Doula Benefit
Quick Reference Guide

This guide provides a simplified overview of Doula benefit services, eligibility, supervision, billing, and resources for providers.

Overview	
Doula Benefit Services Provided	- Helping prevent complications during pregnancy and birth, and improving health for both parents and babies - Providing personal support to women and families throughout a woman's pregnancy, childbirth, and postpartum experience including emotional and physical support, provided during pregnancy, labor, birth, and the postpartum period
Role, Qualifications & Requirements To serve as a Doula provider, individuals must meet specific qualifications through either a Training Pathway or an Experience Pathway, along with meeting general eligibility and ongoing education requirements.	**Role of a Doula Provider:** - Birth workers who offer health education, advocacy, and holistic support (emotional, physical, and non-medical) for individuals during pregnancy, childbirth, and the postpartum period. This includes compassionate care during experiences such as miscarriage, stillbirth, and abortion. - They are non-clinical professionals who are not licensed healthcare providers and do not require medical supervision. **General Eligibility Requirements** - Must be at least 18 years of age - Hold a valid Adult/Infant CPR certification - Have completed basic HIPAA training **Pathways to Qualification** **1. Training Pathway** To qualify under the training pathway, individuals must: - Complete a minimum of 16 hours of training covering the following areas: - Lactation support - Childbirth education - Anatomy and physiology of pregnancy and childbirth - Non-medical comfort measures, prenatal and labor support techniques - Development of a community resource list - Provide support at a minimum of three births

	2. Experience Pathway
	
	To qualify under the experience pathway, individuals must:
	• Have at least five years of active Doula experience (paid or volunteer) within the past seven years
	• Submit an attestation of skills in prenatal, labor, and postpartum care, supported by three written testimonial or recommendation letters from any of the following:
	    ○ Physician
	    ○ Licensed behavioral health provider
	    ○ Nurse Practitioner
	    ○ Nurse Midwife
	    ○ Licensed Midwife
	    ○ Enrolled Doula
	    ○ Community-based organization
	Note:
	• At least one letter must be from a licensed provider, a community-based organization, or an enrolled doula
	• All letters must be dated within the last seven years
	
	Additional Requirements
	• Complete a minimum of three (3) hours of continuing education in maternal, prenatal, and/or infant care every three years
	• Maintain documentation of completed training, which must be made available to DHCS upon request
	
	Supplemental (Recommended) Training
	While not mandatory, the following training topics are highly recommended to enhance the quality of care and cultural responsiveness:
	• Perinatal support and firsthand client care experience
	• Trauma-informed care
	• Cultural sensitivity, implicit bias, anti-racism, or social determinants of health (trainings available through **CenCal Health**)
	• Perinatal mood and anxiety disorders
	• Intimate partner violence
	• Postpartum care and support
	• Infant and newborn care
	• Perinatal loss and bereavement support
	Note: CenCal Health is currently working with **DHCS** to identify approved training courses that meet these requirements and will share updates with Doula provider partners as they become available.

Covered Doula Services	Covered services may include:

Doula services include a range of supports designed to improve health outcomes and honor the diverse needs of each individual.	• **Person-centered, culturally competent care** that respects and reflects the racial, ethnic, linguistic, and cultural backgrounds of Members, while following evidence-based best practices
	
	• **Medical care** provided by a licensed obstetrician or midwife
	
	• **Comprehensive support services** before, during, and after childbirth or pregnancy loss, including:
	    ○ Health education
	    ○ Advocacy
	    ○ Physical and emotional support
	    ○ Non-medical care throughout pregnancy, labor, birth, postpartum recovery, or end-of-pregnancy experiences (e.g., miscarriage, stillbirth, or abortion)
	
	Covered Services Under the Initial TAR Include:
	• One 90-minute initial visit
	• Up to eight (8) additional 1-hour visits, which can be used for prenatal and/or postpartum care
	• In-person support during:
	    ○ Labor and delivery
	    ○ Miscarriage
	    ○ Abortion
	• Up to two (2) extended postpartum visits (3 hours each) following the end of pregnancy
	    ○ No additional criteria or separate recommendation is required for these extended visits
	
	Guidelines for Additional Visits:
	• If medically necessary, providers may submit an additional TAR during the postpartum period
	• Additional requests may include up to nine (9) extra 1-hour postpartum visits
	• These requests will be reviewed and authorized by CenCal Health based on medical necessity
	
	Important Notes:
	• Visits are limited to one per day, per member
	• One prenatal or postpartum visit may occur on the same day as labor and delivery, miscarriage, or abortion support
	• The recommending provider does not need to be a Medi-Cal enrolled or network provider
	
	Services may be recommended by physicians or any licensed healing arts practitioners

Services Not Provided or Covered While doulas provide valuable non-clinical support, certain services are not covered under Medi-Cal Doula benefits and therefore cannot be billed to CenCal Health.	**Non-Covered Services:** The following services, while sometimes part of traditional or cultural practices, are **not eligible for reimbursement** under Medi-Cal Doula coverage: • Belly binding (traditional or ceremonial) • Birthing ceremonies (e.g., "sealing" or "closing the bones") • Group classes on topics such as babywearing • Maternal or infant massage • Still photography or video recording • Placenta encapsulation or processing • Shopping or personal errands • Vaginal steaming • Yoga sessions **Clinical Services Not Permitted:** Doulas may **not** perform any of the following, as they fall outside the non-clinical scope of practice: • Diagnosing medical conditions • Providing medical advice • Conducting clinical assessments, exams, or medical procedures ◇ **Note:** Doulas are permitted to offer free educational classes or support groups (e.g., babywearing or prenatal wellness) to Medi-Cal members as long as these services are not billed to CenCal Health.

Documentation Requirements	To ensure accountability and continuity of care, all Doula providers must maintain clear and accurate documentation for services delivered to CenCal Health members. Documentation must meet the following standards:
	• Record the date, time, and duration of each service provided
	• Clearly describe the nature of the care and support delivered during the visit
	    o This should include specific activities or topics discussed (e.g., childbirth education, lactation support, postpartum care)
	• Support the length of time spent with the member on that date
	    o *Example:* "Provided childbirth education and collaborated with member to develop a birth plan – 1 hour"
	• Documentation must be complete, legible, and made accessible to the California Department of Health Care Services (DHCS) upon request

Member Eligibility for Doula Services	CenCal Health members may receive Doula services if they meet the following eligibility criteria:
	
	• The individual is a **CenCal Health member** who is:
	   o Currently pregnant, or
	   o Was pregnant within the past 12 months
	• The member has obtained a recommendation for Doula services from a licensed healthcare practitioner.
	• Doula services may be provided during any of the following phases:
	   o Pregnancy
	   o Labor and delivery
	   o Postpartum period (up to 12 months after the end of pregnancy)
	   o Pregnancy loss, including miscarriage or abortion
	• The member remains eligible to receive Doula services at each approved visit, as outlined in the Treatment Authorization Request (TAR).

Steps and Requirements for Recommending Doula Services Doula Service Recommendation Form https://form.cencalhealth.org/DOULA/DOULA	**Any licensed healthcare practitioner** may recommend Doula services using the **Doula Recommendation Form.** **Services automatically approved by CenCal Health include:** • One initial 90-minute visit • Up to eight (8) additional 1-hour visits, used for prenatal and/or postpartum care • In-person support during labor and delivery, miscarriage, or abortion • Up to two (2) extended 3-hour postpartum visits after the end of pregnancy In addition, authorization allows for up to two doulas to be approved simultaneously, enabling one to serve as a backup for the other, if needed.

When Is an Additional Treatment Authorization Request (TAR) Required?	During the **postpartum period**, an **additional TAR** is required if **more visits are medically necessary** beyond the initially authorized services. • The contracted Doula provider must obtain this additional recommendation from a licensed healthcare practitioner. • The request may include up to nine (9) additional 1-hour postpartum visits. • CenCal Health will review and authorize these requests on a case-by-case basis, based on medical necessity.

Doula Service Billing Codes and Claims Guidelines	**Prenatal and Postpartum Visits**
	• Z1032-XP – Extended initial visit 90 minutes
	• Z1034-XP – Prenatal visit
	• Z1038-XP – Postpartum visit
	• T1032-XP – Extended postpartum Doula support, per 15 minutes
	
	Labor and Delivery Support
	• CPT® 59409-XP – Doula support during vaginal delivery only
	• CPT 59612-XP – Doula support during vaginal delivery after previous caesarean section
	• CPT 59620-XP – Doula support during caesarean section
	
	Abortion or Miscarriage Support
	• HCPCS T1033-XP – Doula support during or after miscarriage
	• CPT 59840-XP – Doula support during or after abortion
	
	Important Billing Guidelines
	• **Social Determinants of Health (SDOH)** Requirement
	All Doula service claims must include at least one SDOH diagnosis code, as required by the Provider Portal.
	
	• **Use of Procedure Codes**
	   o The initial visit must last 90 minutes to be billed under Z1032-XP
	   o All visits are limited to one per day per member
	   o Only one Doula may bill per member per day, except in the case of labor and delivery, where one Doula may provide birth support and another may provide a same-day prenatal or postpartum visit
	
	• **Same-Day Billing Exceptions**
	   o A prenatal or postpartum visit may be billed on the same day as labor and delivery, miscarriage, or abortion support
	   o These visits may be billed by a different Doula than the one providing birth or loss-related support

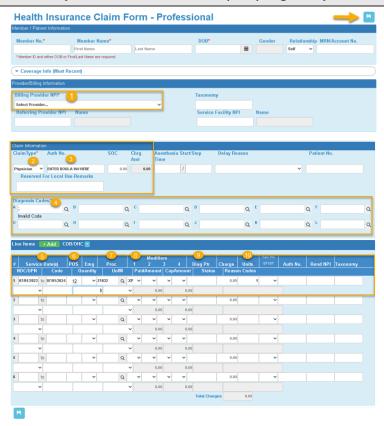|	

	- **Extended Postpartum Visit Billing**
	    ○ For extended visits lasting at least 3 hours, use T1032-XP, billed in 15-minute increments
	    ○ Up to 12 units per visit (3 hours), and up to 2 visits per pregnancy (maximum of 24 units)
	    ○ These visits must occur on separate days
	- **Labor and Delivery Billing Limits**
	    ○ Only one labor and delivery support code may be billed per pregnancy
	    ○ Billing is allowed regardless of live birth outcome
	- **Miscarriage & Abortion Support Billing**
	    ○ T1033-XP (miscarriage) and 59840-XP (abortion) may each be billed once per pregnancy

Claims & Billing
CMS-1500 Professional Form
	
	1) Billing Provider NPI: Doula Provider
	2) Claim Type: Physician
	3) Auth No.: CenCal Health Approved W#
	4) Dx1 Code:
	    Z33.1 - Pregnant state, incidental
	    Z33.2 - Encounter for elective termination of pregnancy
	    Z39.2 - Encounter for routine postpartum follow-up
	    O02.1 - Missed abortion
	    O03.4 - Incomplete spontaneous abortion without complication

5) Dx2 Code(s) required:

In addition to Dx1 code, a secondary diagnosis code (Dx2) is required on each claim line. See CPT/HCPCS chart in this Guide to match billed procedure code with ICD-10-CM diagnosis code, for each rendered service. (this means two (2) diagnosis codes are required on each billed claim line)

6) Dates of Service: Add date of Rendered Service(s)

7) Place of Service (POS):

12 – Member home
11 – Office
25 – Birthing Center

8) HCPCS billing code (ProcCode): Add procedure code that represents rendered service(s)

Z1032-XP – Extended initial visit 90 minutes

Z1034-XP – Prenatal visit

Z1038-XP – Postpartum visit

T1032-XP – Extended postpartum Doula support, per 15 minutes

Table of CPT/HCPCS Codes and Required ICD-10-CM Codes

CPT/HCPCS Code(s)	Required ICD-10-CM Code(s)
Z1032	Z32.2, Z32.3, Z39.1, Z39.2
Z1034	Z32.2, Z32.3
59409, 59612, 59620	Z33.1, Z39.0
59840, T1033	Z33.1
T1032, Z1038	Z39.0, Z39.1, Z39.2››

9) Modifier(s):

XP = ALL Doula billed procedure codes MUST be billed with modifier "XP". If the service is telemedicine, ADD telemedicine modifier as secondary (modifier drop down #2) to required "XP"

93 = Synchronous Telemedicine Services Rendered via Telephone or other real-time interactive audio-only

95 = Synchronous telemedicine service rendered via a real-time interactive audio and video telecommunications

10) Diag Ptr: This is the Diagnosis Indicator submitted in Box #4

11) Units:

Bill for 1 Unit for all procedure codes, except for T1032.

T1032 can be billed up to 12 units per visit (on one billed claim line), up to two visits (24 units) per pregnancy per beneficiary provided on separate days

Provider Resources	**DHCS Provider Resources** https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/doula.pdf **CenCal Health Provider Website Resources** Doula Recommendation Service Form https://form.cencalhealth.org/DOULA/DOULA Onboarding Packet /www.cencalhealth.org/providers/join-our-network/credentialing-applications-and-forms/ Social Determinant of Health (SDOH) cencalhealth.org/providers/social-determinants-of-health/ Doula Provider Training Resources https://wwwqa.cencalhealth.org/providers/provider-training-resources/provider-training-library/ CenCal Health Provider Manual https://www.cencalhealth.org/providers/forms-manuals-policies/provider-manual/