

As a reminder for doulas when billing doula services, incorrect billing claims can lead to a claim being denied. When billing, please refer to the following chart, which includes some common billing errors and the corresponding RAD Codes that explain why a claim was denied:

Doula Providers	RAD Codes and Billing Tips
Eligibility	<p>RAD Code 002: <i>Recipient is not eligible for the benefits under the fee-for-service Medi-Cal program or other special programs.</i></p> <ul style="list-style-type: none"> • Verify the recipient's 14-character ID number with a valid Medi-Cal Benefits Identification Card (BIC) prior to rendering service. • Check the recipient's date of birth and the issue date of the BIC. • Refer to the <i>Eligibility: Recipient Identification Cards</i> section in Part 1 of the provider manual. <p>RAD Code 031: <i>The provider was not eligible to receive reimbursement for the services billed on the date of service.</i></p> <ul style="list-style-type: none"> • Verify date of service on the claim is correct. • Verify billing provider number on the claim is correct. • Verify rendering provider number on the claim is correct.

Doula Providers	RAD Codes and Billing Tips
Managed Care Plans	<p>RAD Code 037: <i>Health Care Plan enrollee, capitated service not billable to Medi-Cal.</i></p> <ul style="list-style-type: none"> • Verify Recipient's 14-character ID number with a valid BIC prior to rendering service. • Verify the recipient's ID number on the RAD. • Determine the Health Care Plan (HCP) to be billed <p>and bill the appropriate HCP if the provider is contracted with or otherwise has an agreement with the HCP to provide doula services.</p>
<p>CMS-1500 Claim Form Errors</p> <p>Submitting unsigned claims or claims with illegible Signatures.</p> <p>Using initials or stamped signatures or signature extending outside the box.</p> <p>ICD indicator is missing or invalid.</p>	<p>RAD Code 051: <i>Signature is missing or is not an original.</i></p> <ul style="list-style-type: none"> • Signatures must be written, not printed, in blue or black ink. • Do not allow signature to extend outside the box (Box 31). • Stamps, initials, or facsimiles are not acceptable. <p>RAD Code 9981: <i>ICD Indicator is missing or invalid.</i></p> <p>The ICD indicator must be either "0" or "9". The ICD indicator of "0" represents ICD-10 codes and the ICD indicator "9" represents ICD-9 codes.</p> <p>Starting November 1, 2024, claims for doula services in fee-for-service and managed care will require a diagnosis code (ICD-10-CM diagnosis codes). Please refer to the Medi-Cal Provider Manual: Doula Service for which diagnosis codes must be used when submitting claims for doula services.</p>

Modifiers

As noted in the [Doula Services](#) section of the Medi-Cal Provider Manual, to distinguish doula claims from claims for services rendered by a licensed provider, all submitted claims for doula services must use the XP modifier (separate practitioner: a service that is distinct because it was performed by a different practitioner).

The [Medi-Cal Provider Website](#) has more information on the following resources:

Part 2 – [General Medicine Provider Manual](#) where you will find:

- Doula Services
- CMS-1500 Completion
- CMS-1500 Special Billing Instructions
- CMS-1500 Submission and Timeliness Instructions
- CMS-1500 Tips for Billing

[Medi-Cal References Page](#) where you will find:

- Remittance Advice Details (RAD) Repository
- Billing Tips