

Doula Implementation Stakeholder Meeting

DHCS Benefits Division

January 10, 2025

Agenda

1	Welcome, Purpose, and Agenda (10 minutes)	DHCS Staff Deitre Epps, CEO, RACE for Equity
2	General Updates and Discussions (15 minutes)	DHCS Staff, RACE for Equity, Workgroup Members
3	Doula Implementation Report (25 minutes)	DHCS Staff
4	Break (10 minutes)	
5	California Doula Feedback Form	Khefri Riley, Doula Stakeholders
6	Outstanding Questions from Doula Implementation Workgroup (35 minutes)	DHCS Staff, RACE For Equity, Doula Stakeholders
7	Chat Questions and Q&A (10 minutes)	DHCS Staff, RACE For Equity
8	Next Steps and Closing (15 minutes)	DHCS Staff, RACE for Equity

Workgroup Logistics

- » Workgroup members are the only stakeholders who have the ability to speak during the meeting.
- » All other attendees will be in listen-only mode.
- » All stakeholders can use the chat feature.
- » Questions should be sent to Question & Answer feature.
- » All stakeholder workgroup meetings are open to the public in listen-only mode.
- » DHCS will review all feedback/comments on discussion topics submitted via email (DoulaBenefit@dhcs.ca.gov) and via the chat function.

General Updates and Discussion



Targeted Rate Increase Update

Nick Leach, Branch Chief

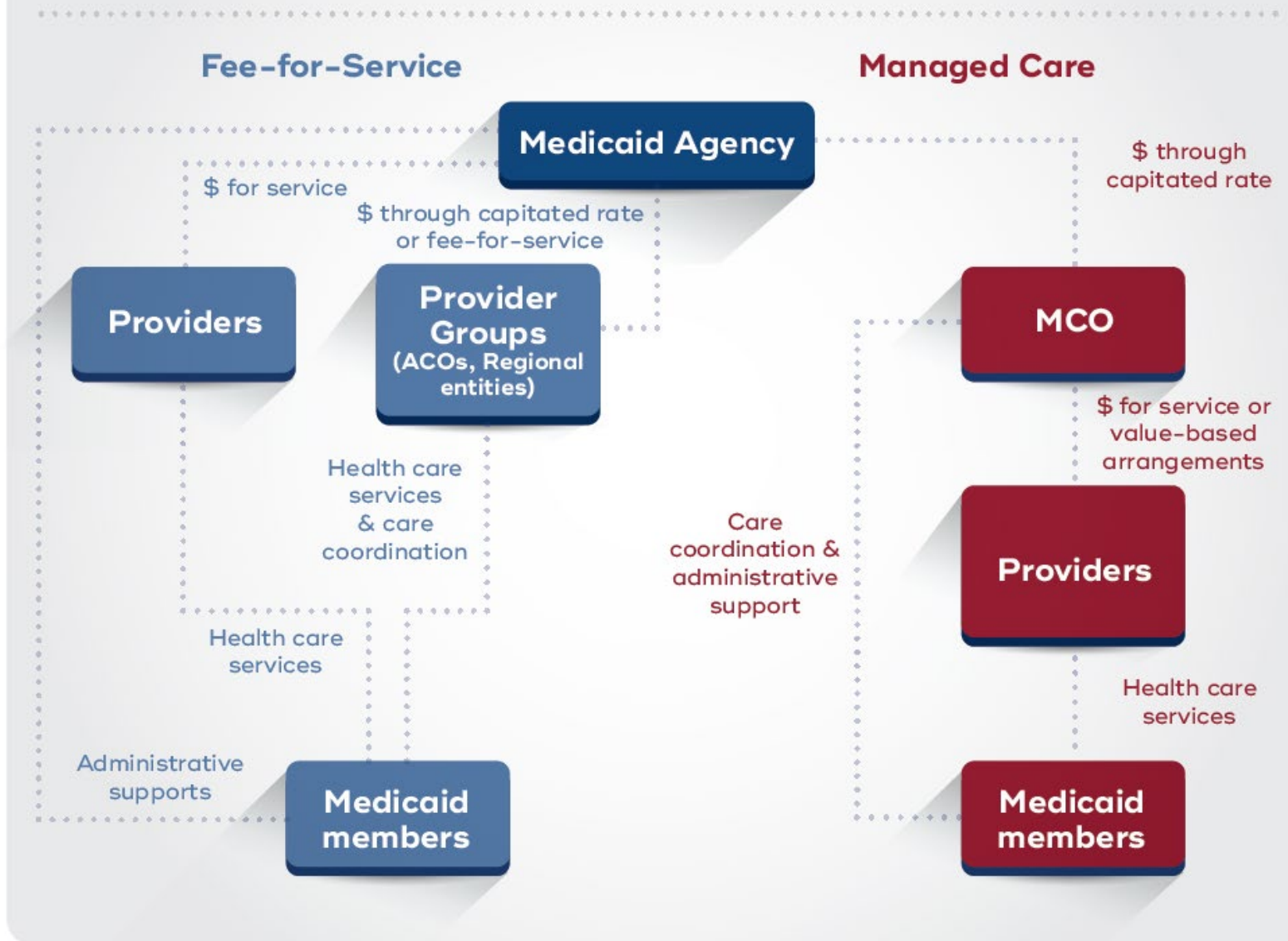
Capitated Rates Development Division

Medi-Cal Managed Care

Bambi Cisneros, Assistant Deputy Director, Health Care Delivery Systems
Michel Huizar, Chief, Managed Care Program Oversight Branch

Overview of Medi-Cal Managed Care

How do Medicaid delivery systems work?



Medicaid is one of the United States' largest health insurance programs, providing care for almost 90 million people as of August 2023. Medicaid agencies don't deliver health care services directly; instead, they must develop a "delivery system" to pay health care providers for covered services received by Medicaid members. The two main delivery system models are FFS, where the Medicaid agency directly pays providers or groups of providers, and capitated managed care, where the Medicaid agency pays an external managed care organization, who then pays providers for covered services.

Medi-Cal Managed Care Overview

Under managed care, DHCS pays the Medi-Cal managed care plan (MCP) a monthly capitation rate for each member enrolled in the MCP. In exchange for this “per member per month” rate, the MCP must handle a range of functions that are defined in the contract between the State and the MCP.

The range of functions that MCPs perform include, but are not limited to:



Key Functions of Medi-Cal MCPs

1

Network Management and Access

- » Maintain a network adequate to provide full scope of Medi-Cal benefits to members in its service area.
- » Ensure LTC providers in their service area are licensed by California Department of Public Health (CDPH) when contracting.
- » Provide continuity of care for members who may need or are receiving services and/or programs from out-of-Network Providers.

2

Utilization Management (UM)

- » Develop UM programs to ensure appropriate processes are used to review/approve the provision of Medically Necessary Covered Services for members.
- » Provide training to providers on the procedures and services that require Prior Authorization for Medically Necessary Covered Services.

Key Functions of Medi-Cal MCPs

3

Care Coordination

- » Coordinate services for members within and across delivery systems.
- » Maintain a Population Health Management program that provides equitable access to wellness and prevention services, care coordination, and care management.

4

Provider Payment

- » Are responsible for reimbursing providers of covered services provided to members.
- » Are expected to pay Clean Claims within 30 days of receipt (at least 90 percent of Clean Claims must be paid within 30 calendar days, and 99 percent within 90 calendar days).

5

Quality Improvement

- » Monitor, evaluate, and aid in improving the quality of care delivered by providers to all members.
- » Incorporate network providers in quality improvement and health equity evaluation and performance review processes.

Enforcement Levers

W&I section 14197.7(e) along with Contract Provisions as well as APL 23-012 provides DHCS levers to enforce contractual requirements.



DHCS may terminate a contract with an MCP for violating standards

Provider Challenges

If Doulas have been working with an MCP and continue having challenges, they can reach out to DHCS via email at DoulaBenefit@dhcs.ca.gov

» Please include the following information:

- Doula Name
- Doula NPI
- What counties does the doula provide services?
- What MCP(s) does the doula have contract(s) with?
- Name of the MCP(s) that you are having challenges with
- Name of any MCP representatives that you spoke to regarding the issue
- Please include the MCP's email or phone number used to make contact
- Brief description of the issue; Date(s) associated with the issue
- Contact information for follow-up (email and phone preferred)

» DO NOT include protected health information (PHI) unless requested and shared securely

DHCS Roles and Responsibilities

DHCS Roles and Responsibilities

Multiple DHCS-Divisions support the implementation of Doula Services. Divisions collaborate to develop policy, monitor, provide technical assistance, and evaluate the implementation of Doula Services.

The range of Division collaboration include, but are not limited to:

**Capitated Rates
Development Division**

**Enterprise Data
Information
Management Division**

**Health Care Benefit
and Eligibility Division**

**Provider Enrollment
Division**

**Managed Care Quality
and Monitoring
Division**

**Quality and
Population Health
Management Division**

Managed Care Quality and Monitoring Division

Role and Responsibilities

DHCS is responsible for the monitoring and oversight of all Medi-Cal managed care health plans. It is a goal of the Department to increase transparency pertaining to managed care data.

- » Performance monitoring, such as surveys and reporting templates, aids DHCS in creating appropriate policies for improving the health outcomes of beneficiaries and to ensure access to high quality health care for all health plan members.
- » Monitoring Includes, but not limited to:
 - Monitor Provider Network
 - Monitor Member Utilization
 - Monitor Member Access
 - Technical assistance calls with MCPs
 - Develop post-implementation reporting
 - Provide progress updates, as applicable

Monitoring Approach

Monitoring Approach

DHCS has been monitoring MCPs to ensure Plans are taking appropriate actions to carry out their contract obligations pertaining to provider networks, timely payments, and member grievances.

Surveys

- To continue to understand how MCPs are implementing Doula Services and monitor contract obligations pertaining to provider networks, timely payments, and member grievances, DHCS continues to conduct all MCP surveys.
- DHCS uses these responses to perform targeted outreach and provide technical assistance if/as needed.

Oversight & Technical Assistance

- Performed targeted MCP outreach to conduct further deep dives into the MCP's processes and identify where any corrective action is necessary.
- Release guidance and resources in response to Doula Services provider needs.

Guidance and Recommendations

DHCS released additional guidance and recommendations in response to Doula Services provider needs, including, but not limited to:

Recent Guidance and Recommendations

- Multi-Plan Document on Doula Related Expectations for Hospitals (Information only)
- Doula Crosswalk Coding Information
- APL 24-007: Targeted Provider Rate Increases
- Doula Member Notice
- Doula Medicaid Reimbursement Rate Information for Rate Methodologies, Medi-Cal MCP Rates, Doula Reimbursement Rates
- Doula Provider Enrollment Checklist

Prior Guidance and Recommendations

- All Plan Letter (APL) 22-024
- Standing Recommendation for Doula Services for pregnant and post-partum Medi-Cal members on November 1, 2023.
- Doula Services as a Medi-Cal Benefit Webpage, with guidance including, but not limited to MCP Doula Services directory and FAQs
- Doula Services Enrolled Provider List

What's Ahead

All MCP Survey – January 2025

In January 2025, DHCS will survey Medi-Cal MCPs to gather information on their continued progress towards engaging and contracting with Doulas; and updating point of contacts to develop of an All Plan Billing Guidance document.

Provider and Member Point of Contacts

- Credentialing, Contracting, and Onboarding
- Billing, Claims, and Payments
- Dispute Resolutions
- General Inquires

Tailored Resources, if available

- Program Webpage
- General Claims Webpage
- Relevant Forms
- Presentations and Materials
- Training Documents/Toolkits
- Provider Manuals
- Policies and Procedures
- Dedicated E-Mail Address
- Checklists

General Updates

- » California Department of Public Health will issue an All-Facilities Letter regarding doula access to hospitals
- » DHCS is developing an infographic for release in 2025 regarding pregnancy care that will highlight doula services
- » DHCS is working to developing a “best practices” webinar this spring for managed care plans
- » Doula density graphics will be posted online

Doula Implementation Report



Doula Benefit Implementation Report Outline

» Introduction

- Background on Senate Bill 65

» Report Objectives

» Quantitative Methods and Results

- Program Evaluation Section (DHCS)

» Qualitative Methods and Results

- UCB Researchers: Dr. Cassondra Marshall and Dr. Anu Manchikanti Gómez

Doula Benefit Implementation Report Outline

» Discussion & Recommendations

- Discussion of qualitative and quantitative results
- List of previously identified and discussed barriers, along with a description of any actions taken to address them
- Discussion of other relevant findings from outside investigations of the doula benefit
- **Contributors: Stakeholder Workgroup including UCB researchers and DHCS**

» Conclusion

» References & Appendices

Report Requirements

- » Welfare and Institutions Code Section 14132.24
- » (b) The workgroup shall consider all of the following:
 - (1) Ensuring that doula services are available to Medi-Cal beneficiaries who are eligible for and want doula services.
 - (2) Minimizing barriers and delays in payments to a Medi-Cal doula or in reimbursement to Medi-Cal recipients for doula services received.
 - (3) **Making recommendations for outreach efforts** so that all Medi-Cal recipients within the eligible and other target populations are aware of the option to use doula services.

Report Requirements (continued)

- » The department shall publish a report that provides the following:
 - Number of Medi-Cal recipients utilizing doula services, broken down by race, ethnicity, primary language, health plan, and county.
 - The report shall also identify any barriers that impede access to doula services in the prenatal, labor and delivery, and postpartum periods.
 - [The report shall] **make recommendations to the department and the Legislature to reduce any identified barriers** [that impede access].

Potential general topics for recommendations

» Issues raised at previous meetings:

- Enrolling with DHCS
- State and local requirements for enrollment
- Contracting with managed care plans
- Amounts paid for services
- Timeliness of payments

Potential general topics for recommendations

» Access issues

- Hospitals
- Labor and Delivery
- Triage

» Training on how to submit claims

» Up-to-date contact information regarding claims, contracting

» Responsiveness to questions about contacting, claims

» Outreach efforts and promotion of doula benefit to members

Doula Benefit Meeting Schedule

» Senate Bill 65 requires DHCS to publish the report on its website by **July 1, 2025**:

Doula Workgroup Report Timeline		
March 14, 2025	April 11, 2025	May 9, 2025
Finalize recommendation topics	Finalize recommendations	Review draft report

Break

Outstanding questions from Doula Stakeholders



Frequently Asked Questions

- » What topics should be added to the FAQs?
 - Doulas may provide home births
 - Telehealth requirements for warm hand-off for in-person services when requested by member
 - Liability insurance requirements
 - Provider dispute process with managed care plans

Chat Questions and Answers



Next Steps and Closing



Contact Information

» Written comments can be sent to the dedicated doula mailbox:

» DoulaBenefit@dhcs.ca.gov.

» For more information:

<https://www.dhcs.ca.gov/provgovpart/Pages/Doula-Services.aspx>