the same postpartum visit used for the first value-based incentive payment)</td>
<td>Doulas may: Practice and bill independently OR Join a provider agency or clinic and bill independently; OR Enroll as a MCO provider</td>
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<td>Washington, DC</td>
<td>• State Plan Amendment</td>
<td>• Possess a current certification by a doula training program or organization, approved by the District of Columbia Department of Health Care Finance (DHCF)</td>
<td>Fee-for-service</td>
<td>Doulas may:</td>
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<td>• Effective Date: October 1, 2022</td>
<td>• Enroll as a DHCF provider and receive an NPI and taxonomy number</td>
<td>• A maximum of 12 visits across the perinatal period (before, during, and up to 6 weeks after delivery) and the postpartum period (beginning on the last day of pregnancy and extending through the end of the calendar month in which 180 days after the end of the pregnancy falls)</td>
<td>• Practice and bill independently OR</td>
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<td>• Benefit Category: Preventive Services</td>
<td>• The 12 visits include a maximum of one doula consultation and can be allocated across the perinatal and postpartum period</td>
<td>• Reimbursement rates:</td>
<td>• Practice and bill as part of a doula group</td>
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<td>• $97.04 per perinatal doula service visit</td>
<td>• Enroll with a Medicaid managed care organization (MCO)</td>
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<td>• $686.23 for doula support during delivery</td>
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<td>• $12.13 per postpartum doula support. A postpartum service visit is billed in 15-minute increments and shall not exceed 24 units or 6 hours per visit.</td>
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<td>An additional value-based incentive payment of $100 will be made if the doula performs at least one postpartum service visit and the client is seen by an obstetric clinician for one postpartum visit 7 to 84 days after a labor and delivery claim</td>
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