



BILLING POLICY: DOULAS

Policy

The Eastern Oregon Coordinated Care Organization (EOCCO) will reimburse for Birth Doula services when the services are provided by a State certified and registered Birth Doula.

The Role of Birth Doulas

A birth doula is a birth companion who provides personal, nonmedical support to birthing people and their families throughout the pregnancy, childbirth, and postpartum experience. Birth doulas may provide support before, during, and after delivery.

Doula Training and Supervision

To qualify for reimbursement under the Oregon Health Plan, Birth Doulas must be certified by the Oregon Health Authority (OHA) through an approved training program and enrolled in the State's central registry. Birth doula certification requires 40 hours of approved training and meeting required competencies. EOCCO will verify doulas' certification in the registry and report their names for network adequacy as required by OHA.

The entity/provider employing Birth Doulas or the Birth Doulas themselves are responsible for the cost of training and certification. Individuals seeking certification should refer to EOCCO's [Birth Doula DMAP Enrollment and Reimbursement Instructions](#).

Covered and Non-Covered Services

Covered Services:

1. Global benefit: four support visits (two prenatal and two postpartum visits) and support at birth
2. Partial services
 - a. Support visits, up to two prenatal and postpartum visits
 - b. Support for member at the day of birth
 - c. Additional support visits (up to four)
 - i. Must be billed separately beyond the global benefit

Non-Covered Services:

1. Does not cover more than eight total support visits with global benefit and four support visits without global benefit or Death Doula services.

Billing, Payment, and Clinical Documentation Requirements

Billing:

- Claims for Birth Doula services must be billed on a standard CMS-1500 billing form following standard coding and billing requirements.
- For a global benefit, bill once per pregnancy. The billing date should be after the day of delivery, when the doula has completed all global benefit services.
 - Additional support visits should be billed separately beyond the global birth doula package.
- For partial and multiple services, bill on separate lines for each day a service is provided.
- All services should be billed as one (1) unit.
- Claims should be submitted to Moda for processing no different than billings for any other medical services.

Payment:

Doula services will be reimbursed on an itemized or bundled Fee-For-Service (FFS) basis using the following CPT codes and reimbursement rates, where the global doula benefit includes two prenatal visits, day-of-birth support, and two postpartum visits.

Code	Modifier	Description	Service Type
T1033	HD	Global doula benefit with support at all deliveries (vaginal, cesarean, VBAC, attempted VBAC/cesarean)	Bundled services (two prenatal visits, day-of-birth support, two postpartum visits) - \$1,500.00
T1033	22	Support at delivery – includes all delivery (vaginal, cesarean, VBAC, attempted VBAC/cesarean)	Itemized service - \$645.00
T1033		Support visit (up to 8 visits total with global benefit, up to 4 visits total without global benefit)	Itemized service - \$215.00 (per visit)

Billing examples

Global doula benefit

24. A. DATE(S) OF SERVICE						B. PLACE OF SERVICE		C. EMG		D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				E. DIAGNOSIS POINTER		F. \$ CHARGES		G. DAYS OR UNITS		H. EPST Family Plan		I. ID. QUAL		J. RENDERING PROVIDER ID. #	
MM	DD	YY	MM	DD	YY					CPT/HCPCS		MODIFIER													
7	1	24	7	1	24					T1033		HD				1,505.00					NPI				

Partial services: Delivery only

24. A. DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				E. DIAGNOSIS POINTER	F. \$ CHARGES	G. DAYS OR UNITS	H. EPST/ Family Plan	I. ID. QUAL	J. RENDERING PROVIDER ID. #
MM	DD	YY	MM	DD	YY			CPT/HCPCS	MODIFIER								
7	1	24	7	1	24			T1033	22				645.00			NPI	

Partial services: Support visits only

24. A. DATE(S) OF SERVICE						B.	C.	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				E.	F.	G.	H.	I.	J.
From		To		PLACE OF		EMG	CPT/HCPCS		MODIFIER		DIAGNOSIS	\$ CHARGES	DAYS OR	EPST/	ID.	RENDERING	
MM	DD	YY	MM	DD	YY	SERVICE					POINTER		UNITS	Per	QUAL	PROVIDER ID. #	
7	1	24	7	1	24					T1033			215.00		NPI		

Clinical Documentation Requirements:

1. Documentation of the date of service, start and end time for the service, summary of the session's content, and the Doula's signature and printed name.

On a standard CMS-1500 billing form, a DMAP-enrolled Doula will list themselves as the rendering provider in boxes 24j and 31 and will list their DMAP-enrolled LLC or employer's name in box 33. If the Doula is a sole proprietor, their name will be listed in box 33.

Monitoring

EOCCO will monitor the cost, utilization and return on investment of Doula services and provide updates to the EOCCO board and stakeholders semi-annually. Doulas will report their demographics and provide quarterly, and annual reports of services rendered to the EOCCO Traditional Health Worker Liaison.