ALAMEDA ALLIANCE FOR HEALTH **DOULA BENEFIT OVERVIEW – FOR DOULAS**



Introduction

Alameda Alliance for Health (Alliance) created this Doula Benefit Overview to help provide key information and resources for you and/or your doula group when working with us.

The objectives of this overview are to:

- Describe what a doula is
- Review how to become a Medi-Cal doula
- Provide an overview of contracting/credentialing with the Alliance
- Review services provided by doulas
- Review the 2024 Medi-Cal reimbursement rates
- Identify continued education and training, and additional resources for doulas

We aim to ensure that your relationship with us works well for you, your doula group, and Alliance members. More information is available in your Alliance contract, the Alliance Provider Manual, and on our website **www.alamedaalliance.org**.

The information in this overview is subject to change. For clarification, questions, or comments about your role as an Alliance provider, please call the Alliance Provider Services Department at **1.510.747.4510**.



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The Alliance Provider Network

Thank you for being a part of the Alliance provider network! The Alliance contracts with individual practitioners, medical groups, hospitals, and other non-hospital facilities to provide high-quality health care and services to our members.

The Alliance is a local, public, not-for-profit, managed care health plan committed to making high quality health care services accessible and affordable to Alameda County residents. For over 25 years, the Alliance has worked to provide programs and services you can trust and count on. The Alliance is honored to serve more than 400,000 children and adults throughout Alameda County.

Our Mission

Improving the health and well-being of our members by collaborating with our provider and community partners to deliver high quality and accessible services.

Our Vision

All residents of Alameda County will achieve optimal health and well-being at every stage of life.

We provide services through two (2) lines of business:

- 1. **Alliance Group Care**: An employer-sponsored group health plan for In-Home Supportive Services (IHSS) workers.
- 2. **Medi-Cal**: Affordable insurance for families, children, persons with disabilities, and seniors.

Section 1. What is a Doula?

Doulas are birth workers who provide health education, advocacy, and physical, emotional, and non-medical support for pregnant and postpartum persons before, during, and after childbirth, including support during miscarriage, stillbirth, and abortion. Doulas are not licensed clinicians, and they do not require supervision by a licensed clinician. Doula services are aimed at preventing perinatal complications and improving health outcomes for birthing persons and infants.

Additional support offered by doulas includes:

- Childbirth education
- Creating a birth plan
- Help with making decisions about care
- Link to community-based resources
- Breastfeeding (also known as chestfeeding) education and support

The Alliance offers doula services as a covered benefit for Alliance members.



Section 2. How to Become a Medi-Cal Doula

Doulas who wish to be reimbursed for services provided to Medi-Cal beneficiaries will need to enroll as providers through the California Department of Health Care Services (DHCS) Provider Application and Validation for Enrollment (PAVE) portal.

To be eligible, all doulas must:

- Be at least 18 years old at the time the application is submitted.
- Provide proof of an adult/infant cardiopulmonary resuscitation (CPR) certification from the American Red Cross or American Heart Association.
- Complete the Health Insurance Portability and Accountability Act (HIPAA) training.
- Have a National Provider Identifier (NPI) number (you can create one for yourself at nppes.cms.hhs.gov.
- Meet qualification either through the Training Pathway or Experience Pathway, as described below.

Pathways to Qualification

Training Pathway

- Obtain a Certificate of Completion for a minimum of 16 hours of training in the following areas:
 - Lactation support
 - Childbirth education
 - o Foundations on the anatomy of pregnancy and childbirth
 - Nonmedical comfort measures, prenatal support, and labor support techniques
 - o Developing a community resource list
- Provide support at a minimum of three (3) births

Experience Pathway

- At least five (5) years of active doula experience in either a paid or volunteer capacity within the previous seven (7) years.
- Attestation to skills in prenatal, labor, and postpartum care as demonstrated by the following:
 - Three (3) written client testimonial letters, or professional letters of recommendation from any of the following: a physician, licensed behavioral health provider, nurse practitioner, nurse midwife, licensed midwife, enrolled doula, or community-based organization.
 - Letters must be written within the last seven (7) years.
 - One (1) letter must be from either a licensed provider, a communitybased organization, or an enrolled doula. "Enrolled doula" means a doula enrolled either through DHCS or through an MCP.



Medi-Cal Enrollment

DHCS enrollment is specific to the Medi-Cal programs. The purpose of enrollment is to establish that the doula or doula group is eligible to receive federal and state funds.

A doula or doula group/collective/organization must enroll with the California Medi-Cal program

- Doulas will provide necessary information to DHCS using the online system (PAVE).
 Using this method, the doula's enrollment is valid for five (5) years and you will be listed by DHCS as an enrolled provider.
- Being listed does not obligate the doula to accept Medi-Cal patients from any or all Medi-Cal health plans but the doula's enrollment is valid for all Medi-Cal health plans.
- PAVE takes approximately one (1) hour to complete, and enrollment may be fully processed within two months or may take up to four months (120 days).

Section 3. Contracting and Credentialing Overview with the Alliance

Contracting

To provide services to Medi-Cal members, doulas must sign a contract with the Alliance. A contract establishes terms of working with the Alliance, what kinds of services will be covered by the agreement, reimbursement methods, and rates. Providers covered by a contract will appear in the Alliance's Provider Directory. To request onboarding materials, including the Alliance contract, please send your National Provider Identification (NPI) and IRS W-9 within the past 12 months to **providerservices@alamedaalliance.org**.

Credentialing

All managed care plans (MCPs) of any kind in California must credential their providers, including doulas. The objective of credentialing is to establish that the doula or doula organization/collective/group has the necessary qualifications to provide doula services. The **Requirements for Doulas** document outlines the credentialing requirements for doulas. To view the document, please visit **www.alamedaalliance.org/providers/provider-resources**.



The Credentialing Committee meets routinely to review all new applications and may take up to 60 days to complete. Newly credentialed doulas will be listed in the online Alliance Provider Directory at **www.alamedaalliance.org/help/find-a-doctor**. Credentialing is renewed every three (3) years.



Section 4. Services Provided by Doulas

Doula services include personal, emotional, and physical support to women and families throughout a woman's pregnancy, childbirth, and postpartum experience.

Covered Doula Services

In 2023, DHCS issued a statewide standing recommendation for doula services. The recommendation states that all Medi-Cal members who are pregnant or have been pregnant within the past year would benefit from doula services.

The standing recommendation authorizes the following doula services:

- One (1) initial visit
- Up to eight (8) additional visits that can be provided in any combination of prenatal and postpartum visits
- Support during labor and delivery (including labor and delivery resulting in stillbirth), abortion, or miscarriage
- Up to two (2) extended three (3)-hour postpartum visits after the end of a pregnancy
 - The extended postpartum visits are billed in 15-minute increments, up to three (3) hours, up to two (2) visits per pregnancy per individual provided on separate days.

All visits are limited to one (1) per day, per Alliance member. Only one (1) doula can bill for a visit provided to the same Alliance member on the same day, excluding labor and delivery.

One (1) prenatal visit or one (1) postpartum visit can be provided on the same day as labor and delivery, stillbirth, abortion, or miscarriage support. The prenatal visit or postpartum visit billed on the same calendar day as birth can be billed by a different doula.

Additional Doula Services

Alliance members may receive up to (9) nine additional postpartum visits with a written recommendation from a physician or other licensed practitioner of the healing arts* acting within their scope of practice. Doulas keep the recommendation in the member's medical record.

*DHCS defines a "licensed provider" as a physician or other licensed practitioner of the healing arts, including nurse midwives, nurse practitioners, licensed midwives, and behavioral health providers, acting within their scope of practice under state law. The recommending licensed provider does not need to be enrolled in Medi-Cal or be a network provider within the beneficiary's managed care plan.

Providers can find the **Recommendation for Additional Doula Services Form** on our website at **www.alamedaalliance.org/providers/provider-forms**.



Non-Covered Doula Services Under the Medi-Cal Benefit

The following services are not covered under Medi-Cal or as doula services:

- Belly binding (traditional/ceremonial)
- Birthing ceremonies (i.e., sealing, closing the bones, etc.)
- Group classes
- Massage (maternal or infant)
- Photography
- Placenta encapsulation
- Shopping
- Vaginal steams
- Yoga

How Doulas Provide Services

Doula services can be provided virtually (telehealth) or in-person with locations in any setting including, but not limited to, homes, office visits, hospitals, or alternative birth centers. Doula services can only be provided during pregnancy; labor and delivery, including stillbirth; miscarriage; abortion; and within one (1) year of the end of a member's pregnancy.

Doulas can provide assistive or supportive services in the home but must be incidental (accompanying) to doula services provided during the prenatal or postpartum visit (i.e., a doula may help the postpartum person fold laundry while providing emotional support and offering advice on infant care). Alliance members cannot be billed for assistive or supportive service.

Doulas cannot bill for additional pregnancy-related services already offered through Medi-Cal. DHCS requires that the doula works with the Alliance to refer the Medi-Cal member to a network provider who is able to render the service.

Services that are not part of the doula benefit, include, but are not limited to:

- Behavioral health services
- Belly binding after cesarean section by clinical personnel
- Childbirth education group classes
- Clinical case coordination
- Comprehensive health education including orientation, assessment, and planning (Comprehensive Perinatal Services Program services)
- Health care services related to pregnancy, birth, and the postpartum period
- Hypnotherapy (non-specialty mental health service)
- Lactation consulting, group classes, and supplies
- Medically-appropriate Community Supports services
- Nutrition services (assessment, counseling, and development of care plan)
- Transportation services

Doulas may not charge a member for verifying their Alliance eligibility. Doulas may teach classes that are available at no cost to members to whom they are providing doula services.



Documentation

- Doulas must document the dates, times, and duration of services provided to the member.
- The documentation must also describe the service provided and the length of time spent with the member that day. For example, documentation might state, "Discussed childbirth education with the member and discussed and developed a birth plan for one (1) hour."
- Documentation should be integrated into the member's medical record and available for encounter data reporting.
- The doula's NPI number should be included in the documentation. Documentation must be accessible to the Alliance and DHCS upon request.
- Doulas must submit the Recommendation for Additional Doula Services Form to each claim filed for additional doula visits beyond those authorized by the standing recommendation.

Member Eligibility Criteria

To be eligible for doula services, a potential client must be enrolled with the Alliance. Doulas can contact the Alliance or use the Provider Portal to verify eligibility. It is important to check the member's eligibility each time a visit occurs. Changes in status may affect claims. The Alliance must inform Medi-Cal members of any change to their eligibility, but Medi-Cal members may not always update the doula on these changes. To access the Alliance Provider Portal, please visit **www.alamedaalliance.org** and click on the Provider Portal button in the top right corner.

• If a member's eligibility has changed while the doula is working with them the doula should contact the Alliance Provider Services Department at **1.510.747.4510**.

Section 5. Medi-Cal Rates and Billing Reimbursement

The Alliance reimbursement is based on the Medi-Cal Fee Schedule (MCFS).

Claims should be submitted each time a visit occurs. Claims must be submitted for services to be paid. Doulas may submit claims through the Alliance Provider Portal.

Please use the appropriate diagnosis and billing codes listed below for each doula visit and service type. *All claims must be submitted with the 'XP' modifier added to the billing code.*

Diagnosis Codes

While Doulas do not assign diagnoses to members, they must submit claims with a diagnosis code that is relevant to the service they are providing. One or more of the ICD10 CM diagnosis codes must be included on each claim.



Billing Codes and Rates for Doula Services as of January 2024

The table below highlights the billing codes to be used by doulas and the reimbursement rates as of January 2024.

All claims must be submitted with the 'XP' modifier added to the billing code.

| | Services | Number of Visits | Reimbursement | Billing Code |
|----------------------|-----------------------------|------------------|--------------------|-----------------|
| Visits, per | Initial Visit | 1 | (if at least 90 | Z1032 |
| pregnancy | | | minutes): \$197.98 | |
| | Additional Visits: any | Up to 8 | | |
| | numerical combination of | Prenatal | \$162.11 | Z1034 |
| | prenatal and postpartum | Postpartum | \$162.11 | Z1038 |
| | Extended Visits: extended | Up to 2 | (for a three-hour | T1032 |
| | 3-hour postpartum | | visit): \$486.36 | |
| Labor and | Vaginal delivery | 1 | \$685.07 | 59409 |
| Delivery | Vaginal delivery after | 1 | \$768.69 | 59612 |
| | previous caesarean section | | | |
| | Caesarean section | 1 | \$795.73 | 59620 |
| Abortion and | Miscarriage | 1 | \$250.85 | T1033 |
| Miscarriage | Abortion | | \$250.85 | 59840 |
| Support | | | | |
| Modifiers for | Live audio-only telehealth | | | 93 |
| telehealth | Live audio/video telehealth | | | 95 |
| services | | | | |

Source: www.dhcs.ca.gov/provgovpart/Pages/Doula-Providers-Reimbursement-FAQ.aspx

DHCS Doula Billing Code Crosswalk

The table below shows the diagnosis codes and associated billing codes doulas must use to submit a claim. All claims must be submitted with the 'XP' modifier added to the billing code.

| Doula Billing Code Crosswalk | | | | |
|------------------------------|--|---|---|---|
| Billing Code* | Billing Code Service Description | Diagnosis Code(s) | Diagnosis Code Service Description(s) | Additional Guidance |
| HCPCS code Z1032 | Extended Initial visit | Z32.2 (prenatal) Z32.3 (prenatal) Z39.1 (postpartum) | Encounter for childbirth instruction Encounter for childcare instruction Encounter for care and examination of lactating mother Encounter for routine | Any one of the four diagnosis codes can be used with HCPCS code Z1032. Please note that the initial visit can be either prenatal or postpartum. |
| | | (postpartum) | postpartum follow-up | |



| | Doula Billing Code Crosswalk | | | | | |
|------------------------|---|----------------------|---|---|--|--|
| Billing Code* | Billing Code Service Description | Diagnosis Code(s) | Diagnosis Code Service Description(s) | Additional Guidance | | |
| HCPCS code Z1034 | Prenatal Visit | Z32.2 Z32.3 | Encounter for childbirth instruction Encounter for childcare instruction | Either diagnosis code can be used with HCPCS code Z1034. | | |
| CPT code 59409 | Vaginal Delivery | Z33.1 Z39.0 | Pregnant state, incremental Encounter for care and examination of mother immediately after delivery | Either diagnosis code can be used with CPT code 59409. Please note that diagnosis code Z39.0 is intended to be used after delivery. | | |
| CPT code 59612 | Vaginal delivery after cesarean delivery | Z33.1 Z39.0 | Pregnant state, incremental Encounter for care and examination of mother immediately after delivery | Either diagnosis code can be used with CPT code 59612. Please note that diagnosis code Z39.0 is intended to be used after delivery. | | |
| CPT code 59620 | Cesarean delivery | Z33.1 Z39.0 | Pregnant state, incremental Encounter for care and examination of mother immediately after delivery | Either diagnosis code can be used with CPT code 59620. Please note that diagnosis code Z39.0 is intended to be used after delivery. | | |
| CPT code 59840 | Abortion | Z33.1 | Pregnant state, incremental | Only diagnosis code Z33.1 should be used with CPT code 59840. | | |
| HCPCS code T1033 | Miscarriage | Z33.1 | Pregnant state, incremental | Only diagnosis code Z33.1 should be used with HCPCS code T1033. | | |
| HCPCS code Z1038 | Postpartum visit | Z39.1 Z39.2 | Encounter for care and examination of mother immediately after delivery Encounter for care and examination of lactating mother Encounter for routine postpartum follow-up | Any of the three diagnosis codes can be used with HCPCS code Z1038. Please note that diagnosis code Z39.0 is intended to be immediately after delivery. | | |



| Doula Billing Code Crosswalk | | | | |
|------------------------------|--|----------------------|---|--|
| Billing Code* | Billing Code Service Description | Diagnosis Code(s) | Diagnosis Code Service Description(s) | Additional Guidance |
| HCPCS code T1032 | Postpartum Extended Visit | Z39.0 | Encounter for care and examination of mother immediately after delivery | Any of the three diagnosis codes can be used with HCPCS code T1032. Please note |
| | | Z39.1 Z39.2 | Encounter for care and examination of lactating mother Encounter for routine postpartum follow-up | that diagnosis code Z39.0 is intended to be immediately after delivery. |

Source: www.dhcs.ca.gov/services/medi-cal/Documents/Doula-Implentation-Presentation.pdf

Section 6. Continuing Education and Recommended Trainings, and Resources for Doulas

Continuing Education

Doulas are required to complete three (3) hours of continuing education in maternal, perinatal, and/or infant care every three (3) years. Doulas must maintain evidence of completed training to be made available to DHCS or the Alliance upon request.

Recommended Trainings

Supplemental training that is recommended but not required includes, but is not limited to, the following:

- Perinatal support
- Hands-on support with clients
- Trauma-informed care
- Cultural sensitivity or competency, implicit bias or anti-racism or social determinants of health for birthing populations
- Perinatal mood and anxiety disorders
- Intimate partner violence
- Postpartum care/support
- Infant and newborn care
- Perinatal loss and bereavement support

Resources

The Alliance has created the following resources for doulas:

• **Doula Training and Resources** power point presentation – Reviews important information for doulas contracted with the Alliance.



• **Provider Portal Instruction Guide** – Provides an overview of our provider portal, how to verify member eligibility, and submit and track claims.

Both documents can be found on our website at **www.alamedaalliance.org/providers/provider-resources**.

For general inquiries, please email us at doula@alamedaalliance.org.

We Are Here to Help You

Thank you for joining the Alliance provider network! We hope that you have found the information and resources in this overview to be useful and helpful. Your partnership with the Alliance is vital to our relationship. We welcome and encourage comments and suggestions about this overview or any other aspect of your relationship with the Alliance. Together, we are creating a healthier community for all.

If you have any questions or concerns, please contact:

Alliance Provider Services Department Monday – Friday, 7:30 am – 5 pm Phone Number: **1.510.747.4510**

Email: providerservices@alamedaalliance.org