



PERMANENT ADMINISTRATIVE ORDER

DMAP 91-2024

CHAPTER 410

OREGON HEALTH AUTHORITY

HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

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FILING CAPTION: Changes Required To Support The CMS New Procedure Code For Doulas.

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RULE SUMMARY: This rule is being changed to incorporate the new code for doulas from Centers for Medicare and Medicaid Services (CMS).

CHANGES TO RULE:

410-130-0015

Doula Services ¶

(1) The primary purpose of providing birth doula services 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 services are provided during the prenatal, labor and delivery, and postpartum phases of the member's pregnancy. Pregnant women or pregnant persons experiencing health disparities are expected to benefit most from birth doula services, including the following:¶

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

(b) A pregnant woman or pregnant person experiencing houselessness;¶

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

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

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

(2) Pursuant to 440.130(c), doula services shall be recommended by a physician or other licensed 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 410-18950-060-03000.¶

(b) Shall be certified as a birth doula pursuant to OAR 410-180-0315950-060-0040.¶

(c) Shall be registered with the Authority pursuant to OAR 410-180-0325 through 410-180-0327950-060-0060 through 950-060-0080.¶

(43) 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. The goal of documentation is to verify services were provided and facilitate communication with other members of the birthing team.¶

(54) The Authority ~~wish~~ shall pay for birth doula services for any woman or pregnant person whose benefit package covers labor and delivery.¶

(65) Payment for birth doula services:¶

(a) No pre-authorization is required:¶

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

(Ac) To be considered for payment, birth doula services shall be billed on a professional claim and shall include the unique Medicaid modifier of U9HD or 22 appended to the appropriate obstetrical codes;¶

(Bd) Birth doula care shall be billed as a global birth doula package. A global package shall include at a minimum two (2) prenatal face-to-face visits, care during the labor and delivery phase, and two (2) postpartum face-to-face visits;¶

(Ee) 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 (2) prenatal face-to-face visits impossible;¶

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

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

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

(iA) Using CPT 59400+U9, 59510+U9, 59610+U9, or 59618+U9 T1033 with HD modifier one time for a global birth doula package (delivery with two (2) prenatal and two (2) postpartum visits);¶

(iiB) Using CPT 59899+U9 for each encounter up to four encounters and one T1033 with 22 modifier for Doula service day of 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. T1033 with No modifier for Support visit (two (2) prenatal and two (2) postpartum visits);¶

(C) 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.¶

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

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

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

Statutory/Other Authority: ORS 413.042, ORS 414.065

Statutes/Other Implemented: ORS 414.065