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PERMANENT ADMINISTRATIVE RULES

Oregon Health Authority, Division of Medical Assistance
Programs

410

Agency and Division

Administrative Rules Chapter Number

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RULE CAPTION

Payment process for doula services provided at the time of labor and delivery

Not more than 15 words

RULEMAKING ACTION

ADOPT: 410-130-0015

AMEND:

REPEAL:

RENUMBER:

AMEND & RENUMBER:

Stat. Auth.: ORS 413.042 & 414.065

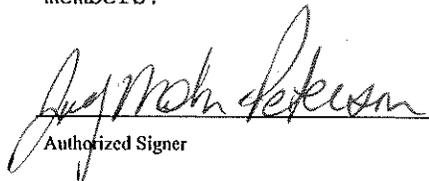
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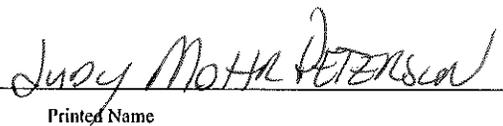
Stats. Implemented: ORS 414.065

RULE SUMMARY

House Bill 3650, passed during the 2011 legislative session, mandates that members enrolled in Medicaid have access to Traditional Health Workers (THWs) to facilitate culturally and linguistically appropriate care. The Traditional Health Worker Steering Committee under the Office of Equity and Inclusion identified

doulas as Traditional Health Care workers. The Authority adopted OAR 410-180-0300 through 0380 establishing the process for training, certification, and registry enrollment of doulas and other traditional healthcare workers. This rule sets forth the requirement for reimbursing doula services provided to eligible members.


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410-130-0015

Doula Services

(1) The primary purpose of providing concurrent doula services with the services of a licensed obstetrical practitioner is to optimize birth outcomes, including reduced Caesarian sections, epidural use, reduced assisted vaginal deliveries, and reduce the number of neonatal care unit admissions. These face-to-face services are provided only during the labor and delivery phase of the client's pregnancy. The following are expected to benefit most from doula services:

(a) A woman with a racially or ethnically diverse background including, Black/African American, Asian, Pacific Islander, Native American, Latino or multiracial;

(b) A homeless woman;

(c) A woman who speaks limited to no English;

(d) A woman who has limited to no family or partner support; or

(e) A woman who is under the age of 21;

(2) Doula services may be provided only at the request of the licensed obstetrical practitioner. The doula and licensed obstetrical practitioner must work concurrently. The licensed obstetrical practitioner must be a physician or advance practice nurse.

(3) Doulas must be certified and registered with the Authority pursuant to OAR 410-180-0325 through 0327. Certification must be effective at the time doula services are provided. Doulas must provide proof of certification to the practitioner.

(4) Doula services are covered for any woman whose benefit package covers labor and delivery.

(5) The provision of doula services during labor and delivery must be documented in the client's medical record by the licensed obstetrical practitioner.

(6) Payment for doula's services

(a) The licensed obstetrical practitioner may be eligible for an additional payment, as remuneration for the attending doula providing the doula services;

(b) Doulas may not receive direct payment from the Division;

(c) To be considered for the additional payment, the professional claim for the delivery services must include the unique Medicaid modifier of U9 appended to the appropriate obstetrical code billed at the time of delivery;

(d) This modifier may only be billed once per pregnancy. Multiples (i.e., twins, triplets) are not eligible for additional payment for the doula's services;

(e) Only one additional payment shall be made for doula services regardless of the number of doulas providing the services;

(f) Only providers with a provider type designation of 34 or 42 may bill the U9 modifier.

(7) Doula services at the time of delivery are the only services eligible for payment under this rule. Services provided during the prenatal and postnatal period are governed by OAR 410-130-0595 (Maternity Case Management).

Stat. Authority: ORS 413.042 and 414.065

Stat. Implemented: ORS 414.065