

State of California—Health and Human Services Agency
Department of Health Care Services



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DATE: December 27, 2022

ALL PLAN LETTER 22-031

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS

SUBJECT: DOULA SERVICES

PURPOSE:

The purpose of this All Plan Letter (APL) is to provide Medi-Cal managed care health plans (MCPs) with guidance regarding the qualifications for providing doula services, effective for dates of service on or after January 1, 2023.

BACKGROUND:

Per State Plan Amendment (SPA) 22-0002, doula services are provided as preventive services pursuant to Title 42 Code of Federal Regulations (CFR) Section 440.130(c) and must be recommended by a physician or other licensed practitioner of the healing arts within their scope of practice under state law.^{1,2} Doulas provide person-centered, culturally competent care that supports the racial, ethnic, linguistic, and cultural diversity of Members while adhering to evidence-based best practices. Doula services are aimed at preventing perinatal complications and improving health outcomes for birthing parents and infants.

Doulas are birth workers who provide health education, advocacy, and physical, emotional, and non-medical support for pregnant and postpartum persons before, during, and after childbirth, including support during miscarriage, stillbirth, and abortion. Doulas are not licensed and they do not require supervision.

Doulas also offer various types of support, including health navigation; lactation support; development of a birth plan; and linkages to community-based resources.

¹ The CFR is searchable available at: <https://www.ecfr.gov/>

² SPA information is available at:

<https://www.dhcs.ca.gov/formsandpubs/laws/Pages/CaliforniStatePlan.aspx>

POLICY:

Covered Doula Services

Effective January 1, 2023, MCPs are required to provide doula services for prenatal, perinatal and postpartum Members. Doula services can be provided virtually or in-person with locations in any setting including, but not limited to, homes, office visits, hospitals, or alternative birth centers.³

An initial recommendation for doula services includes the following authorizations:

- One initial visit.
- Up to eight additional visits that can be provided in any combination of prenatal and postpartum visits.
- Support during labor and delivery (including labor and delivery resulting in a stillbirth), abortion, or miscarriage.
- Up to two extended three-hour postpartum visits after the end of a pregnancy.

All visits are limited to one per day, per Member. Only one doula can bill for a visit provided to the same Member on the same day, excluding labor and delivery. One prenatal visit or one postpartum visit can be provided on the same day as labor and delivery, stillbirth, abortion, or miscarriage support. The prenatal visit or postpartum visit billed on the same calendar day as birth can be billed by a different doula.

The extended three-hour postpartum visits provided after the end of pregnancy do not require the Member to meet additional criteria or receive a separate recommendation. The extended postpartum visits are billed in 15-minute increments, up to three hours, up to two visits per pregnancy per individual provided on separate days.

If a Member requests or requires pregnancy-related services that are available through Medi-Cal, then the doula should work with the Member's Primary Care Provider (if that information is available) or work with the MCP to refer the Member to a Network Provider who is able to render the service.⁴ These Medi-Cal services include but are not limited to:

³ Doulas should refer to the Telehealth section in Part 2 of the Provider Manual for guidance regarding providing services via telehealth for prenatal or postpartum visits, labor and delivery support, and for abortion and miscarriage support. The Medi-Cal Provider Manual, Medicine: Telehealth, is available at:

https://mcweb.apps.prd.cammiis.medi-cal.ca.gov/assets/D5289F68-C42E-4FE8-B59F-FA44A06D2863/mednetele.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYyIPyP5ULO

⁴ If the service is included in the benefits offered through the MCP, the Provider must be in-network unless the Provider type is unavailable. If the Provider type is unavailable, the MCP

- Behavioral health services
- Belly binding after cesarean section by clinical personnel
- Clinical case coordination
- Health care services related to pregnancy, birth, and the postpartum period
- Childbirth education group classes
- Comprehensive health education including orientation, assessment, and planning (Comprehensive Perinatal Services Program services)
- Hypnotherapy (non-specialty mental health service)
- Lactation consulting, group classes, and supplies
- Nutrition services (assessment, counseling, and development of care plan)
- Transportation
- Medically appropriate Community Supports services⁵

A doula is not prohibited from providing assistive or supportive services in the home during a prenatal or postpartum visit (i.e., a doula may help the postpartum person fold laundry while providing emotional support and offering advice on infant care). The visit must be face-to-face, and the assistive or supportive service must be incidental to doula services provided during the prenatal or postpartum visit. The Member cannot be billed for the assistive or supportive service.

Additionally, MCPs must provide doulas with all necessary, initial and ongoing training and resources regarding relevant MCP services and processes, including any available services through the MCP for prenatal, perinatal, and postpartum Members. This training must be provided initially when doulas are enrolled with the MCPs, as well as on an ongoing basis. Further, MCPs are required to provide technical support in the administration of doula services, ensuring accountability for all service requirements contained in the Contract, and any associated guidance issued by the Department of Health Care Services (DHCS).

Member Eligibility Criteria for Doula Services

To be eligible for doula services, and be covered under Medi-Cal managed care, a beneficiary must be eligible for Medi-Cal, enrolled in the MCP, and have a

must arrange for out-of-network services. If the service referral is for a benefit that is not included in those offered through the MCP, the MCP must coordinate a warm hand off with the entity responsible for the carved-out service.

⁵ A list of Community Supports by Medi-Cal Managed Care plans can be found here:

<https://www.dhcs.ca.gov/Documents/MCQMD/Community-Supports-Elections-by-MCP-and-County.pdf> and information regarding Community Supports can be found here:

<https://www.dhcs.ca.gov/Documents/MCQMD/DHCS-Community-Supports-Policy-Guide.pdf>.

recommendation for doula services from a physician or other licensed practitioner of the healing arts.

- **Medi-Cal Eligibility Checks:** Doulas must verify the Member's Medi-Cal eligibility for the month of service. Doulas must contact the Member's assigned MCP to verify eligibility.
- **Recommendation for Doula Services:** A Member would meet the criteria for a recommendation for doula services if they are pregnant, or were pregnant within the past year, and would either benefit from doula services or they request doula services. Doula services can only be provided during pregnancy; labor and delivery, including stillbirth; miscarriage; abortion; and within one year of the end of a Member's pregnancy.

Non-Covered Services

Doula services do not include diagnosis of medical conditions, provision of medical advice, or any type of clinical assessment, exam, or procedure.

The following services are not covered under Medi-Cal or as doula services:

- Belly binding (traditional/ceremonial)
- Birthing ceremonies (i.e., sealing, closing the bones, etc.)
- Group classes on babywearing
- Massage (maternal or infant)
- Photography
- Placenta encapsulation
- Shopping
- Vaginal steams
- Yoga

Doulas are not prohibited from teaching classes that are available at no cost to Members to whom they are providing doula services.

Documentation Requirements

Doula services require a written recommendation by a physician or other licensed practitioner of the healing arts acting within their scope of practice under state law. The recommending physician or licensed practitioner does not need to be enrolled in Medi-Cal or be a Network Provider within the Member's MCP.

The initial recommendation can be provided through the following methods:

- Written recommendation in Member's record.
- Standing order for doula services by MCP, physician group, or other group by a licensed Provider.
- Standard form signed by a physician or other licensed practitioner that a Member can provide to the doula.

A second recommendation is required for additional visits during the postpartum period. A recommendation for additional visits during the postpartum period cannot be established by standing order. The additional recommendation authorizes nine or fewer additional postpartum visits.

MCPs must ensure doulas document the dates, time, and duration of services provided to Members. Documentation must also reflect information on the service provided and the length of time spent with the Member that day. For example, documentation might state, "Discussed childbirth education with the Member and discussed and developed a birth plan for one hour." Documentation should be integrated into the Member's medical record and available for encounter data reporting. The doula's National Provider Identifier (NPI) number should be included in the documentation. Documentation must be accessible to the MCP and DHCS upon request.

Doula Provider Requirements and Qualifications

All doulas must be at least 18 years old, possess an adult/infant Cardiopulmonary Resuscitation (i.e., CPR) certification, and have completed Health Insurance Portability and Accountability Act training. Additionally, a doula must qualify by meeting either the training or experience pathway, as described below:

Training Pathway:

- Complete a minimum of 16 hours of training in the following areas:
 - Lactation support
 - Childbirth education
 - Foundations on anatomy of pregnancy and childbirth
 - Nonmedical comfort measures, prenatal support, and labor support techniques
 - Developing a community resource list
- Provide support at a minimum of three births

Experience Pathway:

- All of the following:
 - At least five years of active doula experience in either a paid or volunteer capacity within the previous seven years.
 - Attestation to skills in prenatal, labor, and postpartum care as demonstrated by the following: Three written client testimonial letters, or professional letters of recommendation from any of the following: a physician, licensed behavioral health provider, nurse practitioner, nurse midwife, licensed midwife, enrolled doula, or community-based organization. Letters must be written within the last seven years. One letter must be from either a licensed Provider, a community-based organization, or an enrolled doula. “Enrolled doula” means a doula enrolled either through DHCS or through a MCP.

Continuing Education:

MCPs must ensure doulas complete three hours of continuing education in maternal, perinatal, and/or infant care every three years. Doulas must maintain evidence of completed training to be made available to DHCS upon request.

Provider Enrollment

Network Providers, including those who will operate as Providers of doula services, are required to enroll as Medi-Cal Providers, consistent with APL 22-013, or any superseding APL, if there is a state-level enrollment pathway for them to do so.⁶

Billing, Claims, and Payments

MCPs must reimburse doulas in accordance with their Network Provider contract. MCPs are prohibited from establishing unreasonable or arbitrary barriers for accessing doula services. Claims for doula services must be submitted with allowable current procedural terminology codes as outlined in the Medi-Cal Provider Manual.⁷ Doulas cannot double bill, as applicable, for doula services that are duplicative to services that are reimbursed through other benefits.

Access Requirements for Doula Services

As part of their Network composition, MCPs must ensure and monitor sufficient Provider Networks within their service areas, including doulas. To support an adequate doula Network, MCPs must make contracting available to both individual doulas and doula groups. MCPs must work with their network hospitals/birthing centers to ensure there

⁶ APLs are available at: <https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx>

⁷ The Medi-Cal Provider Manual, Doula Services, is available at: https://mcweb.apps.prd.cammiis.medi-cal.ca.gov/assets/0075B242-F893-41DB-A418-4129A274E46C/doula.pdf?access_token=6UyVkkRRfByXTZEWlh8j8QaYyIPyP5ULO

are no barriers to accessing these Providers when accompanying Members for prenatal visits, labor and delivery support, and postpartum visits regardless of outcome (stillbirth, abortion, miscarriage, live birth).

DHCS Monitoring

DHCS will monitor MCPs' initial implementation of doula services and requirements through existing data reporting mechanisms such as Encounter Data, Grievances and Appeals, and the 274 Network Provider File. MCPs must ensure that doula services Providers have NPIs and that these NPIs are entered in the 274 Network Provider File.

The requirements contained in this APL will necessitate a change in an MCPs' contractually required policies and procedures (P&Ps), MCPs must submit their updated P&Ps to their Managed Care Operations Division (MCOD) contract manager within 90 days of the release of this APL.

MCPs are responsible for ensuring their Subcontractors and Network Providers comply with all applicable state and federal laws and regulations, Contract requirements, and other DHCS guidance, including APLs and Policy Letters.⁸ These requirements must be communicated by each MCP to all its Subcontractors and Network Providers.

If you have any questions regarding the requirements of this APL, please contact your MCO contract manager.

Sincerely,

Original Signed by Dana Durham

Dana Durham, Chief
Managed Care Quality and Monitoring Division

⁸ For more information on Subcontractors and Network Providers, including the definition and applicable requirements, see APL 19-001, "Medi-Cal Managed Care Health Plan Guidance on Network Provider Status," or any superseding APL on this topic.