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# PENNSYLVANIA DOULA MEDICAID BENEFIT TOOLKIT



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### INTRODUCTION

This toolkit was developed by the Pennsylvania Doula Commission in partnership with community members and stakeholders.

The purpose of this toolkit is to educate families, Doulas, and policy makers across the Commonwealth about the Medicaid benefit to cover and reimburse Doulas for the services they provide.

Medicaid covers over 3 million people in Pennsylvania. Raising awareness of this benefit, the credentialing process, and network availability is needed. This is especially important as a method to increase the availability of Doulas for families across the state.

For the sake of inclusivity to all, this toolkit is designed to cater to women, transgender, nonbinary, and gender-diverse people. Throughout this toolkit language will be both person-focused as well as include gendered terminology. While the information in these materials is meant for everyone, language continues to evolve and we will attempt to use the most updated and inclusive language at this time.

## ABOUT THE PA DOULA COMMISSION

The Pennsylvania Doula Commission (PADC) is a non-profit organization dedicated to the recognition, promotion, and protection of the Doula profession by promoting equitable access to Doula services through workforce development for Doulas, facilitating childbirth with dignity, improving perinatal health outcomes, and eliminating barriers by reducing healthcare disparities. PADC honors its communities by engaging individuals who have first-hand encounters as providers, are a birthing person in the Commonwealth, or both, making PADC fully equipped to accomplish their mission. PADC emerged in 2021 as Doulas and stakeholders began to meet, with hopes of collaborating to expand Doula access in Pennsylvania. In this process leaders emerged to help advance Doulas' efforts to provide equitable access to Doula support, while protecting the interests of both families and Doulas across the Commonwealth.

PADC continues to act as both a leader and a liaison in collaboration with stakeholders and government agencies

who have a shared interest in uplifting the

work of Doulas in Pennsylvania and

improving maternal and infant health

across the state.

PADC is the first of its kind, and is poised to be a long-standing beacon for maternal and infant health and the Doula profession for both Pennsylvania and the US. PADC works closely with state legislators, doctors, nurses, and midwives who share their vision to advance maternal health supportive services in

Pennsylvania.

## BENEFITS OF DOULA CARE

**Doulas** are non-medical caregivers who offer physical, emotional, and informational support to expectant individuals and their partners throughout the entire childbirth process, encompassing the prenatal period, during labor, and postpartum.

#### Doulas help:

- Provide information about procedures and actions carried out during labor and postpartum
- Assist in explaining the pregnant person's birth plan and act as an advocate for their emotional and physical needs to hospital staff and clinicians
- Create physical comfort through massage, focused breathing exercises, and other support techniques
- Offer guidance and encouragement to the birthing person's family and loved ones
- Support breast/chestfeeding

It is important to note that Doulas do not offer medical advice or have the authority to alter the clinical recommendations made by midwives or doctors. Nevertheless, their role holds significant value. They supply support and motivation throughout labor and delivery and contribute to a more positive birthing experience.

## BENEFITS OF DOULA CARE

Research indicates that Doula care can enhance the safety of labor and delivery for pregnant individuals and their infants. Some of the advantages of Doula care include:

- Reduced rates of cesarean sections (C-sections)
- Decreased maternal mortality rates
- Shortened time in labor
- Decreased infant mortality rates
- Reduced anxiety and depression for the birthing person
- Reduced postpartum depression
- Decreased usage of pain relief medications during labor
- Fewer negative childbirth experiences
- Improved communication between the pregnant individual and their healthcare providers
- Increased breast/chestfeeding

When compared to expectant individuals who do not engage Doulas, those who are at high risk for complications during labor and delivery and are supported by a Doula are:

- Half as likely to encounter birth complications
- Four times less likely to have a low birth weight baby
- More inclined to breast/chestfeed
- More likely to express satisfaction with the care they received

## BENEFITS OF DOULA CARE CONT.

In the United States, people of color, especially Black individuals, face higher rates of maternal mortality and severe maternal morbidity, which refers to unexpected and severe complications arising from labor and childbirth. Multiple factors contribute to this situation, including social, economic, and environmental determinants, among others.

Clinical prejudice impacts many communities and their abilities to choose how to construct their families.

Alongside medical racism is ageism, fat-phobia, homophobia, transphobia, and many other forms of prejudice and bias that impact birthing people's experiences and their health outcomes

Having an individual whose role is to support and advocate for the birthing person when interacting with clinical staff is an important method in combating clinical prejudice. No matter one's identity, everyone deserves a caregiver who can offer physical, emotional, and informational support if that is desired.

# FREQUENTLY ASKED QUESTIONS

- Why do we need the Certified Perinatal Doula Credential?
  - The Certified Perinatal Doula Credential is necessary to create a standard for the PA Department of Human Services and CMS so that Doulas can be recognized as a provider type. Being recognized as a provider is an important step for Doula services to be reimbursable when support is provided to families who are enrolled in Medicaid.
- What is the difference between a Doula and a Community Health Worker?
  - Doulas and Community Health Workers are both valuable members of the healthcare team. While Doulas and Community Health Workers may share some similarities in their roles, there are important

distinctions. Doulas are trained professionals who provide emotional, physical, and informational support to pregnant individuals, particularly during childbirth. They are often hired privately by expectant individuals and work alongside medical professionals to ensure a safe and positive birth experience. On the other hand, Community Health Workers are trained individuals who work within their communities to provide health

education, outreach, and support.

They often work with underserved populations to address health disparities and

promote healthy behaviors.



# FREQUENTLY ASKED QUESTIONS CONT.

While they may work with pregnant women, their focus is broader and includes other areas of health and wellness.

#### • What is the difference between a Doula and Midwife?

 Midwives provide medical care during pregnancy, birth, and the postpartum period. Doulas provide families with emotional, informational, and physical support during pregnancy, birth and the postpartum period.

#### • Who came up with the Scope of Work?

• In 2021 nearly 90 people who are Doulas, midwives, and public health experts met regularly to collaborate on a scope of work that allowed us to develop a credential without over regulating the work. Our goal as a team was to create a standard that we can work with.

#### Why is the scope of work so broad, and different from DONA?

 DONA is a respected trademarked line of Doula training and certification, but the CPD credential is designed specifically to the needs of our community and families placed in the margin. The CPD credential applies to birth, postpartum and loss support. It is an entirely new scope of work for Doulas.

#### Where do I find a list of Pennsylvania Certified Perinatal Doulas (CPD)?

 You can find the most current listing of Doulas with the state credential in our website navigation under Updated CPD List or by <u>clicking here.</u>

#### How long does a prenatal or postpartum Doula visit typically last?

o Prenatal Doula visits typically last 1-2 hours.

# FREQUENTLY ASKED QUESTIONS CONT.

- How many Doula visits are typically provided in the prenatal and postpartum period?
  - Doulas spend a significant amount of time with their families over the course of pregnancy and birth, however, each family's needs are unique. For some families, typical course of care with a Doula includes one or two prenatal visits, support during labor and birth, and one or two postpartum visits.
- Can you provide examples of services that are included in a typical visit?
  - During labor and birth, Doulas offer support through various techniques, including comforting touch, massages, and verbal encouragement. They may assist with breathing, positioning, and offering birthing parents the nutritious food and fluids needed to make it through labor.
- How do Doulas connect to pregnant individuals to provide Doula services?
  - Doulas connect with pregnant individuals in a variety of ways, including: the DONA website and other certifying agencies, Doula agencies and collectives, inhospital Doula services, word of mouth, referrals by medical/health providers and through hospital partnerships, news articles, social media, online searches, community-based organizations, and more.
- How many individuals does a Doula typically work with at a time?
  - Industry standard dictates that Doulas can take up to 6 clients per month, with a great Doula network to provide back up in the case that two clients are in labor at the same time. However, every Doula is different in how many families they care for.

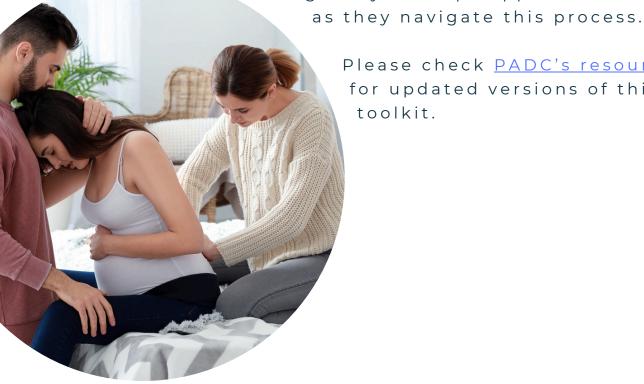
### THE PENNSYLVANIA MEDICAID BENEFIT

To expand support for Doula services in Pennsylvania, the Department of Health Services (DHS) Office of Medical Assistance Programs (OMAP) has assisted the PADC in developing a credentialing process for professional Doulas (see page 11). Pennsylvania's new credential process, through the Pennsylvania Certification Board, will allow Doulas to be recognized by and paid through Medicaid. This benefit will allow birthing people to have additional support, advocates, referrals, connections to resources, and more.

Payment to healthcare providers for maternity care, which is covered through a "maternity care bundled payment," now includes Doulas as being part of the Maternity Care Team as of January 1, 2024. However, more information is to come

> and we will be updating this document regularly to help support Doulas

> > Please check PADC's resource page for updated versions of this toolkit.



## DOULA CREDENTIALING

Doulas seeking to work with MCOs in the medical assistance program need to have the Certified Perinatal Doula credential from the PA Certification Board. The Certified Perinatal Doula credential in Pennsylvania allows for each Doula in the Commonwealth to have universal training and education experiences as well as receive reimbursement through Medicaid. There are two pathways towards credentialing for Doulas.

#### **Experience Pathway:**

- Current Doulas
- Birth workers other than Doulas (Midwives, Lactation Professionals, Placenta Encapsulation Specialists, Childbirth Educators, Social Workers, and Case Managers)
- Community organizations associated with Doula work

#### Training Pathway:

- Receive 24 total hours of education/training relevant to the Certified Perinatal Doula knowledge areas
  - Have one year of experience for applicants who have not obtained their education through an approved certifying body or an approved Doula training organization

Education may be obtained through any Doula certifying body that meets the <u>core competencies</u> or a Doula training organization. Education is defined as formal, structured instruction in the form of workshops, trainings, seminars, in-services, college/university credit courses, and online education.

## DOULA CREDENTIALING CONT.

#### All Doulas will need to:

- Provide documentation of current CPR certification, with competencies for adults and infants.
- Demonstrate knowledge of HIPAA compliance and client/family confidentiality.
- Provide three client evaluations from families served. A consent form (in the application) must be given to each client/family.
- Their application must be notarized.
- Doulas must pay a \$50 application fee.
  - The Pennsylvania Doula Commission is currently covering the cost of credentialing for Doulas. To receive funds to cover the credential, Doulas must fill out this form with PADC. Please see page 13 for more details about the Doula credentialing subsidy.

If a Doula does not receive credentialing, they can still practice and provide Doula services in Pennsylvania, however, they will not receive Medicaid coverage or reimbursement.

More information about the <u>Certified Perinatal Doula</u> <u>credential can be found on Pennsylvania Certification</u> <u>Board's website</u>.

# HOW TO APPLY FOR A NATIONAL PROVIDER IDENTIFIER

For the most efficient application processing and the fastest receipt of a National Provider Identifier (NPI), use the web-based application process.

This process involves logging onto the National Plan and Provider Enumeration System (NPPES) and apply online. See the <u>full guide on how to do this process here</u>.

If you have questions about this process, call 1-800-465-3203 or 1-800-692-2326. You can also email customerservice@npienumerator.com for assistance.

## MCO CONTACT INFORMATION

After Doulas become credentialed, Doulas will need to work with MCOs to begin billing for their services. Here is the contact information for major MCOs in Pennsylvania.

PH-MCO Name	Contact	Title	Email	Phone
Amerihealth Caritas	Meghan Stroud	Director, Provider Network Management	mstroud@amerihealthcaritaspa.co m	570-209-1037
<u>Geisinger</u> <u>Health Plan</u>	Amy Buterbaugh	Director HealthChoices Business Unit	abuterbaugh@thehealthplan.com	724-351-1168
Health Partners (Jefferson)	Chris Ward	Director, Credentialing & Provider Data Management	cward@jeffersonhealthplans.com	215-991-4424
<u>Highmark</u> <u>Wholecare</u>	Angela Ruber	Provider Contractor	aruber@highmarkwholecare.com	412-255-7266
Keystone First (part of the Amerihealth family of companies)	Kim Beatty	Director, Provider Network Management	kbeatty@keystonefirstpa.com	215-863-6614
<u>United</u>	Jodi Kreger	Director Physician Contracting, Network Management	jodi_kreger@uhc.com	612-383-4607
United	Lavinia Nabors	Sr Clinical Program Manager	Lavinia.nabors@uhc.com	412-297-0051
<u>UPMC</u>	Emily Ott	Manager, Contract Management System	ottea@upmc.edu	412-454-6101

# DOULA SERVICES RECOMMENDATION FORM

To receive payment for Doula services under Medicaid, certified perinatal Doulas must complete the <u>Doula</u>

<u>Services Recommendation Form</u> and have it signed by a physician or licensed practitioner of the healing arts prior to the provision of services to an Medicaid beneficiary.

The following licensed practitioners enrolled to participate in Medicaid may recommend Doula services:

- Physician
- Physician assistant
- Certified registered nurse practitioner
- · Certified nurse midwife
- Licensed professional counselor
- Licensed marriage and family therapist
- · Licensed clinical social worker
- Licensed psychologist



It is important to save a copy of the Doula Services Recommendation Form for your records.

# CERTIFIED PERINATAL DOULA COVERED SERVICES

Effective January 1, 2025, Doulas can utilize the <u>Certified</u> <u>Perinatal Doula Covered Services Chart</u> when billing for services they provided to Medicaid beneficiaries.

#### This chart includes:

- Procedure codes
- Service descriptions
- Provider types
- Provider specialties
- Place of service codes
- Modifiers Medicaid fee
- Prior authorization requirement
- Medicaid units
- limits

The Department updated the Medicaid Fee Schedule to add these procedure codes and can be found here.



## CMS-1500 BILLING GUIDE FOR PROMISE

The Department of Human Services offers PROMISe™, its claims processing, provider enrollment, and user management information system. In this delivery system, certified perinatal doulas should submit an 837 Professional/CMS-1500 claim form, or PROMISe™ Internet claim, to the Department of Human Services to receive payment for covered services rendered to Medicaid beneficiaries.



A step-by-step guide on how to complete the CMS-1500 claim form can be found in the "CMS-1500

Billing Guide for PROMISe™ Non-Traditional Provider" document in this PDF.

Additionally, the PROMISe™ handbook and billing guide for 837 Professional/CMS-1500 Claims can be found in this PDF.

### BILLING DESK REFERENCE

Through the PROMISe™ Eligibility Verification System, certified perinatal Doulas must verify the member's Medical Assistance eligibility prior to the provision of services on each date of service. After you provide a service to a Medicaid beneficiary, you may submit a claim for that visit. Services provided to Medicaid beneficiaries must be kept in a beneficiary's record.

#### In order to bill for a service, you must supply at least one of the procedure codes in the chart below:

Procedure Code	Modifier	Service Description	MA Fee	Limits
T1032	U7	Doula Services (Prenatal visit)	\$100.00	Combined limit of 12 visits per calendar year
T1032	U8	Doula Services (Postpartum visit)	\$100.00	Combined limit of 12 visits per calendar year
T1032	U9	Doula Services (Other services – Fertility and pre-conception counseling, pregnancy loss, infant loss, or termination of pregnancy)	\$175.00	2 total "Other services" per calendar year
T1033		Labor and Delivery	\$1000.00	Limit once per pregnancy

- You must submit your claims within 180 days from the date of service.
- You must obtain the MA beneficiary's signature either on the claim form or on the MA Encounter Form (MA 91) as per Section 6.4 of the 837 Professional/CMS 1500 Claim Form PROMISe™ Provider Handbook.

For questions about billing, certified perinatal doulas should contact the Provider Service Center at 1-800-537-8862.

# HOW DO I SUPPORT DOULAS IN PENNSYLVANIA?

While this toolkit exists to help educate and support Doulas in the Commonwealth, there are several additional ways to help uplift the work and needs of Doulas.

Some of these include:

 Finding out if your provider or clinician supports or collaborates with Doulas. If not, it is important for patients to recommend to their providers that working with local Doulas is important for patient wellbeing and health outcomes.



- Supporting the Pennsylvania Doula Commission. They
  are always accepting donations and looking for
  volunteers to help support the commission's work. You
  can find more information about donation and
  involvement on the Pennsylvania DoulaCommission
  website.
- Talking with legislators in Pennsylvania. Many legislators are unaware of the positive impacts that Doulas have on the health of pregnant people and their birth experiences. Educating elected officials at the state and local levels is important because they have influence on Medicaid and other government programs.

# HOW DO I SUPPORT DOULAS IN PENNSYLVANIA? CONT.

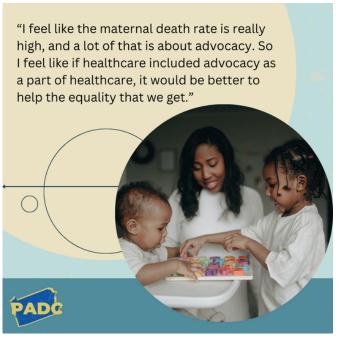
You have sway and impact with those in your community, whether it be your family, friends, coworkers, or neighbors. By talking about the need for greater access to Doula care and support in your own community, you are starting conversations and educating people that you have direct connection to, who will be open to learning from you. So post on social media or discuss interesting or surprising information from this toolkit with your community.

## SOCIAL MEDIA CONTENT

Check out the <u>Google Drive</u> for images and text to use on social media to educate your communities about the need for Doula benefits through Medicaid in Pennsylvania.

Additionally, we have included graphics that discuss the benefits of expanded Doula care for Pennsylvanians.







### CONTACT

Have questions about this resource or the Doula benefit? Please reach out to PADC at contact@PAdoulacomission.org.

### THANK YOUS

A huge thank you to our amazing partners and the individuals who helped build this toolkit, especially Gerria Coffee, Joanne Craig, Elizabeth Lusardi, Kelsey Schorr, Demia Tyler, Cynthia Salter, and Iris Olson.

