

Guidelines for THW Doulas Serving OHP Members

By Debra Catlin

THW Commission Systems Integration Subcommittee Member

Once you are a state registered THW Doula, being able to serve clients who are Oregon Health Plan (OHP) members requires additional steps to be able to submit claim forms for payment and to set up your practice to meet certain obligations for serving OHP members.

1. First, your certification letter should be kept handy, as it has your effective date, certification ID# and date of expiration. You will need to submit copies for certain entities.
2. Get your NPI#

If you have not already applied for an individual [NPI#](#), you should do that next. On the application, put:

Entity Type 1 Individual with SSN Provider type #13

Billing for Birth Doula Services

You have two choices on how you will be able to bill for your services. As of July 1, 2018, [new rules](#) went into effect for doulas to be able to bill directly for services. This can be done through a Doula Hub or as an individual biller. It is best to contact the CCO (s) that serve OHP members in your service area to find out how they are working with THW Doulas. Contact the THW Liaison for each CCO.

About Doula Hubs

In many areas, Doula “Hubs” have been or are being established so THW Doulas can bill as groups, rather than individuals. Doula Hubs may be a business, agency, or community organization that has applied and been approved by the state of Oregon as a TYPE 09 or TYPE 09-059(Doula Specific only) Billing Provider. Doula Hubs are also an organizational model that serves many other purposes besides billing. Hubs will collaborate with area care providers and [Coordinated Care Organizations](#) (CCOs) to establish a referral system and client-doula matching, provide supervision and coordination for the doula team, serve as a liaison to families, doula, and providers, and much more. Doula Hubs may also be enrolled with one or more CCOs that serve the

OHP members in your area or are seeking to do that. Contact the CCOs in the areas where you will be serving clients to find out which Doula Hubs they are currently working with. If there are none available yet or the CCO is working directly with doulas, an individual option exists and information on this option follows below.

The Doula Hub will have you establish a contract with them and also enroll you as a Non-payable Provider with DMAP on [Form 3113](#) to receive a Provider ID number. You may also do this yourself if you are going to bill individually. The following information is needed for the form:

Your Name, Individual NPI#, Social Security #

A physical service location address such as your home, business address, agency address, or a non-profit community organization address, plus a mailing address if different.

Oregon Medicaid Provider type: 13

Taxonomy code: 374J00000X Specialty code: 600

Licensing Board: OEI

Also give them a copy of your THW Doula Certification Letter that shows your effective date, expiration date, and Certification number.

You will then receive a welcome letter from the state's Medical Assistance Program (MAP) with a Provider ID # and be entered into the [Medicaid Management Information System](#) (MMIS). You will receive a PIN# from MAP which can be used to check eligibility on all clients and follow-up on any Fee for Service claims. If a group is billing for you, they will do that on your behalf but if you are billing individually, you will do this. Once you receive it, you have 30 days to log in to activate yourself in the system and create your own login.

You must keep your state provider file updated with any change of address by going to [Form 3035](#) Fax it to (503) 947-1177.

Before your THW Doula Certification expiration date passes, and you have been recertified, send in a copy of the new OEI letter with the new expiration date. Write your Provider ID# on it and fax it to (503) 947-1177.

If mail is returned to the state or you do not update your THW Certification, you will be termed. If you update your information before six months, you will be activated again. After six months, you will have to be re-enrolled.

Some CCOs are beginning to contract with Doula Hubs for their services at higher rates of reimbursement for doula services. This means THW Doula would become one of their “preferred providers.” Some are also paying higher reimbursement rates without having THW Birth Doula contract with them. If the CCO is contracting with doulas, they may require you to complete an [Oregon Practitioner Credentialing Form](#). Most of what is on this form does not apply to doulas, so indicate that on the form. The CCOs credentialing department will assist you in completing this form and may require other forms as well. You may also be expected to carry liability insurance, and this can be purchased from [CM&F Liability](#) for a reasonable annual cost.

Individual Billing

If there are no THW Doula Hubs established in your area, you might work with any doula businesses or community-based organizations in establishing one and then enroll as a group billing provider through [Provider Enrollment](#).

If the CCO is working directly with doulas or no Hub is formed in your area yet, you may apply to be approved as an Individual Billing Provider. You will need to enroll through [Provider Enrollment](#). Under the Provider Description table, find Doula (not the organization type) and find [Form 3872](#). Do not forget the cover sheet when you fax it in. You will then receive a welcome letter from Medical Assistance Program (MAP) with a Provider ID # and be entered into the MMIS (Medicaid Management Information System). You will receive a PIN# from MAP and you would use this to check all client eligibility and when you bill DMAP for Fee for Service clients on the [Provider Portal](#). You will need to approach the CCOs in your area to be enrolled in their claims system.

Doula Services, Billing and Payment

The base birth doula care package established by the state includes 2 prenatal support visits, labor and birth care, and 2 postpartum support visits. CCOs may contract for additional support visits if they wish.

There are two categories of OHP members. The majority (92%) of them are served under [Coordinated Care Organizations](#) (CCO) management and the rest are Fee For Service members. If you are working with a Doula Hub, they will ask you for certain information about your clients and services to be able to complete claim forms. They would have established the billing process and coding with each CCO they bill to and if your client is Fee for Service they will bill directly to the state.

After you have completed your doula services for a client, you should submit the information the Doula Hub needs from you to them after the birth so that they can send in a claim form for you. If you are an individual biller, you can submit your claim form to the CCO or to the state yourself after completion of the services.

Reimbursement Rates

The base fee set by the state for the complete package of doula care is currently \$350, or if services are itemized, \$50 for each support visit and \$150 for the birth care. This is the amount you would be paid if billing to the state for Fee for Service members. This is also the minimum amount that a CCO would have to pay for doula services, however many are paying much higher amounts to THW Doulas either through Doula Hubs or to individuals. They may set different amounts for itemized billings.

When billing to the state, generally doula care should be billed as a global doula package if one THW Doula completed the services. A global package shall include at a minimum two prenatal support visits, care during the labor and delivery phase, and two postpartum support visits. This generally holds true for CCOs as well, though they may use different codes.

A. For a global doula package, bill one time after the delivery using:

59400 + U9 for vaginal

59510 + U9 for cesarean

59610 + U9 for vbac

59618 + U9 for cbac

For itemized billing use CPT 59899+U9 for each support visit, up to four, and one delivery-only code + U9 for the day-of-delivery.

59409 + U9 for vaginal

59514 + U9 for cesarean

59612 + U9 for VBAC ending in vaginal birth

59620 + U9 for VBAC ending in cesarean

Bill only one global doula package per pregnancy. Do not bill a global doula package with any of the itemized doula services codes for the same pregnancy.

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

Itemized billing, i.e., billing the day-of-delivery separate from the support visits, is allowed in extenuating circumstances such as when the primary doula is not able to

attend the delivery and a backup doula provides services or when less than the minimum support visits are done. In this case, bill after you have completed the postpartum visits, as you will need the dates to add on the claim form. Also, each doula involved would either bill separately, or if a group billing provider is billing, each doula's name, NPI#, and codes are listed.

Also, it is a good idea to check the MMIS system to confirm eligibility on the date of delivery.

<https://www.medicaid.gov/medicaid/data-and-systems/mmis/index.html>

You would use your pin code sent to you once you enrolled as a DMAP Provider.

Establishing THW Doula Services

Referrals

Once you have your billing service arrangements made, if you are working with a Doula Hub, they will refer clients to you. Otherwise, you will need to contact the CCO(s) and the care providers that serve OHP members in the area you wish to provide services to discuss how referrals are handled. If the CCO and the providers that work for them do not already have a process established, they may need to be educated on the program, the role of the doula, how to put a request for doula services in client's charts, and the need for documentation at the birth and following the completion of services. This information is covered in the [Doula Services Rules](#).

Tips for Providing Doula Services

As a THW Doula it is important to determine how many and how often you provide doula services to OHP members, as ideally you are available to be the Primary Doula for the client. Being available to provide all of the prenatal visits, birth care and postpartum follow-up visits allows for the continuity of care that is crucial for creating the rapport and trust that will carry through the whole relationship between you. This element is the hallmark of doula care, especially when serving prioritized populations. While back-up will also need to be arranged, it should be reserved for those situations where illness or emergency occurs, or you are attending another birth.

Most referrals for THW Doula services will come through care providers to your Doula Hub or individual business. **THW Doula services must be requested through the member's care provider so it can be noted in the client's chart per the [Doula Services Rules](#).** Once an OHP member has selected you as their primary doula, you

or your client need to give your name and contact information to the care provider so that this may be done. If an OHP member contacts you first, and was not referred by the care provider, make sure that person asks for doula services through them before any commitment is made to the client.

Though no money will be exchanged between you and the client, a contract between you should be signed. In addition to the provisions and expectations you normally have in your contract with clients, here are some additional things to add or emphasize:

1) The understanding that you are booking time in your schedule to serve the client and that you will only be paid upon completion of the services (unlike private pay clients). Emphasize that you need a firm commitment that the client will be available for the support visits and also call you for the birth;

2) An agreement to keep contact information current and to respond by phone, text, or email in a timely manner;

3) That no additional monies can be paid to you by the client (Medicaid rules) for any reason;

4) A clause that states that the client is agreeing to accept these services and their signature is considered to be “on file” for billing purposes;

5) That you have discussed your role and scope of practice, and what your care package includes in terms of # of prenatal visits, birth care, and postpartum visits;

6) Your policies on your availability by phone or in person, and what the focus will be during your prenatal and postnatal visits;

7) That your care does not include any medical advice or clinical care and that you will refer them back to their care providers for that information;

8) That they contact you when they go into established labor, usually at their home first, as you mutually define it during the prenatal visits.

When you arrive at your client’s birth place, have the nurse or Certified Nurse Midwife document your name and the time you arrived in the chart. After the birth have the nurse, doctor or midwife put the following information in the patient’s chart: Your name, the date, and the times you arrived and left.

Documentation

You should create a client contact record in which you note all client contact you have, including phone calls or texts. Include brief notes about the topics you covered and any referrals that you made. After you have completed your services, you will need to submit this record of your services and a copy of the client's birth plan to the care provider to be added to the client's medical chart. The process for doing this would be arranged with the care provider, CCO, or be spelled out with the Doula Hub you are working with.

Do you have a Civil Rights Complaint or concern regarding THW-Doula services?

- [Webinar on Oregon Health Authority's Non-discrimination Policy for the Public/Individual](#)
- [THW Complaint Form](#)

For additional Information about the THW program, please contact us at:

Telephone: 971-673-3353

Fax: 971-673-1128

Email: thw.program@state.or.us