

**Doula Stakeholder Implementation Workgroup Meeting
Questions-and-Answers**

Date: March 14, 2025
Time: 10:00AM to 12:00PM
Duration: 2 hours

Q&A TRANSCRIPT:

Anonymous attendee 10:13 AM

Many MCPs used LOAs to provide access to doula services. This means that Doulas are not paid the TRI rates, despite their efforts to contract with MCPs. Does DHCS have any plans to expand the TRI rates to certain providers under LOA?

This question has been answered live

Janet Vadakkumcherry, HCP (Guest) 10:17 AM

Are the MCPs supposed to continue paying the of 87.5% of Medicare rates for those 700 codes for 2025 dates of service – or is it only for 2024 dates of service and we are waiting for the Stakeholder Advisory Group to meet from Prop 35?

Nicholas Leach 10:18 AM

Yes, the 2024 increases will continue in CY 2025.

Anonymous attendee 10:17 AM

Health plans are making a distinction between FFS rate and the TRI rate - stating that the TRI is on top of the FFS - this impacts contracting as the language in rates often states the lesser of TRI or FFS. Can you discuss this a little bit? Is the TRI on top of the FFS or is the TRI increasing the FFS?

This question has been answered live

Anonymous attendee 10:17 AM

Is there another timeline for the MCP's to be in full compliance?



Nicholas Leach 10:19 AM

No, MCPs were required to be in full compliance as of 12/31/24.

Anonymous attendee 10:18 AM

Are MCP required to pay interest for the 2024 claims?

This question has been answered live

Janet Vadakkumcherry, HCP (Guest) 10:19 AM

Thank you. Do we have an ETA as to when the Stakeholder Advisory Group will meet?

Nicholas Leach 10:22 AM

We do not have a specific date at this point. All information will be posted to the DHCS website ahead of the first meeting.

Davina (Guest) 10:23 AM

Molina requires a pre-authorization and an LOA both and it is really slowing down our intake, to the point where we have lost clients - it is my understanding that only the LOA is required by this benefit. Can someone clarify?

Jim Elliott (Guest) 10:44 AM

We have noted your comment and will into it. Thank you for raising it.

Michel Huizar 10:45 AM

Under Medi-Cal, doula services are considered preventive benefits and generally do not require prior authorization. A standing recommendation issued by the DHCS Medical Director allows pregnant individuals or those who were pregnant within the past year to access doula services without obtaining individual recommendations.

Anonymous attendee 10:24 AM

Can we have Rafael's email address so we can provide information about plans not in compliance?

Jim Elliott (Guest) 10:29 AM

Please send your email to DoulaBenefit@dhcs.ca.gov so that we can track it and share with Rafael and his team



Anonymous attendee 10:25 AM

Can you provide the links to the resources that Khefri is referencing?

Nneoma Ojiaku, DHCS Medical Consultant I (Guest) 10:25 AM

Thank you. Can you share your email address?

Ed Torres (You) 10:35 AM

Good morning, Please provide your email address and I will request the links from Ms. Khefri and send them to you after the meeting. Thank you, Ed Torres.

Jacqueline (Guest) 10:28 AM

The biggest concern I'm having currently is that Medi-cal members are still not accessing services well and their questions seem to be dismissed by MCPs but commercial members are fully aware of their benefits and trying to use them displacing doulas from being able to take medi-cal folks. Additionally, doulas are being pressured to sign on for commercial care even when the benefits and design of care actually make doula pay lower than medi-cal targets. Overall, I signed up to serve Medi-Cal members through this benefit and now it is influencing ALL contracts and the private pay market while limiting the doulas available to Medi-Cal members most at need

Bambi Cisneros (Guest) 10:48 AM

Doula services is included in each MCP's member handbook which goes out to all members.

Anonymous attendee 10:32 AM

Can MCPs get the information *in writing* about credentialing flexibility?

Ed Torres (You) 11:27 AM

Good morning, please email this question to doulabenefit@dhcs.ca.gov and I will provide you with leadership's response after the meeting if you have not received a response during this meeting. Thank you.

Jacqueline (Guest) 10:33 AM

diazjacqueline@gmail.com



Ed Torres (You) 10:39 AM

Thank you Ms. Jacqueline

Anonymous attendee 10:39 AM

We recently got a bounce back from a claim - "If the services were performed at the same location as the Billing Provider, the Service Facility Location loop should not be sent. Billing a Service Facility Location that matches the Billing Provider's information is not permissible." - can someone help clarify what this means?

Jim Elliott (Guest) 10:41 AM

Please send your question with details about claim (no member information) so that we can look into it. DoulaBenefit@dhcs.ca.gov

Mysti Tablet (Guest) 10:41 AM

will these slides be available?

Jim Elliott (Guest) 10:42 AM

These slides will be posted on the doula webpage next week.

Mashariki Kudumu (Guest) 10:41 AM

How long the provider dispute process usually take to resolve and for Doulas to get paid?

Bambi Cisneros (Guest) 11:03 AM

MCPs must reimburse claims within 30 calendar days of receipt of a clean claim. MCPs have 45 days to work with the provider through their provider dispute resolution process.

Anonymous attendee 10:47 AM

Kaiser Commercial is not honoring the extended postpartum visits, could be the T-code used?

Ed Torres (You) 11:31 AM

Good morning, Please send this issue to doulabenefit@dhcs.ca.gov and I will forward to the proper division. Thank you Ed Torres



Davina (Guest) 10:48 AM

@michael Huziar - thank you for this, that was my understanding as well. We are working on entering into a full contract with Molina but at this time, it's all LOA based and the preauth is yet another step. @jim elliot - thank you for confirming my comment has been noted, we've reached out to DHCS about this before and I'm not sure what else to do about it. I am with For the Village (info@forthevillage.org) if someone can get back to us directly.

Jim Elliott (Guest) 10:51 AM

Thank you, Davina. I wrote down your email. Can you also contact me directly - Jim.Elliott@dhcs.ca.gov

Jacqueline (Guest) 11:00 AM

Another question is that miscarriages, I've supported two and was not able to bill because the parents did not have their pregnancy documented by their care provider yet BUT it's happening so often that they can't even access an OB until late, I had someone not have an OB until 32 weeks

Erica Holmes (Guest) 11:16 AM

Acknowledging receipt of this question. DHCS is taking this issue and the PA issue back for further discussion.

Anonymous attendee 11:02 AM

Kristin - can you share your email? LA Care has been rife with issues.

Ed Torres (You) 11:12 AM

Good morning, please feel free to email doulabenefit@dhcs.ca.gov and I will forward your inquiry, issue to Ms. Kristin. Thank you, Ed Torres

Anonymous attendee 11:05 AM

Since way more than 5 MCOs have been called out for not being compliant - what is the best way to let DHCS know that the MCOs are not abiding by the attestation.



Ed Torres (You) 11:11 AM

Good morning, Please email doulabenefit@dhcs.ca.gov with this information and we will notify the proper leadership. Thank you, Ed Torres.

Anonymous attendee 11:05 AM

Kaiser needs to do better! No one communicates, no one helps the doulas.

This question has been answered live

Crystal Haswell, Kaiser Permanente (she, her) (Guest) 11:28 AM

KP is committed to continuously improving, and we'd love to hear specific examples of how we can enhance education, systems, or processes to better support you. Medi-CalDoulaServicesLiaison@kp.org

Anonymous attendee 11:16 AM

One question that I don't feel like has been answered clearly: Can MCPs opt not to pay the TRI rates if a LOA is in place with the doula provider?

Erica Holmes (Guest) 11:23 AM

Under an LOA, MCPs are not beholden to TRI rates. Under a Network Provider agreement, MCPs do not have an option to pay less since the TRI is a directed payment, but they can pay more.

Marisol Ramirez (Guest) 11:24 AM

My question is : how are we holding managed care plans like Kaiser for not properly training their phone operators for not helping pregnant people . They often don't know what a doula is, that it's covered, who the doulas are and have left people to give up.

Bambi Cisneros 11:34 AM

We will continue to work with MCPs and their plan associations to increase awareness to their call center staff. Thank you for this feedback.



Jacqueline (Guest) 11:30 AM

@bambi that doesn't speak to the disparity in access, the same standard does not end in equitable access and that's my concern - that more support and effort be made to ensure medical members have access

Bambi Cisneros 11:36 AM

Can you please provide more context on this question?

Anonymous attendee 11:36 AM

For geographic areas with a limited number of doulas and populations experiencing significant health disparities, has there been any consideration of creating exceptions or alternative pathways for out-of-state doulas to provide telehealth support?

Erica Holmes (Guest) 11:41 AM

Acknowledging receipt of this question. DHCS is taking this issue back for further discussion.

Marisol Ramirez (Guest) 11:54 AM

I hear us discussing needing more doulas that are Native American. How are we helping this community with getting their own doula business started. There are hurdles. Internet services, access to business support for their city license and DBA and proper personal documentations to even start a business. Just like some shadowing by business people from community

Erica Holmes 11:56 AM

Hello Marisol -- My team has been in regular contact and collaboration with our colleagues in the Office of Tribal Affairs (OTA). OTA is lead on policy and related work with our tribal partners and we have raised this issue to them as it has come up in other forums as well. We will take this specific comment back as well for additional discussions. Thank you again.