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Bill Analysis

Version: As Introduced

Primary Sponsors: Sens. Maharath and Kunze

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SUMMARY

- Requires the Medicaid program to cover doula services provided by a doula with a valid provider agreement who (1) is certified by a doula certification organization and (2) meets other training and experience requirements.
- Establishes in the Department of Medicaid the Ohio Doula Advisory Board, which is required to (1) provide advice and recommendations regarding the Medicaid program's coverage of doula services and (2) establish a state doula registry.

DETAILED ANALYSIS

Medicaid coverage of doula services

The bill requires the Medicaid program to cover doula services that are provided by a doula with a valid provider agreement who meets the requirements discussed below.¹ The bill defines doula services as physical, emotional, or educational support provided during prenatal, childbirth, and postpartum periods, other than support that is considered to be medical, midwifery, or clinical in nature. Doula services include all of the following:

1. Prenatal and postpartum visits;
2. Birth support and time spent on-call in reasonable anticipation of a birth;
3. Communications between a doula and a pregnant woman or her support person;
4. Connecting a pregnant woman or woman capable of becoming pregnant with nonprofit organizations that provide assistance in locating health and social services;

¹ R.C. 5164.071(B).

5. Time spent on related administrative tasks such as documentation.²

Eligibility requirements

To be eligible for Medicaid payments, a doula must submit all of the following to the satisfaction of the Medicaid Director:³

1. Proof that the doula has a current, valid certificate issued by a doula certification organization. The bill defines doula certification organization as a locally, state, nationally, or internationally recognized entity for training and certifying doulas whose educational curriculum meets the requirements set forth in the bill. Some examples include Birthing Beautiful Communities, Restoring Our Own Through Transformation, and DONA International, as well as black-led, community-based public health organizations approved by the Ohio Doula Advisory Board (see below).⁴
2. An attestation that the doula has completed at least 60 hours of in-person classroom instruction and training that includes any combination of childbirth education, birth doula training, antepartum doula training, and postpartum doula training.
3. Proof of attendance at one breastfeeding class, two childbirth classes, and two births.
4. At least one positive reference from a birth mother and at least one positive reference from a licensed health professional practicing in public health or a community-based public health organization.
5. Proof of completion of instruction in cultural competency, CPR, and health information confidentiality, including privacy standards established under the federal Health Insurance Portability and Accountability Act of 1996.

Medicaid payments

The bill specifies that Medicaid payments for doula services are to be determined on the basis of each pregnancy. The total of all Medicaid payments for doula services for each pregnancy cannot exceed \$2,500, regardless of whether the pregnancy involves multiple births.⁵

Ohio Doula Advisory Board

The bill establishes in the Department of Medicaid the Ohio Doula Advisory Board.⁶

² R.C. 5164.071(A)(3).

³ R.C. 5164.071(C).

⁴ R.C. 5164.071(A)(2).

⁵ R.C. 5164.071(B).

⁶ R.C. 5164.072(A).

Membership

The Advisory Board is to consist of 13 to 15 members appointed by the Medicaid Director, including at least one representative from Birthing Beautiful Communities and one representative from Restoring Our Own Through Transformation. The overall membership of the Advisory Board is to be 20% community representation from communities most impacted by negative maternal and infant health, 40% doula representation, and 40% representation from public health officials, physicians, nurses, and social workers.⁷

In appointing members, the Director must make a good faith effort to select members who represent counties with higher rates of infant and maternal mortality. Priority must be given to individuals with direct service experience providing care to infants and pregnant and postpartum women.⁸

Terms and compensation

Members of the Advisory Board are appointed to two-year terms. Members do not receive compensation for, and are not paid any expenses incurred pursuant to, fulfilling duties.⁹

Meetings

The Advisory Board must meet at the call of the Board's chairperson, as often as the chair determines necessary for timely completion of the Board's duties. The Department is required to provide meeting space, staff, and other technical assistance.¹⁰

Duties

The Advisory Board is required to do all of the following:

1. Provide general advice, guidance, and recommendations to the Department regarding its coverage of doula services.
2. Verify and approve black-led, community-based public health organizations for purposes of doula certification. Such an organization must be comprised of individuals, at least 75% of whom identify as Black or African American, and must demonstrate a commitment to diversity and improving infant and maternal health outcomes for minority populations.
3. Establish a state doula registry that includes any doula who requests to be on the registry, if the Advisory Board is satisfied that the doula (1) meets all of the requirements set forth in the bill to be eligible for Medicaid payments, (2) is at least 18, (3) is covered by malpractice insurance, and (4) complies with any other eligibility requirements established by the Advisory Board.

⁷ R.C. 5164.072(B)(1).

⁸ R.C. 5164.072(B)(2).

⁹ R.C. 5164.072(D) and (E).

¹⁰ R.C. 5164.072(F) and (G).

4. Make recommendations to the Medicaid Director regarding rules to be adopted pertaining to the Medicaid program's coverage of doula services.¹¹

Rules

The Medicaid Director is required to adopt rules to implement the requirements of the bill. The rules must be consistent with the recommendations of the Ohio Doula Advisory Board.¹²

HISTORY

Action	Date
Introduced	06-23-20

S0328-I-133/ar

¹¹ R.C. 5164.072(H).

¹² R.C. 5164.071(E).