



Responses to Public Comments: Proposed Medicaid State Plan Amendment (SPA) for Doula Services and Payment Methodology

Public Comment Period: June 29, 2021 – July 29, 2021

Category	Nature of the Comments	EOHHS' Response
Reimbursement Rates <u>18 related</u> comments	<ol style="list-style-type: none"> 1. The maximum reimbursement rate of \$850 dollars per pregnancy is too low and should be increased. doulas are integral to improving outcomes for birthing parents, especially those of color. The rate should reflect the positive impact doulas will have on reducing racial health disparities and improving maternal health. 2. The \$850 maximum amount was set years ago and is an outdated number to use for the cost to serve underserved communities. The current lowest Doula rate for underserved communities is \$975 per pregnancy. 3. The “going rate” for doula services is \$1500-\$2000 per pregnancy. The Medicaid rate should align. The proposed reimbursement rate devalues and disregards the impact a doula has on the life of a pregnant person and their child. 4. The \$850 rate does not support a livable wage. This will narrow the pool of available Doulas to those with alternative income supports and will reduce the diversity of the workforce and perpetuate current high rates of doula burnout. 5. The current rate will cause those serving the disenfranchised to become disenfranchised themselves 6. The Reimbursement rate does not consider the following costs/factors: <ul style="list-style-type: none"> • Medicaid enrollment fee • Training and certification fees • Liability insurance • Business and marketing expenses, • Transportation to and from home visits and births. • 24/7 availability to beneficiaries • Cost of education and training materials/items • Additional emotional support including attending family events • The value or coordination between patient and medical providers 	<p>EOHHS agrees with public comments that the proposed rate of a \$850 maximum per pregnancy would be an inadequate rate to establish doula services as a benefit for Medicaid beneficiaries.</p> <p>EOHHS has extensively re-evaluated the proposed rate since the end of the public comment period using Bureau of Labor Statistic (BLS) data specific to Rhode Island, comparisons to other states, comparison to other community and social Medicaid provider rate methodologies and examples of doula services and costs provided by public comment.</p> <p>EOHHS has also considered the special nature, value, and monthly client limitations of doula services. EOHHS remains committed and will continue to be sensitive to potential barriers that could prevent and/or limit doulas from serving Medicaid beneficiaries especially in low-income communities and communities of color.</p> <p>EOHHS did account and calculate into the rate provider travel and administrative costs into the rate. A revised, higher rate would be intended to account for the costs of provider activities outside of direct client care.</p> <p>Therefore, EOHHS is revising the maximum reimbursement rate of \$850 per pregnancy proposed by the public notice posted on June 29, 2021 and that were previously set at the following rates:</p> <p>Prenatal visit: \$51.52 per visit with a maximum three (3) per pregnancy Labor and Delivery: \$502.27 with a maximum one (1) per pregnancy Postpartum visit: \$64.39 per visit with a maximum three (3) per pregnancy.</p> <p>The revised EOHHS rate in response to public comment will be a maximum rate of \$1500.00 per pregnancy and set at the following newly revised rates:</p> <p>Prenatal visit: \$100.00 per visit with a maximum three (3) per pregnancy Labor and Delivery: \$900.00 per visit with a maximum one (1) per pregnancy Postpartum visit: \$100.00 per visit with a maximum three (3) per pregnancy.</p> <p>EOHHS agrees that doula services will improve maternal health outcomes and reduce racial and socioeconomic health disparities. A sustainable and sufficient rate is critical to ensure that Medicaid beneficiaries have access to doula services.</p>

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<p>Provider Qualifications and Attributes</p> <p><u>3 related</u> comments</p>	<p>7. The provider requirements in the SPA should be simplified down to only those required by the Rhode Island Certification Board.</p> <p>8. Medicaid beneficiaries would be best served by doulas who have shared lived experience and understanding of navigating the same structures and systems that the clients themselves are facing.</p>	<p>EOHHS agrees with the public comment that the provider requirements listed in the SPA can be aligned with the doula requirements of the Rhode Island Certification Board.</p> <p>EOHHS agrees that shared life experiences and peer-to-peer support are invaluable attributes that a doula can provide to a client. EOHHS agrees doulas will play a critical role in reducing maternal mortality, morbidity, and health disparities by bridging the cultural, socioeconomic, and racial gaps that can exist between medical providers and Medicaid beneficiaries.</p>
<p>Provider Billing</p> <p><u>2 related</u> comments</p>	<p>9. Doula providers and non-profits that have not been Medicaid providers should receive training on Medicaid provider enrollment and billing.</p> <p>10. EOHHS should clarify the reimbursement expectations and policy for doulas who provide services to Medicaid beneficiaries after July 1, 2021 but before CMS approval of the SPA.</p>	<p>EOHHS will offer provider enrollment and billing training/technical assistance for doulas. These trainings will be in the form of webinars. EOHHS will also provide written materials and helpful resources on the EOHHS website to assist doulas with Medicaid enrollment and billing as a fee-for-service provider.</p> <p>EOHHS is happy to clarify. A doula that meets the Medicaid doula provider qualification standards as of July 1, 2021 will be eligible for retroactive reimbursement once the State Plan Amendment (SPA) for doula services is approved by CMS. In addition, customary timely filing rules that apply to all Medicaid providers will be available for doulas to seek reimbursement one (1) year from date of service.</p>
<p>Doula Services</p> <p><u>16 related</u> comments</p>	<p>11. Doula services go beyond what is listed in the SPA and include but are not limited to:</p> <ul style="list-style-type: none"> • 24-hour text support • Medical provider/patient coordination • Mental health support (i.e. Anxiety) • Nutritional support • Reducing racial and health disparities <p>12. Doula services will result in the positive health outcomes, specifically: improved birth outcomes, improved breastfeeding rates, reduced unnecessary c-sections and other maternal birthing complications, morbidity, mortality. Doula services also allow families a greater degree of flexibility control and comfort, reducing stress at a crucial time.</p>	<p>EOHHS has extensively reevaluated the proposed rate since the end of the public comment period using Bureau of Labor Statistic (BLS) data specific to Rhode Island, comparisons to other states, and examples of doula services and costs provided by public comment. EOHHS is taking into the account the special nature of doula services and will continue to be sensitive to the costs identified by doula service providers that could prevent and/or limit doulas from serving Medicaid beneficiaries at the Medicaid rate paid.</p> <p>EOHHS agrees there is strong evidence that doula services result in positive health outcomes due to the emotional, cultural and non-medical support provided by doulas during each phase of pregnancy. Specifically, EOHHS believes doula services will result in fewer Cesarean (C-section) deliveries and reductions in maternal mortality and morbidity.</p>
<p>General</p> <p><u>1 related</u> comment</p>	<p>13. The SPA language is more restrictive than the legislation passed the General Assembly.</p>	<p>EOHHS typically must implement broad statutory directives in legislation by issuing more detailed rules, regulations and requirements to implement statutory changes approved by the General Assembly. EOHHS does agree with the public comment that the provider requirements listed in the doula services SPA are more restrictive than the legislation and can be aligned with the doula requirements of the Rhode Island Certification Board.</p>