



PERMANENT ADMINISTRATIVE ORDER

DMAP 57-2021

CHAPTER 410

OREGON HEALTH AUTHORITY

HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

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ARCHIVES DIVISION
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FILING CAPTION: Amends Doula Services Rule, Clarifies Doula Requirements And Coverage Of Services For Oregon Medicaid Beneficiaries

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AMEND: 410-130-0015

REPEAL: Temporary 410-130-0015 from DMAP 33-2021

NOTICE FILED DATE: 11/17/2021

RULE SUMMARY: Amended rule incorporates updated ethnicity and gender identity language. Adds reference to federal statute and Oregon Administrative Rules. Clarifies role of birth doula as part of members' birthing team. Clarifies requirements for Traditional Health Worker (THW) registry, OHA provider enrollment for coverage and reimbursement. Removes specific fee for service reimbursement rate which is available from published rates based upon date when services are provided.

CHANGES TO RULE:

410-130-0015

Doula Services ¶

(1) The primary purpose of providing birth doula services with the services of a licensed obstetrical practitioner as a member of the birthing team is to optimize birth outcomes, including prevention of preterm births, fewer neonatal intensive care admissions, reduced Caesarean sections, reduced epidural use, and improved member experience of birthing care. These ~~face-to-face~~ services are provided during the prenatal, labor and delivery, and postpartum phases of the member's pregnancy. WomenPregnant women or pregnant persons experiencing health disparities are expected to benefit most from birth doula services, including the following:¶

(a) A womanpregnant woman or pregnant person with a racially or ethnically diverse background including, Black/African American, Asian, Native Hawaiian/Pacific Islander, Native American, Latino/Latina/Latine, or multiracial;¶

(b) A homeless woman;¶

(c) A womanpregnant woman or pregnant person experiencing houselessness;¶

(c) A pregnant woman or pregnant person who speaks limited to no English;¶

(d) A womanpregnant woman or pregnant person who has limited to no family or partner support; or¶

(e) A womanpregnant woman or pregnant person who is under the age of 21.¶

(2) Pursuant to 440.130(c), doula services may be provided only at the request of by a physician or other licensed obstetrical practitioner. The doula and licensed obstetrical practitioner shall

coordinate care and shall work concurrently during the delivery phase of the pregnancy. The licensed obstetrical practitioner shall be a physician or advanced practice nurse birth provider acting within the scope of authorized practice under State law.¶

(3) Birth doula providers shall meet the following requirements at the time services are provided:¶

(a) Shall be enrolled with the Authority as a Traditional Health Worker (THW) pursuant to OAR 410-180-0300.¶

(3b) Doulas shall be certified and a birth doula pursuant to OAR 410-180-0315.¶

(c) Shall be registered with the Authority pursuant to OAR 410-180-0325 through 410-180-0327. Certification shall be effective at the time doula services are provided. Doulas shall 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 shall be documented in the client's medical record by the licensed obstetrical practitioner. The doula shall provide the licensed practitioner with records of the face-to-face visits for inclusion in the medical record. The¶

(4) Birth doula providers shall document services provided for each encounter. The birth doula's record shall include the dates of service, a brief description of education or services provided, assessment of any client or member needs beyond routine care, and any referrals made. Birthing plans developed with the member shall be included with member approval. The goal of documentation is to verify services were provided and facilitate communication between with other member and the obstetrical practitioners of the birthing team.¶

(5) The Authority will pay for birth doula services for any woman or pregnant person whose benefit package covers labor and delivery.¶

(6) Payment for birth doula services:¶

(a) For a member enrolled in Fee for Service (FFS) medical programs:¶

(A) To be considered for payment, birth doula services shall be billed on a professional claim and shall include the unique Medicaid modifier of U9 appended to the appropriate obstetrical codes;¶

(B) DBirth doula care shall be billed as a global birth doula package. A global package shall include at a minimum two prenatal face-to-face visits, care during the labor and delivery phase, and two postpartum face-to-face visits. All of the services in the global package must be provided by the same doula;¶

(C) Itemized billing, i.e., billing the day-of-delivery as a standalone and billing separate prenatal and postpartum visits, is allowed in extenuating circumstances. Extenuating circumstances include but are not limited to when the primary birth doula is not able to attend the delivery and a backup birth doula provides services or when a mother is late to care making scheduling two prenatal face-to-face visits impossible.¶

(i) When appropriate due to extenuating circumstances, services rendered by multiple birth doulas for the same pregnancy may be itemized for billing;¶

(ii) Reimbursement of itemized services, regardless of the number of birth doulas serving the member, may not exceed the global package total.¶

(D) Billing for birth doula services shall include:¶

(i) Using CPT 59400+U9, 59510+U9, 59610+U9, or 59618+U9 one time for a global birth doula package;¶

(ii) Using CPT 59899+U9 for each face-to-face visit encounter up to four visit encounters and one delivery-only code + U9 for the day-of-delivery in the case of itemized billing. Acceptable day-of-delivery-only codes are: 59409+U9, 59514+U9, 59612+U9, or 59620+U9;¶

(iii) Claim only one global birth doula package per pregnancy. A global birth doula package may not be billed together with any of the itemized birth doula services codes for the same pregnancy.¶

(E) DBirth doula services may only be billed once per pregnancy. Multiples (i.e., twins, triplets) are not eligible for additional payment;¶

(F) Only an enrolled birth doula, provider type designation 13/600, may be the rendering provider for birth doula services;¶

(G) Effective May 1, 2017, the FFS rate for the global doula package will be \$350; the itemized day-of-delivery will be \$150; and the itemized face-to-face visits will be \$50 each.¶

(b) For a member enrolled in CCO medical programs, payment shall be according to OARs governing CCO provider payment.

Statutory/Other Authority: ORS 413.042, ORS 414.065

Statutes/Other Implemented: ORS 414.065