



## 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 April 10, 2023. Please contact Anoosha Hasan ([ahasan@nashp.org](mailto:ahasan@nashp.org)) with updates or questions.

State	Federal Medicaid Authority	Training and/or Licensing Requirements	Reimbursement Structure	Billing Procedures
California	<ul style="list-style-type: none"> <li><a href="#">State Plan Amendment</a></li> <li>Effective Date: January 1, 2023</li> <li>Benefit Category: Preventive Services and Freestanding Birth Center (as a professional service)</li> </ul>	<ul style="list-style-type: none"> <li>Obtain a National Provider Identifier (NPI)</li> <li>Submit a <a href="#">Provider Application for Validation and Enrollment (PAVE)</a> electronic application to <a href="#">enroll in the Medi-Cal program</a></li> <li>Doulas can enroll through the <a href="#">Training Pathway or the Experience Pathway</a> <ul style="list-style-type: none"> <li>Training Pathway: Provide a Certificate of Completion for required training; attest to having supported at least three births as a birth doula</li> <li>Experience Pathway: Attest to working as a doula for at least five years; provide three written client testimonial letters or professional letters of recommendation</li> </ul> </li> </ul>	Fee-for-service (FFS) <ul style="list-style-type: none"> <li><a href="#">Reimbursement rates:</a> <ul style="list-style-type: none"> <li>Initial visit (90 minutes): \$126.31</li> <li>Up to eight perinatal visits: \$60.48 per visit</li> <li>Support during labor and delivery (including stillbirth): \$544.28</li> <li>Support during abortion or miscarriage: \$250.85</li> <li>Up to two extended, three-hour postpartum visits: \$180 per visit</li> <li>Up to nine additional postpartum visits (requires an additional recommendation from a physician or other licensed practitioner)</li> </ul> </li> </ul>	Doulas may: <ul style="list-style-type: none"> <li>Practice and bill independently OR</li> <li>Practice and bill as part of a doula group</li> <li>Contract with managed care plans</li> </ul> Doulas must receive a <a href="#">written recommendation</a> from a physician or other licensed practitioner

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<b>Maryland</b>	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: January 1, 2022</li> <li>• Benefit Category: Preventive Service</li> </ul>	<ul style="list-style-type: none"> <li>• Must be enrolled with Maryland Medicaid's electronic Provider Revalidation and Enrollment Portal (<a href="#">ePREP</a>) as a fee-for-service Medicaid provider</li> <li>• Attest to being trained and certified by a Maryland Medicaid <a href="#">approved organization</a></li> <li>• Have adequate liability insurance</li> </ul>	<p>Fee-for-service</p> <ul style="list-style-type: none"> <li>• <a href="#">The reimbursement rate</a> is: <ul style="list-style-type: none"> <li>• 8 total prenatal or postnatal visits, up to 4 units of service per visit, for a maximum rate of \$930 (or \$977.84 if only L&amp;D and 8 postpartum visits): <ul style="list-style-type: none"> <li>▪ \$16.25/15 minutes of prenatal care, up to four units per visit; and</li> <li>▪ \$19.62/15 minutes of postpartum care, up to four units per visit</li> </ul> </li> <li>• Flat rate of \$350 for labor and delivery services</li> </ul> </li> </ul>	<p>Doulas may:</p> <ul style="list-style-type: none"> <li>• Practice and bill independently; <a href="#">OR</a></li> <li>• Practice and bill as part of a doula organization</li> <li>• Contract with Medicaid <a href="#">managed care organizations (MCOs)</a> to be reimbursed for services provided to HealthChoice participants</li> </ul>
<b>Michigan</b>	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: January 1, 2023</li> <li>• Benefit Category: Preventive Service</li> </ul>	<ul style="list-style-type: none"> <li>• Complete a doula training program by an organization <a href="#">approved</a> by the Michigan Department of Health and Human Services (MDHHS)</li> <li>• Register with the MDHHS Doula Registry</li> <li>• Enroll as a Medicaid provider by: <ul style="list-style-type: none"> <li>○ Obtaining a Type 1 (Individual) National Provider Identifier (NPI)</li> <li>○ Completing an online application in the <a href="#">Community Health Automated Medicaid Processing System (CHAMPS)</a></li> </ul> </li> </ul>	<p>Fee-for-service and Managed Care Organizations dependent on beneficiary enrollment</p> <ul style="list-style-type: none"> <li>• A maximum of six total visits during the prenatal and postpartum periods and one visit for labor and delivery are eligible for <a href="#">reimbursement</a> <ul style="list-style-type: none"> <li>• \$75 per visit for prenatal and postnatal visits</li> <li>• \$700 for attendance at labor and delivery</li> </ul> </li> <li>• All prenatal and postpartum visits must be at least 20 minutes long to be eligible for reimbursement</li> <li>• Additional visits can be requested through the existing Medicaid program prior authorization process</li> </ul>	<p>Doulas may:</p> <ul style="list-style-type: none"> <li>• Practice and bill independently OR</li> <li>• Practice with a Medicaid-enrolled organization or clinic that bills on their behalf</li> </ul>
<b>Minnesota</b>	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: July 1, 2014</li> <li>• Benefit Category: Extended Service</li> </ul>	<ul style="list-style-type: none"> <li>• Complete a <a href="#">state-approved doula training</a></li> <li>• <a href="#">Register</a> on the state's doula registry (requires an application and fee)</li> </ul>	<p>Fee-for-service</p> <ul style="list-style-type: none"> <li>• The reimbursement rate is: <ul style="list-style-type: none"> <li>○ <a href="#">\$47 per prenatal or postpartum visit and \$488</a> for labor and delivery; and</li> <li>○ Covers up to <a href="#">seven sessions</a>, including labor and delivery</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Doulas may not practice or bill independently</li> <li>• A supervising physician, nurse practitioner, or certified nurse midwife must <a href="#">bill and supervise</a> all doula services</li> </ul>

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<b>Nevada</b>	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: April 1, 2022</li> <li>• Benefit Category: Preventive Service</li> </ul>	<ul style="list-style-type: none"> <li>• Must have approved doula certification from the <a href="#">Nevada Certification Board</a></li> <li>• <a href="#">Enroll</a> as an individual Nevada Medicaid <a href="#">Provider Type (PT) 90</a></li> </ul>	<p>Fee-for-service</p> <ul style="list-style-type: none"> <li>• The <a href="#">reimbursement rate</a> is: <ul style="list-style-type: none"> <li>○ \$50 for each prenatal and postpartum visit, up to 4 visits reimbursable during prenatal, antepartum, and/or up to 90 days of the postpartum period</li> <li>○ \$150 for labor and delivery</li> <li>○ Maximum reimbursable rate per pregnancy is \$350</li> </ul> </li> </ul> <p>Medicaid Managed Care Organization (MCO)</p> <ul style="list-style-type: none"> <li>• Must cover at a minimum the services as listed under FFS</li> </ul>	<p>Doulas <a href="#">may</a>:</p> <ul style="list-style-type: none"> <li>• Practice and bill independently; <a href="#">OR</a></li> <li>• Practice and bill as part of a doula organization</li> <li>• <a href="#">Link</a> to provider agencies (e.g., obstetric physicians, midwifery practices, independent providers)</li> </ul>
<b>New Jersey</b>	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: January 1, 2021</li> <li>• Benefit Category: Preventive Service</li> </ul>	<ul style="list-style-type: none"> <li>• Complete a <a href="#">state-approved doula training and requirements</a></li> <li>• Enroll as a Medicaid provider</li> </ul>	<p>Fee-for-service</p> <ul style="list-style-type: none"> <li>• The <a href="#">reimbursement rate</a> is: <ul style="list-style-type: none"> <li>○ \$1,065 for up to 8 visits and labor support (standard doula care);</li> <li>○ \$1,331 for up to 12 service visits and labor support (enhanced doula care for pregnant beneficiaries age 19 or younger); and</li> <li>○ \$500 flat rate for attendance during delivery</li> </ul> </li> <li>• \$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.</li> </ul>	<p>Doulas may:</p> <ul style="list-style-type: none"> <li>• <a href="#">Practice and bill independently</a>; OR</li> <li>• Join a provider agency or clinic and bill independently; OR</li> <li>• Enroll as a managed care organization (MCO) provider</li> </ul>
<b>Oregon</b>	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: May 1, 2017</li> <li>• Benefit Category: Preventive Service</li> </ul>	<ul style="list-style-type: none"> <li>• Complete a <a href="#">state-approved doula training and requirements</a></li> <li>• Register on the state's doula registry (requires an <a href="#">application</a>)</li> <li>• Obtain certification as a <a href="#">Traditional Health Worker</a> (requires an application)</li> <li>• Enroll as a Medicaid provider</li> </ul>	<p>Fee-for-service global payment (except in extenuating circumstances)</p> <ul style="list-style-type: none"> <li>• The <a href="#">reimbursement rate</a> is at the lower of: <ul style="list-style-type: none"> <li>○ Submitted charge; OR</li> <li>○ A \$1,500 per pregnancy, including at least two prenatal visits, care during delivery, and two required postpartum home visits</li> </ul> </li> </ul>	<p>Doulas <a href="#">may</a>:</p> <ul style="list-style-type: none"> <li>• Practice and bill independently; OR</li> <li>• Work with an organization or clinic that bills on their behalf</li> <li>• A licensed obstetric provider must request the services</li> </ul>
<b>Rhode Island</b>	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: July 1, 2021</li> <li>• Benefit Category: Preventive</li> </ul>	<ul style="list-style-type: none"> <li>• Enrolled as a Medicaid provider</li> <li>• Certified by <a href="#">Rhode Island Certification Board</a></li> <li>• Completed 20 hours of relevant education/training, per RICB requirements</li> </ul>	<p><a href="#">Fee-for-service reimbursement</a> based on pregnancy stage (prenatal, labor/delivery, postpartum)</p> <ul style="list-style-type: none"> <li>• A doula may not receive more than <a href="#">\$1,500 per pregnancy</a> <ul style="list-style-type: none"> <li>○ Up to 3 prenatal visits (\$100 per visit),</li> </ul> </li> </ul>	<p>Doulas may:</p> <ul style="list-style-type: none"> <li>• Practice and bill independently; OR</li> <li>• Practice and bill as part of a doula collective group; OR</li> </ul>

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			<ul style="list-style-type: none"> <li>o Labor and delivery (regardless of the duration of the birthing process) (\$900), and</li> <li>o 3 postpartum visits (\$100 per visit)</li> <li>o If a member does not use all three prenatal visits and/or 1 labor and delivery visit, the visits can be re-allocated to postpartum visits</li> <li>• A doula must visit with the member for at least 60 minutes to bill each prenatal/postpartum visit</li> </ul>	<ul style="list-style-type: none"> <li>• Be employed by an entity that bills for their services</li> <li>• In order to submit claims for managed care organization (MCO) members, doulas must enroll as MCO providers.</li> </ul>
Virginia	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: January 1, 2022</li> <li>• Benefit Category: Preventive Service</li> </ul>	<ul style="list-style-type: none"> <li>• 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 <a href="#">approved</a> by the Virginia Department of Health (VDH)</li> <li>• Be certified by an entity designated by VDH</li> <li>• Enroll as a Medicaid provider</li> </ul>	<p>Fee-for-service</p> <ul style="list-style-type: none"> <li>• The <a href="#">reimbursement rate</a> is: <ul style="list-style-type: none"> <li>o \$859 for up to 8 prenatal/postpartum visits and labor support</li> </ul> </li> <li>• \$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</li> <li>• \$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 payment) and the newborn is seen by a pediatric clinician for one visit after a labor and delivery claim.</li> </ul>	<p>Doulas may:</p> <ul style="list-style-type: none"> <li>• Practice and bill independently; <u>OR</u></li> <li>• Join a provider agency or clinic and bill independently; OR</li> <li>• Enroll as a MCO provider</li> </ul>
Washington, DC	<ul style="list-style-type: none"> <li>• <a href="#">State Plan Amendment</a></li> <li>• Effective Date: October 1, 2022</li> <li>• Benefit Category: Preventive Services</li> </ul>	<ul style="list-style-type: none"> <li>• Possess a current certification by a doula training program or organization, <a href="#">approved</a> by the District of Columbia Department of Health Care Finance (DHCF)</li> <li>• Enroll as a DHCF provider and receive an NPI and taxonomy number</li> </ul>	<p>Fee-for-service</p> <ul style="list-style-type: none"> <li>• 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) <ul style="list-style-type: none"> <li>• The 12 visits include a maximum of one doula consultation and can be allocated across the perinatal and postpartum period</li> </ul> </li> <li>• <a href="#">Reimbursement rates</a>: <ul style="list-style-type: none"> <li>• \$97.04 per perinatal doula service visit</li> <li>• \$686.23 for doula support during delivery</li> </ul> </li> </ul>	<p>Doulas may:</p> <ul style="list-style-type: none"> <li>• Practice and bill independently OR</li> <li>• Practice and bill as part of a doula group</li> <li>• Enroll with a Medicaid managed care organization (MCO)</li> </ul>

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			<ul style="list-style-type: none"> <li>\$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.</li> </ul> <p>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</p>	

Acknowledgments: This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under the Supporting Maternal and Child Health Innovation in States Grant No. U1XMC31658; \$398,953. This information, content, and conclusions are those of the authors and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.