Maryland Department of Health – Medicaid Doula Services Program Manual

Issued: April 1, 2022
<mark>**Updated:** Jun 30, 2023</mark>

<u>**Background**</u>

Effective February 21, 2022, Maryland Medicaid provides coverage for doula/birth worker services to Medicaid beneficiaries. A doula, or birth worker, is a trained professional who provides continuous physical, emotional, and informational support to birthing parents before, during, and after birth. Certified doulas serving Maryland Medicaid members will provide person-centered, culturally-competent care that supports the racial, ethnic, and cultural diversity of members while adhering to evidence-based best practices.

Doulas provide three kinds of services: prenatal visits, attendance at labor and delivery, and postpartum visits.

The Department encourages Maryland-based hospitals to review their labor and delivery admitting policies in recognition of this new provider type to ensure that doulas may provide services within their scope of practice during the labor and delivery.

This program manual contains related information for the implementation, costs, reimbursements, and use of doulas within Maryland Medicaid's population.

<u>**Participant Eligibility Criteria**</u>

To be eligible to receive doulas services, a participant shall:
- Receive services through a HealthChoice MCO OR be enrolled in Fee-For-Service Medicaid; and
- Be pregnant, or have delivered a child within the last 180 days.

<u>**Referral Requirements**</u>

A health care professional or an MCO may refer HealthChoice enrollees to doula services; however, a referral is not required for participation. A physician, or other licensed clinician, such as a social worker, nurse practitioner or local health department worker may also refer Medicaid enrollees for doulas. Prior authorization is not required for doulas through an MCO's provider network.

MCO Referrals and Reimbursement to Medicaid-enrolled Doula Providers

MCOs must allow their network providers to refer eligible individuals directly to in-network doula providers. MCOs must contract with doulas approved by Maryland Medicaid. MCOs should track members who enroll with doula services to ensure they have adequate capacity to serve the eligible population. MCOs may require contracted doulas to provide notification back to the MCO when a member has enrolled into the program.

Provider Enrollment

Eligible providers may now enroll in Maryland Medicaid. Doula providers who meet all the conditions of participation outlined in Policy Transmittal 37-22 are eligible to enroll as either an individual or group "Doula Provider" type (code 'DL') through ePREP. To enroll as a doula provider, please visit eprep.health.maryland.gov.

Provider Qualifications

Doula providers must be certified from a Maryland Medicaid approved certification organization and meet all the conditions of participation outlined in COMAR 10.09.39 to be recognized as an approved doula provider. The Department consulted with key stakeholders to determine standardized criteria for selecting Maryland approved certification organizations.

Reimbursement Methodology

Medicaid will provide coverage for up to eight (8) perinatal visits, as well as attendance at labor and delivery, known as the 8:1 model. The 8:1 model allows for any combination of prenatal and postpartum visits that equals 8 or fewer visits per birthing parent. Each perinatal visit is broken up into 15-minute units and can last up to an hour (4 units total).

Medicaid will reimburse a flat fee for attendance at delivery. The fee schedule is as follows. As of July 1, 2023, the reimbursement rate for attendance at labor and delivery (T1033) is $800.

Description	Service Code until 3/31/23	Service Code Starting 4/1/23	Per unit rate as of 7/1/23	Max Units per service
Prenatal service visits (15 min/unit)	W3701	T1032	$16.62	4
Attendance at delivery (flat rate)	W3700	T1033	$800	1
Postpartum service visit (15 min/unit)	W3702	T1032 U9	$19.62	4

Note: Due to the CMS designation of service codes for doulas, MDH transitioned to these new codes effective April 1, 2023. Any services provided before 4/1/23 should be billed using the W codes indicated, and any services provided on or after 4/1/23 should be billed using the T codes.

The Department requires MCOs to pay contracted doula providers at least the minimum rate for doula services.

HealthChoice and Fee-For-Service Reimbursement Methodology for In-Person and Virtually Provided Doula Services

Participating doulas must use the appropriate CPT code and modifiers when submitting claims for reimbursement. The reimbursement period is based on the participant's eligibility for doula services.

A participant is eligible throughout the prenatal and postpartum periods, or they have exhausted the maximum allotment of services, whichever comes first.

Prenatal and postpartum services may be delivered in the home, at the provider's office or doctor's office and other community-based settings. Doula services for prenatal and postpartum visits may be delivered in-person or as a telehealth service. The labor and delivery service must be provided in-person and can only be delivered at a hospital or freestanding birthing center. Medicaid reimbursement for labor and delivery services rendered by a doula provider in the participant's home or place of residence will not be authorized. One of the following providers shall be present while doula services are provided during the delivery:
   a. An obstetrician-gynecologist;
   b. A family medicine practitioner; or
   c. A certified nurse midwife.

If a participant's pregnancy does not result in a live birth, the number of visits that have not been utilized from the number of visits allocated to prenatal and postpartum services can be used towards postpartum and/or bereavement support.

Providers may bill for services after each service is rendered using one of the codes specified below. Providers should use the diagnosis code Z32.2, which stands for 'encounter for childbirth instruction' when billing for any and all of their services (see Table 2 below).

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Table 1. *Medicaid Doula Services Reimbursement Methodology for Minimum Payment for Doula Visits Rendered In-Person or Via Telehealth*

CPT Code and Description until 3/31/23	CPT Code and Description after 4/1/23	Per Unit Rate as of 7/1/23	Place of Service Description	Place of Service code	Modifier to use	Limitations
W3701-Prenatal doula visit	T1032 - Prenatal doula visit	$16.62	Doula visit in home	04/12	none	4 15-minute units per service; 8 total services maximum
W3701-Prenatal doula visit	T1032 - Prenatal doula visit	$16.62	Doula visit at doctor's office w/ client	11/50/22	none	4 15-minute units per service; 8 total services maximum
W3701-Prenatal doula visit	T1032 - Prenatal doula visit	$16.62	Doula visit in community	11/99	none	4 15-minute units per service; 8 total services maximum
W3701-Prenatal doula visit	T1032 - Prenatal doula visit	$16.62	Doula visit via telehealth	12	GT*	4 15-minute units per service; 8 total services maximum
W3700 -Labor & Delivery doula support	T1033 - Labor & Delivery doula support	$800 (flat rate)	Doula visit in hospital/L&D - in-person only	21/25	none	1 unit of service per delivery; Cannot be delivered as a telehealth service and can only be delivered in a hospital or birthing center
W3702-Postpartum doula visit	T1032 U9 - Postpartum doula visit	$19.62	Doula visit in home, in-person	04/12	none	4 15-minute units per service; 8 total services maximum
W3702-Postpartum doula visit	T1032 U9 - Postpartum doula visit	$19.62	Doula visit in community, in-person	11/99	none	4 15-minute units per service; 8 total services maximum
W3702-Postpartum doula visit	T1032 U9 - Postpartum doula visit	$19.62	Doula visit via telehealth	12	GT*	4 15-minute units per service; 8 total services maximum

*Place of Service 02 will be accepted for FFS dual eligible beneficiaries receiving doula services via telehealth. Providers serving HealthChoice participants should continue to use the GT modifier for telehealth services.

Detailed explanation of place of service codes are at
https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place_of_Service_Code_Set.

The following ICD-10 diagnosis codes may be used for billing:

Table 2. *Medicaid Doula Services ICD-10 Code*

Diagnosis Code	Description	When to Use
Z32.2	Encounter for childbirth instruction	Prior to delivery, labor and delivery, after delivery

Payment Coding and Procedures

1. The provider shall submit the request for payment of services rendered according to procedures established by the Department and in the form designated by the Department.
2. The Department reserves the right to return to the provider, before payment, all invoices not properly signed, completed, and accompanied by properly completed forms required by the Department.
3. Payment advances are not made routinely.
4. The Program will make no direct payment to recipients.

Limitations

2. One of the following providers shall be present while doula services are provided during the delivery:
   a. An obstetrician-gynecologist;
   b. A family medicine practitioner; or
   c. A certified nurse midwife.
3. The Maryland Medical Assistance Program will not cover;
   a. Expenses including:
      i. Administrative overhead; or
      ii. Ongoing certification, training, or consultation.
   b. Doula services rendered during labor and delivery as a telehealth visit; and
   c. Services that are not medically necessary.

Provider Enrollment and Conditions of Participation

Approved doulas will meet the following requirements:
1. General requirements for participation in the Program are that a provider shall meet all conditions for participation as set forth in COMAR 10.09.36.03.
2. Specific requirements for participation in the Program as a certified doula provider require that the provider:
   a. Be at least 18 years of age;
   b. Maintain up to date certification through a doula certification program approved by Maryland Medicaid [see below];
   c. If enrolling as an individual provider, obtain a Type 1/individual NPI; if enrolling as a group practice type, obtain a Type 2/organizational NPI. Note: All individual doulas will need to enroll with ePREP regardless of whether they intend to operate as an individual or part of a doula group or collective.
   d. Must pass a background check; and
   e. Have and maintain adequate liability insurance.

Please note that doula providers who wish to contract with MCOs may need to obtain their standard level of liability insurance, which is typically $1,000,000 per incident/$3,000,000 aggregate.

The following organizations are approved by MDH. For each organization, **ALL** of the listed trainings are required:

Organization	Certification Requirement(s)
Doula Trainings International	- Birth Doula Certification **AND** - Postpartum Doula Certification **OR** - Full Spectrum Doula Certification
The Childbirth and Postpartum Professional Association (CAPPA)	- Certified Labor Doula Certification **AND** - Certified Postpartum Doula Certification **AND** - Certified Community Lactation Educator Certification
Black Doula Training (BDT), formerly The International Black Doula Institute	- Pregnancy & Childbirth Doula Certification **AND** - Postpartum & Newborn Certification **AND** - Lactation/Breastfeeding Certificate of Completion
Ancient Song Doula Services	- Full Spectrum Labor & Postpartum Certification
Mamatoto Village	- Community Birth Worker Certification
Doulas of North America (DONA)	- Birth Doula Certification **AND**

	- Postpartum Doula Certification
International Childbirth Education Association (ICEA)	- Birth Doula Certifications **AND** - Postpartum Doula Certification
Childbirth International (CBI)	- Birth Doula Certification **AND** - Postpartum Doula Certification
MaternityWise	- Labor Doula Certification **AND** - Postpartum Doula Certification

Doula Services providers who meet Maryland Medicaid's certification and participation requirements are eligible to enroll as "DL provider" type through ePREP. To enroll as a Medicaid DL provider, an individual or group must take two steps:

1. Obtain a type 1 National Provider Identifier (NPI) through the National Plan and Provider Enumeration System (NPPES) for the individual or organization it intends to enroll as a DL provider. The NPPES website is https://nppes.cms.hhs.gov. For doula collectives or groups that wish to participate, the Department's policy requires that DL providers obtain a separate Type 2/organizational NPI for each practice location.

2. Submit a new enrollment application via Maryland Medicaid's electronic Provider Revalidation and Enrollment Portal (ePREP) as a DL provider. Please visit ePREP.health.maryland.gov.

Please note: As part of the enrollment application, doulas must also upload the requested individual or group addendum. If this document is not uploaded with the application, it may cause delays in the application review process. Please see the 'Medicaid Enrollment Guide for Doulas' on the Doula Providers Website for more detail on how to enroll.

To receive reimbursement for HealthChoice beneficiaries, doulas must also contract with Maryland Medicaid's Managed Care Organizations (MCOs).

Doula Services Benefits and Service Components

Doula services aim to provide continuous physical, emotional, and informational support to the birthing parent throughout the prenatal and postpartum periods. Services may be rendered from time of beneficiary enrollment into the program until eight perinatal visits have been exhausted or up to 180 days after delivery, whichever comes first.

The prenatal and postpartum visits are often in the birthing parent's home. In these visits, the certified doula provides service components, including:
- Information about the childbirth process;
- Emotional and physical support which may include:
  - Prenatal coaching;
  - Providing person centered care that honors cultural and family traditions; and

- ○ Teaching and advocating on behalf of the birthing parent during appointment visits;
- Provision of evidence-based information on general health practices pertaining to pregnancy, childbirth, postpartum care, newborn health, and family dynamics;
- Provision of emotional support, physical comfort measures, and information to the birthing parent to enable the birthing parent to make informed decisions pertaining to childbirth and postpartum care, and other issues throughout the perinatal period;
- Provision of support for the whole birth team including a birthing parent's partner, family members, and other support persons;
- Provision of evidence-based information on infant feeding to supplement, but not in lieu of, the services of a lactation consultant;
- Provision of general breastfeeding guidance and resources;
- Provision of infant soothing and coping skills for the new parents; and
- Facilitation of access to community or other resources that can improve birth-related outcomes such as ongoing home visiting services; transportation; housing; alcohol, tobacco and drug cessation; WIC, SNAP, and intimate partner violence resources.

Doulas also provide the following service components to the birthing parent during labor and delivery:
- Emotional and physical support which may include:
  - ○ Prenatal coaching;
  - ○ Physical comfort measures during labor and delivery;
  - ○ Providing person centered care that honors cultural and family traditions; and
  - ○ Teaching and advocating on behalf of the birthing parent during hospitalization and delivery.

Frequently Asked Questions (FAQ)

Please also refer to the Medicaid Doula Services Frequently Asked Questions document posted on the Doula Services website here, for additional implementation guidance. This document will be updated periodically as additional questions are received, or additional clarification is added.

For resources, including instructions for providers, visit health.maryland.gov/ePREP. To apply, visit ePREP.health.maryland.gov. For enrollment assistance, call the ePREP Call Center at 1-844-4MD-PROV (1-844-463-7768).
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Please direct questions regarding Maryland's Doula Services Program or provider enrollment qualifications to mdh.medicaidmch@maryland.gov.