

1 S.109

2 Introduced by Senators Gulick, Campion, Hardy, Harrison, Hashim, Lyons,
3 McCormack, Perchlik, Ram Hinsdale, Vyhovsky, Watson,
4 Weeks and White

5 Referred to Committee on

6 Date:

7 Subject: Health; Medicaid; pregnancy; birth; doulas

8 Statement of purpose of bill as introduced: This bill proposes to require
9 Medicaid coverage for doula services during labor and birth and for the
10 prenatal and postpartum periods.

11 An act relating to Medicaid coverage for doula services

12 It is hereby enacted by the General Assembly of the State of Vermont:

13 Sec. 1. 33 V.S.A. § 19011 is added to read:

14 § 19011. MEDICAID COVERAGE FOR DOULA SERVICES

15 (a) The Department of Vermont Health Access shall provide
16 reimbursement to a qualified doula for providing childbirth education and
17 support services, including physical and emotional support, to individuals
18 covered by Medicaid during pregnancy, labor and delivery, and the postpartum
19 period. The Department shall maintain a registry of qualified doulas who have
20 met all of the requirements set forth in subsection (b) of this section and are

1 entitled to reimbursement pursuant to this section. Doulas shall not receive
2 reimbursement for travel time or mileage expenses.

3 (b) In order to appear in the registry of qualified doulas and receive
4 reimbursement pursuant to this section, a doula shall meet all of the following
5 requirements:

6 (1) receive and maintain certification by an approved national
7 certification agency identified by the Department of Vermont Health Access
8 by rule;

9 (2) obtain additional training at the doula's own expense focused on
10 doula care for special populations, on becoming a Medicaid participating
11 provider, and on such additional topics as the Department may require;

12 (3) submit to a background check and fingerprinting; and

13 (4) maintain personal liability insurance.

14 Sec. 2. DEPARTMENT OF VERMONT HEALTH ACCESS;

15 RULEMAKING

16 (a) The Commissioner of Vermont Health Access shall adopt rules
17 pursuant to 3 V.S.A. chapter 25 to implement the provisions of this act. The
18 rules shall specify, at a minimum:

19 (1) a list of the organizations from which a doula may receive
20 certification in order to qualify as an approved doula for purposes of 33 V.S.A.
21 § 19011(b)(1), including:

1 (A) Birth Works;

2 (B) Childbirth International;

3 (C) Childbirth and Postpartum Professional Association (CAPPA);

4 (D) Commonsense Childbirth Inc.;

5 (E) Doulas of North America (DONA);

6 (F) International Center for Traditional Childbearing (ICTC);

7 (G) International Childbirth Education Association;

8 (H) Stillbirthday University;

9 (I) BEST Doula Training; and

10 (J) ToLabor; and

11 (2) the coverage available for doula services per pregnancy, regardless
12 of the number of infants involved, which shall be billed on a fee-for-service
13 basis, shall not exceed \$850.00, and shall be allocated as follows:

14 (A) \$25.00 per hour for prenatal visits, not to exceed four hours;

15 (B) a flat fee of \$650.00 for physical and emotional support for the
16 entire course of the mother's labor and delivery, which shall include unlimited
17 telephone and e-mail contact and the doula's commitment to be available on an
18 on-call basis;

19 (C) \$25.00 per hour for postpartum visits, which may include
20 postpartum hospital visits, not to exceed two hours; and

21 (D) up to \$50.00 for administrative expenses.

1 (b) The Commissioner may propose increases to the amounts described in
2 subdivision (a)(2) of this section over time, as appropriate.

3 Sec. 3. STATE PLAN AMENDMENT

4 The Department of Vermont Health Access shall seek a state plan
5 amendment from the Centers for Medicare and Medicaid Services if needed to
6 allow Vermont's Medicaid program to provide coverage for doula services in
7 accordance with this act.

8 Sec. 4. EFFECTIVE DATE

9 This act shall take effect on July 1, 2023 or upon approval of a state plan
10 amendment, whichever is later; provided, however, that the Commissioner of
11 Vermont Health Access may commence the rulemaking process prior to July 1,
12 2023 to ensure the rules will be in effect by the effective date of this act.