

# Doula Certification, Providers, and Services

April 02, 2024





Department of Medicaid

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### Housekeeping



All participants will be muted.



Today's presentation is attached, you can download it from the Handouts section. It will be posted to our website soon.



Submit your questions and comments via the Questions box. Responses will be provided verbally and/or as a direct response to you.

Make sure to also check the chat box for messages that may be sent to all attendees.



### Ohio Medicaid is Enthusiastically Supporting Doulas and Doula Services • Doula services have been shown to improve birth



- Doula services have been shown to improve birth outcomes, maternal experiences, and reduce racial disparities in maternal and infant outcomes
- Doula services are associated with improved birth outcomes
  - ✓ Fewer low birth weight babies
  - ✓ Fewer birth complications
  - ✓ Higher breastfeeding initiation rates
- Doula services result in improved maternal experiences
  - ✓ Higher maternal engagement in care
  - ✓ Higher maternal satisfaction scores
  - Improved health equity through provision of culturally contextual and competent care
  - Medicaid focus groups involving Black women indicated a need and desire for doula service coverage
- Doula services are shown to be cost effective for Medicaid
  - ✓ Lower pre-term birth rates
  - ✓ Lower Cesarean section rates



### What Doula Services are

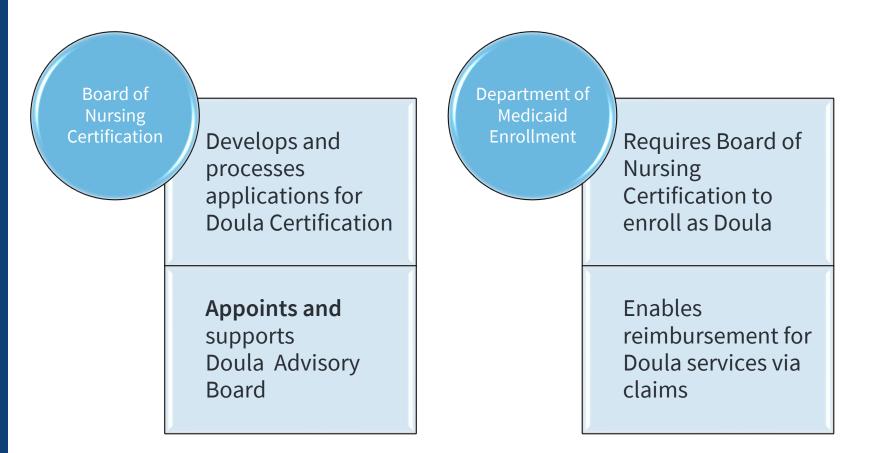
- Doulas provide physical, educational, and emotional support during pregnancy and childbirth
- Doulas are not medical professionals they do not deliver babies or provide medical care
- Doulas complete a training program and pass an exam
  - ► Antepartum doula services
  - ► Labor doula services
  - ➢ Postpartum doula services
- Doula services provided by community-based doulas have been shown to be effective interventions in reducing health equity gaps and improving birth outcomes





### Board of Nursing and Department of Medicaid

How certification and enrollment fit together





## OHIO BOARD OF NURSING CERTIFICATION OF DOULAS



January 9, 2024, Meeting of the Doula Advisory Board January 30, 2024, Meeting of the Doula Advisory Board February 21, 2024, Meeting of the Doula Advisory Board February 28, 2024, Initial Draft Rules disseminated for Public Comment

March 28, 2024, Initial draft of proposed Rules and Public Comments were reviewed and discussed at the Board of Nursing Rules Advisory Group

April 10, 2024, next meeting of Doula Advisory Board.

Will review and discuss public comments and the draft rules.



## DRAFT RULE CONTENT

**Board of** 

Nursing

**Content Proposed Draft Chapter 4723-24, OAC** 4723-24-01: Definition of terms 4723-24-02: Doula certification 4723-24-03: Renewal of doula certificate 4723-24-04: Continuing education requirements 4723-24-05: Doula certification by endorsement 4723-24-06 Standards of doula practice 4723-24-07 Disciplinary actions/investigations





**DOULA CERTIFICATION PROGRAM** 

## **October 3, 2024**

#### Administrative Rules must be in effect on or before this date



### **OHIO DEPARTMENT OF MEDICAID DRAFT DOULA RULE**

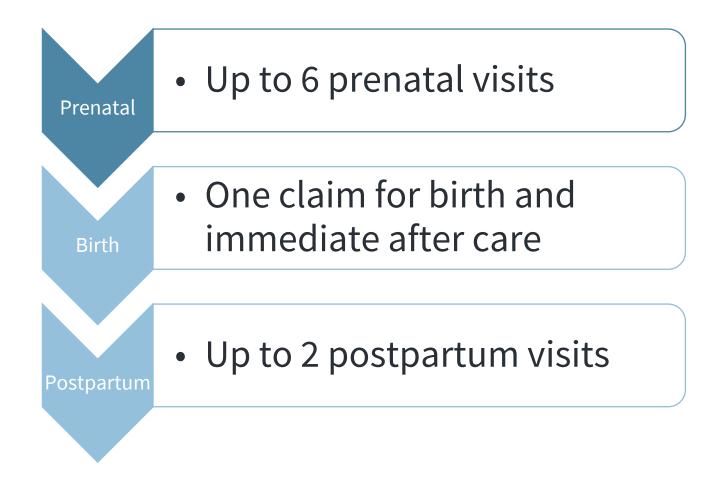
- •A new policy is being developed to outline coverage and payment criteria for doula services
- •Doula services will be a part of the Chapter 5160-8 Therapeutic and Diagnostic Services: OAC 5160-8-43
- Payment amounts for doula services will live in Appendix DD to OAC 5160-1-60
  - A draft rule will be available for comment before formally introducing: <u>https://medicaid.ohio.gov/stakeholders-and-partners/legal-and-contracts/legal-and-contracts/legal-and-contracts</u>
- ➢ODM will be requiring MCOs to adhere to the Medicaid FFS rate through mid-2026



#### **INITIAL PROPOSED SERVICE BREAKOUT**

▶ \$1000-\$1200 total compensation package

> Considering telehealth options for prenatal and postpartum visits





#### UPDATED SERVICE BREAKOUT INCORPORATING FEEDBACK RECEIVED



- Changed to allow more flexibility in visit length and timing
- Units can be delivered via telehealth
- Reimbursement set to \$12.50 per unit, managed care cannot pay less than FFS rate for two years

- Separate reimbursement for birth of \$600 regardless of length of service time
- Reimburses for any place of service
- Managed care cannot pay less than FFS rate for two years



Visits

#### **DOULA ENROLLMENT UPDATE**

- A doula may enroll as an independent doula (PT 09)
- Or be affiliated with:
  - A professional medical group (PT 21)
  - A rural health clinic (RHC) (PT 05)
  - A federally qualified health center (FQHC) (PT 12)
  - An ambulatory health care clinic (PT 50)
  - A hospital (PT 02)
  - A free-standing birth center (PT 11)



#### **DOULA SERVICES RECOMMENDATION**



- Doula services require a "recommendation" from a practitioner with prescriptive authority
  - Recommendation is not an order or a referral
  - Recommendation means a practitioner with responsibility for a birthing person's care documents in their medical record that the person can benefit from the services of a doula
  - Recommendations are a requirement of Medicaid's federal authority, Centers for Medicaid and Medicare Services (CMS)



#### **MEDICAID RULES**

#### Rules in Effect

These are the rules that the Ohio Department of Medicaid has adopted and added to the Ohio Administrative Code.

- Medicaid Program Rules, Section 5160
- Medicaid Program Rules, Section 5160:1

In addition, you can view these rules from our on-line program manuals.

#### **Draft Rules**

These are rules that Ohio Medicaid staff are drafting and editing, but have not yet been formally proposed for adoption. As part of the public participation process, the Ohio Department of Medicaid solicits and encourages input from affected organizations and individuals.



### **MEDICAID RULES**

5160 | Ohio Department of Medicaid Ohio Administrative Code

160-1   General Provisions	
160-2   Hospital Services	
160-3   Long-Term Care Facilities; Nursing Facilities; Intermediate Care Facilities for Individuals with Intellectu es.	ual
160-4   Medical and Surgical Services	
5160-5   Dental Services	
5160-6   Eye Care Services	
5160-7   Podiatric Services	
5160-8   Therapeutic and Diagnostic Services	
100 0 Therapeutic and Diagnostic Services	



- ▲ 5160-8-43 Doula services.
  - (A) Unless otherwise noted, any limitations or requirements specified in the Revised Code or in agency 5160 of the Administrative Code apply to services addressed in this rule.
  - (B) Definitions.
    - (1) "Doula" has the same meaning as in Section 4723.89 of the Revised Code.
    - (2) "Doula service" is one of the support activities specified in Section 4723.89 of the Revised Code.
  - (C) Providers. The following eligible providers may receive medicaid payment for submitting a claim for a covered doula service:
    - (1) An ambulatory health care clinic defined in Chapter 5160-13 of the Administrative Code;
    - (2) A federally qualified health center (FQHC);
    - (3) A rural health clinic (RHC);
    - (4) A professional medical group;
    - (5) An independent doula;
    - (6) A hospital; or
    - (7) A <u>free standing</u> birth center.



- (D) Allowances and limitations.
  - (1) Payment may be made only for a doula service that is performed at the recommendation of a practitioner having prescriptive authority.
  - (2) Separate payment may be made for both an evaluation and management service and a doula service rendered by a different provider to the same individual on the same date of service.
  - (3) The doula reimbursement timeframe may run from the date of confirmed conception through three hundred sixty-five days after delivery, contingent on the individual maintaining medicaid eligibility.
  - (4) Payment may be made for doula services during labor and delivery.
  - (5) Payment for doula services rendered without prior authorization is subject to the following limits:



- (a) All visits outside of birth, including consultation, telehealth, prenatal and postpartum visits are reimbursed at fifteen-minute increments.
- (b) Payment may be made for up to forty-eight fifteen-minute increments from the first prenatal visit to twelve months postpartum.
- (5) When frequency limits stated in paragraph (D) of this rule are exceeded, payment may be made for additional doula services through the prior authorization process as described in rule <u>5160-1-31</u> of the Administrative Code.
- (6) Payment may be made for a doula service in any place of service.
- (E) Claim payment.
  - (1) For a covered doula service rendered at an FQHC or RHC, payment is made in accordance with Chapter 5160-28 of the Administrative Code.
  - (2) For a covered doula service payment is the lesser of the provider's submitted charge or the maximum amount specified in appendix DD to rule 5160-1-60 of the Administrative Code.



## **DOULA COMMUNICATION AND OUTREACH PLAN**

#### THE NEW DOULA WEBPAGE IS NOW LIVE!

Click the new Doula Resource tile at the bottom of the Maternal and Infant Support Program (MISP) webpage to access our new Doula webpage

<u>https://medicaid.ohio.gov/families-and-</u> <u>individuals/citizen-programs-and-initiatives/maternal-</u>

#### Resources

Doulas

Ohio Department of Medicaid Doula Initiative

Program Introduction MISP is Ohio Medicaid's priority work to improve infant and maternal outcomes, with a

Maternal and Infant Support

<u>https://medicaid.ohio.gov/families-and-</u> <u>individuals/citizen-programs-and-</u> <u>initiatives/maternal-and-infant-support/doulas</u>

Medicaid / Families & Individuals / Programs & Initiatives / Maternal and Infant Support / Doulas

#### **Doulas**

Ohio Department of Medicaid Doula Initiative

Doulas advocate and provide educational, non-clinical emotional, physical, and informational support to pregnant people and their families during pregnancy, childbirth, and after. A doula is a non-medically trained birth professional who helps reduce disparities by helping families have safe, healthy, and positive birth experiences.

Doulas have been shown to improve birth outcomes, support birth equity, positively impact the social determinants of health, and reduce disparities in maternal and infant outcomes.

More information to come as Ohio Medicaid implements coverage for doulas and their services!

#### **Doula Stakeholder Meetings**

Date	Stakeholder Meetings	Meeting Links
01/08/2024	Session One	PDF
	с · т	005



### Doula Medicaid Technical Assistance Plan

Key learning: Doulas need support to enroll and bill as Medicaid providers





## Build and share technical assistance toolkit

- Leverage existing resources
- Tailor user guides and learning modules for doulas



## Provide prompt and personalized assistance

- Provider assistance hotlines and email
- One on one assistance with troubleshooting



### **ODM Doula Timeline**

#### Stakeholder Engagement and Input **Building Systems** January to March 2024 Administration - Listening sessions February through the end of 2024 - Focused conversations March through the end - Adding provider type of 2024 -Individual feedback and specialty - Updating and - Adding claim codes processing rules and requirements - Updating state plan - Finalizing rates - Communications

Late fall/early winter

Ongoing feedback and communications loopTechnical Support

- Provider Assistance



### **Stay in Touch with ODM**

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https://medicaid.ohio.gov/home/govdelivery-subscribe

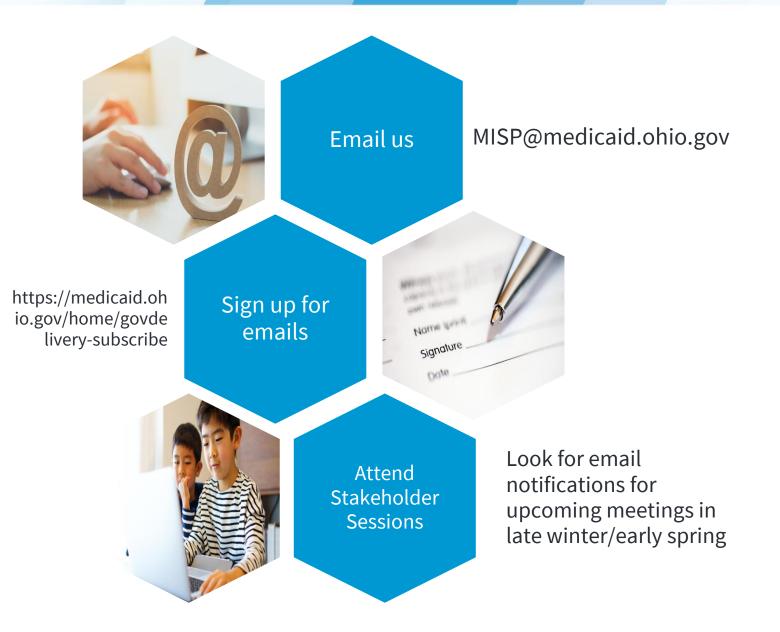
#### Subscribe to the **ODM Press**

A newsletter designed to help Ohio Medicaid's provider community with changes to Ohio's Medicaid program

#### Subscribe to the MISP listserv Insights into the latest initiatives, policies, and programs specific to the wellbeing of mothers and children



Ways to Engage with ODM





### THANK YOU! WE LOOK FORWARD TO HEARING FROM YOU SOON