

| 2021 STATE BILLS RELATED TO DOULA SERVICES |                                 |  |                           |   |   |                   |                  |
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| STATE                                      | BILL NUMBER                     | TITLE OF BILL                                  | AUTHOR or PRIMARY SPONSOR | DESCRIPTION   | STATUS  | LAST DATE UPDATED | NOTES            |
| Arizona                                    | <a href="#">SB 1181/ Ch 282</a> | Doulas; voluntary certification                | Senator Kelly Townsend    | <p>Outlines application for certificate, certification, fingerprinting, renewal, continuing education, applicant requirements, education and training; alternate certification, denial, suspension or revocation of certificate; hearings; tribal jurisdiction, investigation, evidence, fees, public contracts, preferences prohibited, doula community advisory committee.</p> <p>Director shall Outline the scope of practice and the core competencies of state-certified doulas regarding the skills and areas of knowledge that are essential to expand health and wellness, to reduce health disparities and to promote culturally relevant practices within diverse communities; Describe and define reasonable and necessary minimum qualifications; Adopt standards and requirements to establish state-certified doula education and training programs in this state; Adopt standards to approve or accept continuing education courses for renewing state-certified doula certificates; Establish criteria for granting, denying, suspending and revoking state-certified doula certificates in order to protect the public health and safety; The director may consult with subject matter experts from an integrated public health program at a higher education institution located in this state regarding the development of rules prescribed by this section.</p> | House HHS Committee action: Withdrawn, voting: (0-0-0-0-0-0)                        | 3/18/2021         |                  |
| California                                 | <a href="#">SB 65</a>           | Maternal Care and Services                     | Senator Nancy Skinner     | As relates to doulas: this bill would require the department to establish a full-spectrum doula care program for pregnant and postpartum Medi-Cal beneficiaries, and would provide that any Medi-Cal beneficiary who is pregnant as of July 1, 2023, is entitled to doula care. The bill would require the department to develop multiple payment and billing options for doula care and to convene a doula advisory board that would be responsible for deciding on a list of core competencies required for doulas who are authorized by the department to be reimbursed under the Medi-Cal program.  | Signed by Governor. Chaptered by Secretary of State. Chapter 449, Statutes of 2021. | 10/4/2021         |                  |
| Connecticut                                | <a href="#">HB 6010</a>         | An Act Concerning The Certification Of Doulas. | Rep John Hampton          | To establish an advisory council to make recommendations regarding the certification of doulas.   | Referred to Joint Committee on Public Health<br>Died in Committee                   | 1/28/2021         |                  |
| Florida                                    | <a href="#">SB 1556</a>         | Maternal Health Care Services                  | Senator Audrey Gibson     | As relates to doulas: Offer programs and resources in the communities in which they are located which include any of the following activities: Providing support from doulas and other perinatal health workers to women from pregnancy through the postpartum period. Providing culturally congruent training to perinatal health workers such as doulas, community health workers, peer supporters, certified lactation consultants, nutritionists and dietitians, social workers, home visitors, and navigators. Offer training to all maternity care providers on the value of racially, ethnically, and professionally diverse maternity care teams to provide culturally congruent care as defined in s. 383.52(1), including doulas, community health workers, peer supporters, certified lactation consultants, nutritionists and dietitians, social workers, home visitors, and navigators.  | Dead/Failed   | 04/30/2021        | See also HB 1383 |

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| Georgia                                    | <a href="#">HB 727</a>  | Medicaid; coverage for doula services provided to an expectant mother | Rep. Park Cannon          | <p>A bill to be entitled an Act to amend Article 7 of Chapter 4 of Title 49 of the Official Code of Georgia Annotated, relating to medical assistance generally, so as to provide for Medicaid coverage for doula services provided to an expectant mother; to provide for a definition; to provide that doulas are considered providers of medical assistance; to require the Department of Community Health to submit a state plan amendment for coverage of antepartum, intrapartum, and postpartum services; to provide for minimum reimbursement rates; to provide for related matters; to repeal conflicting laws; and for other purposes.</p> <p>(a) As used in this Code section, the term 'doula' means a trained professional who provides nonmedical health-supporting interventions including continuous physical, emotional, and informational support to a mother before, during, and shortly after childbirth.</p> <p>(b) A recipient of medical assistance who is an expectant mother shall be authorized to receive services by a doula before, during, and for the duration of Medicaid coverage for postpartum care.</p> <p>(c) For purposes of this article, a doula shall be considered a provider of medical assistance.</p> <p>(d) The department shall submit a Medicaid state plan amendment to the United States Department of Health and Human Services to provide for the payment of medical assistance for antepartum, intrapartum, and postpartum services provided to an expectant mother by a doula, including services for labor and delivery support. Such state plan amendment shall include minimum reimbursement rates of \$500.00 for intrapartum services only, \$800.00 for antepartum and intrapartum services, and \$1,000.00 for antepartum, intrapartum, and postpartum services and a provision for an annual reassessment of such minimum reimbursement rates in light of cost-of-living increases."</p> | House Second Readers   | 03/09/2021        |                 |
| Illinois                                   | <a href="#">HB 0159</a> | Health Care & Human Services  | Rep. Camille Lilly        | Creates the Community Health Worker Certification and Reimbursement Act. Amends various Acts regarding medical staff credentials, including doula services.  | House Committee Amendment No. 2 Rules Refers to Executive Committee          | 10/20/2021        | See also HB 158 |
| Illinois                                   | <a href="#">HB 354</a>  | Medicaid - Doula Services   | Rep. LaToya Greenwood     | Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires perinatal doula services and evidence-based home visiting services to be covered under the medical assistance program for persons who are otherwise eligible for medical assistance. Provides that perinatal doula services include regular visits beginning in the prenatal period and continuing into the postnatal period, inclusive of continuous support during labor and delivery, that support healthy pregnancies and positive birth outcomes. Provides that perinatal doula services may be embedded in an existing program, such as evidence-based home visiting. Provides that perinatal doula services provided during the prenatal period may be provided weekly, services provided during the labor and delivery period may be provided for the entire duration of labor and the time immediately following birth, and services provided during the postpartum period may be provided up to 12 months postpartum. Requires the Department of Healthcare and Family Services to adopt rules. Requires the Department, during the rulemaking process, to consider the expertise of and consult with doula program experts, doula training providers, practicing doulas, and home visiting experts, along with State agencies implementing perinatal doula services and relevant bodies under the Illinois Early Learning Council. Requires the Department to seek any State plan amendments or waivers necessary to implement the amendatory Act and to secure federal financial participation for expenditures made by the Department for perinatal doula services and evidence-based home visiting services. Effective July 1, 2022.   | Rule 19(a) / Re-referred to Rules Committee                                  | 3/27/2021         |                 |
| Illinois                                   | <a href="#">HB 3539</a> | Medicaid-EI & Doula Services  | Rep. Maura Hirschauer     | Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that early intervention services and doula services shall be covered under the medical assistance program, subject to federal approval. Provides that no later than December 31, 2021, the Department of Healthcare and Family Services shall develop a payment methodology for early intervention services and a payment methodology for doula services and shall submit to the federal Centers for Medicare and Medicaid Services a Title XIX State Plan amendment to implement the amendatory Act. Effective immediately.   | Rule 19(a) / Re-referred to Rules Committee                                  | 3/27/2021         |                 |
| Indiana                                    | <a href="#">SB 298</a>  | Doula Services  | Senator Jean Breaux       | Doula services. Requires a state employee health plan, a policy of accident and sickness insurance, and a health maintenance organization contract to provide coverage for services provided by a doula to a covered individual before, during, and after childbirth. Requires Medicaid reimbursement for doula  | First reading: referred to Committee on Insurance and Financial Institutions | 1/11/2021         |                 |

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| Kentucky                                   | <a href="#">HB 266</a>  | An act relating to maternal health                      | Rep. Attica Scott                      | Create a new section of KRS 211 to require Medicaid reimbursement for qualified doula services; require a report on the effect of these provisions to be submitted annually to the Legislative Research Commission by the Cabinet for Health and Family Services and by any entity under contract with the cabinet to administer the Medicaid program.  | Introduced in House to Committee on Committees (H)                         | 1/13/2021         |       |
| Kentucky                                   | <a href="#">HB 286</a>  | An Act relating to Medicaid coverage for doula services | Rep. Attica Scott                      | Create a new section of KRS Chapter 205 to require the Department for Medicaid Services and any managed care organization with whom the   | Referred to to Committee on Committees (H)                                 | 02/02/2021        |       |
| Maryland                                   | <a href="#">SB 163</a>  | Maryland Medical Assistance Program - Doulas            | Senator Arthur Ellis                   | Establishing the Maryland Medical Assistance Program Doula Pilot Program to be administered by the Maryland Department of Health and to provide doula services to program recipients in Baltimore City, Charles County, and Prince George's County who are pregnant or postpartum; requiring the Department to evaluate the effectiveness of the Pilot Program and to report by June 1, 2023, 2024, and 2025, to the Governor and General Assembly on the implementation of the Pilot Program and whether the State should expand the Pilot Program; etc.   | Hearing 3/30 at 1:30 p.m.  | 3/24/2021         |       |
| Massachusetts                              | <a href="#">HB 2372</a> | An Act relative to Medicaid coverage for doula services | Rep Liz Miranda & Rep Lindsay Sabadosa | <p>Doula is defined as "a trained professional who provides physical, emotional, and informational support, but not medical care, for pregnant individuals, surrogates, foster care parents and adoptive parents during and after pregnancy, labor, childbirth, miscarriage, stillbirth or loss."</p> <p>Services defined as but not limited to: (1) providing continuous labor support to pregnant individuals, families, surrogates, and adoptive parents; (2) conducting prenatal, postpartum, and bereavement home or in-person visits throughout the perinatal period, lasting until 1 year after birth, pregnancy loss, stillbirth, or miscarriage; (3) accompanying pregnant individuals to health care and social services appointments; (4) providing support to individuals for loss of pregnancy or infant from conception through age 1; (5) connecting individuals to community-based and state- and federally-funded resources, including those which address needs within the social determinants of health; (6) engaging in administrative tasks related to these services; and (7) making oneself available (being on-call) around the time of birth or loss as well as providing support for any concerns of pregnant individuals throughout pregnancy and until 1 year after birth, pregnancy loss, stillbirth, or miscarriage.</p> <p>The division shall provide coverage for doula services throughout the Commonwealth of Massachusetts for pregnant individuals, surrogates, foster parents and adoptive parents.</p> <p>Doula care commission and MassHealth will establish and develop a registry of doulas who are eligible for reimbursement; establish processes for billing and reimbursement of doula services; determine competencies a doula must demonstrate to be reimbursed by Mass Health. Some competencies are listed in bill text.</p> <p>Establish doula commission.</p> <p>Payment: (1) MassHealth shall make an initial recommendation of the reimbursement amount for doula services no later than 3 months from the initiation of the doula care commission. The recommendation shall reflect evidenced consideration of a livable and fair wage for doulas who reside within all areas of the commonwealth, and shall include an amount for support during labor and childbirth; an amount for visits during and after pregnancy, childbirth, miscarriage, stillbirth, or loss that relate to activities listed in subsection (a); a schedule by which doula services can be reimbursed up to 1 year after birth, miscarriage, stillbirth, or loss; and travel-related expenses related to the delivery of those services. (2) The recommended reimbursement amount shall be approved by the doula care commission prior to being enacted. (3) MassHealth shall aim to initiate reimbursement of doula services within 18 months of the report of the doula care commission.</p> | Hearing scheduled for 06/07/2021 from 10:00 AM-02:00 PM in Virtual Hearing | 5/21/2021         |       |

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| Massachusetts                              | <a href="#">SB 1475</a> | An Act relative to Medicaid coverage for doula services                                       | Senator Joan B. Lovely    | <p>Coverage of Doula Services:</p> <ul style="list-style-type: none"> <li>• The division shall provide coverage for doula services throughout the Commonwealth of Massachusetts for pregnant individuals, surrogates, foster parents and adoptive parents.</li> <li>• In partnership with the doula care commission, MassHealth and the department of public health shall establish and maintain a registry of doulas who are eligible for reimbursement; establish processes for billing and reimbursement of doula services; and determine competencies a doula must demonstrate in order for their services to be reimbursed by MassHealth; and establish processes for doulas to demonstrate proof of competencies.</li> </ul> <p>(i) Competencies shall include, but are not limited to: (A) understanding of basic anatomy and physiology as related to pregnancy, the childbearing process, the postpartum period, breast-milk feeding, breastfeeding and chestfeeding; (B) capacity to employ different strategies for providing emotional support, education and resources during the perinatal period; (C) knowledge of and ability to assist families with a wide variety of non-clinical labor coping strategies; (D) strategies to foster effective communication between clients, their families, support services and health care providers; (E) awareness of and ability to provide information on integrative health care systems and various specialties of care to address client needs beyond the scope of practice of the doula; (F) knowledge of community-based, state- and federally-funded, and clinical resources available to address client needs beyond the scope of practice of the doula; and (G) knowledge of HIPAA compliance and client confidentiality.</p> <p>(ii) In addition to the above competencies, doulas serving members of MassHealth shall also show competency or demonstrate actively seeking training or engagement in the areas of:<br/> (A) health equity; (B) implicit bias; (C) racism, including structural, interpersonal, and institutionalized racism; (D) reproductive and birth justice; (E) cultural sensitivity and humility; (F) trauma-informed care, including for survivors of sexual assault or birth trauma; (G) parental mental health needs; (H) needs of persons with disabilities or disabled persons; (I) sexual and gender identities; and (J) social determinants of health.</p> | Hearing scheduled for 06/07/2021 from 10:00 AM-02:00 PM in Virtual Hearing                 | 5/21/21           |       |
| Minnesota                                  | <a href="#">HF 1178</a> | Doula certifying organization list modified, and doula registry governing provisions modified | Rep. Heather Edelson      | Doula certifying organization list modified, and doula registry governing provisions modified.   | Introduction and first reading, referred to Health Finance and Policy<br>Died in Committee | 2/18/2021         |       |

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| Minnesota                                  | <a href="#">SF 2155</a> | Certifying organizations for doulas list modifications; doula registry governing provisions modifications | Senator Julia Coleman,<br>Senator Michelle Benson | <p>Designation of doula certification organizations by commissioner.</p> <p>Review and designation by commissioner. The commissioner shall periodically review the doula certification organizations listed in section 148.995, subdivision 2, or designated by the commissioner under this section. The commissioner may: (1) designate additional organizations from which individuals, if maintaining current doula certification from such an organization, are eligible for inclusion on the registry of certified doulas; and (2) remove the designation of a doula certification organization previously designated by the commissioner.</p> <p>A doula certification organization seeking designation under this section shall provide the commissioner with evidence that the organization satisfies designation criteria established by the commissioner. If the commissioner designates a doula certification organization under this section, the commissioner shall provide notice of the designation by publication in the State Register and on the Department of Health website for the registry of certified doulas and shall specify the date after which a certification by the organization authorizes a doula certified by the organization to be included on the registry.</p> <p>The commissioner may remove the designation of a doula certification organization previously designated by the commissioner under this section upon a determination by the commissioner that the organization does not meet the commissioner's criteria for designation. If the commissioner removes a designation, the commissioner shall provide notice of the removal by publication in the State Register and shall specify the date after which a certification by the organization no longer authorizes a doula certified by the organization to be included on the registry.</p> <p>Removal from registry. (a) If the commissioner determines that a doula included on the registry does not meet the requirement in subdivision 2, clause (2), the commissioner shall notify the affected doula that the doula no longer meets the requirement in subdivision 2, clause (2), specify steps the doula must take to maintain inclusion on the registry, and specify the effect of failing to take such steps. The commissioner must provide this notice by first class mail to the address on file with the commissioner for the affected doula.</p> | Referred to Health and Human Services Finance and Policy | 3/17/2021         |       |
| Nevada                                     | <a href="#">AB 256</a>  | Provides for Medicaid coverage of doula services. (BDR 38-849)  | Rep. Shondra Summers-Armstrong                    | <p>An act relating to Medicaid; requiring the State Plan for Medicaid to provide coverage of doula services to the extent authorized by federal law; requiring the Department of Health and Human Services to apply for a waiver or State Plan amendment to receive federal funding for coverage of doula services; requiring any person who desires to provide doula services to a recipient of Medicaid to register with the Division of Health Care Financing and Policy of the Department; requiring a registered doula to report the abuse of certain persons; and providing other matters properly relating thereto.</p> <p>The Director shall, to the extent authorized by federal law, include in the State Plan for Medicaid a requirement that the State pay the nonfederal share of expenditures incurred for doula services provided by a registered doula.</p> <p>A person who wishes to receive reimbursement through the Medicaid program for doula services provided to a recipient of Medicaid must submit to the Division:</p> <p>(a) An application for registration in the form prescribed by the Division;<br/> (b) Proof that he or she possesses the required training and qualifications prescribed by the Division pursuant to subsection 4; and<br/> (c) Any fee for registration prescribed by the Division.</p>  | Passed   | 3/18/2021         |       |

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| New Jersey                                 | <a href="#">AB 5534</a>  | Requires DOH to establish doula registry and requires doula registration in order to practice doula care  | Rep. Valerie Huttle & Rep. Angela McKnight                                    | <p>The Department of Health shall establish, maintain, and publish on its Internet website a Doula Registry to provide information on trained doulas for persons who may be interested in doula care. The department shall establish a process by which it solicits the submission of information to be maintained and periodically updated within the registry.</p> <p>The registry shall include, but shall not be limited to the following information:</p> <ol style="list-style-type: none"> <li>(1) a brief description of doula care;</li> <li>(2) the name, county of residence, email address, and telephone number of each doula;</li> <li>(3) the certification status, name of the certifying entity, certification expiration date, training, qualifications, and additional skills of each doula;</li> <li>(4) rates charged and services offered by each doula;</li> <li>(5) any available information on or an Internet link to previous customer reviews with regard to each doula's services;</li> <li>(6) languages in which the doula is proficient;</li> <li>(7) health insurance plans accepted by each doula; and</li> <li>(8) any other information deemed relevant by the Department of Health.</li> </ol>  | Withdrawn from Consideration                     | 5/5/2021          |       |
| New York                                   | <a href="#">S 362</a>    | Includes doulas as medical services providers for Medicaid recipients   | Senator Roxanne J Persaud, Senator Andrew Gournardes, Senator Timothy Kennedy | Includes doulas as medical services providers for Medicaid recipients; directs the commissioner of health to submit an application for amendments and waivers to add doulas to such coverage pursuant to section 363-e of the social services law; and directs the commissioner of health and the commissioner of the office of children and family services to add, amend and/or repeal any rule or regulation necessary.   | Referred to Health                               | 1/6/2021          |       |
| New York                                   | <a href="#">SB 2137</a>  | Relates to the professional certification of doulas   | Senator Jessica Ramos   | Authorizes the professional certification of doulas; only those certified may provide doula services defined as continuous emotional and physical support provided by a certified doula throughout labor and birth, and intermittently during the prenatal and postpartum periods.   | Recommit, Enacting Clause Stricken               | 1/22/2021         |       |
| New York                                   | <a href="#">AB A5247</a> | Includes doulas as medical services providers for Medicaid recipients   | Assemblywoman Michelle Solages  | An act to amend the social services law, in relation to including doulas as medical services providers for Medicaid recipients; directing the commissioner of health to submit an application for amendments and waivers to add doulas to state Medicaid coverage; and directing the commissioner of health and the commissioner of the office of children and family services to add, amend and/or repeal any rule or regulation necessary for the implementation of this act.  | Referred To Health                               | 2/12/2021         |       |
| New York                                   | <a href="#">AB A5272</a> | Requires health insurance policies to include coverage for doula services as required coverage for maternity care   | Assemblywoman Michelle Solages  | Requires health insurance policies to include coverage for doula services as required coverage for maternity care.   | Referred To Insurance                            | 2/12/2021         |       |
| North Carolina                             | <a href="#">SB 393</a>   | Analysis Doula Support. Services/Medicaid Cov   | Senator Natalie Murdock et al.  |  | Ref To Com On Rules and Operations of the Senate | 3/31/2021         |       |
| Ohio                                       | <a href="#">HB 142</a>   | Regarding Doula Services  | Rep Erica Crawley   | To enact sections 4723.89, 4723.90, 5120.658, and 5164.071 of the Revised Code regarding doula services and to repeal sections 4723.89, 4723.90, 5120.658, and 5164.071 of the Revised Code four years after those sections take effect, to abolish those provisions on that date.   | In Committee                                     | 5/5/2021          |       |
| Pennsylvania                               | <a href="#">SB 360</a>   | An Act amending the act of June 13, 1967 (P.L.31, No.21), known as the Human Services Code, in public assistance, providing for medical assistance reimbursement for doula services | Senator Judith L. Schwank   | <p>The department shall provide reimbursement to a certified doula for providing childbirth education and support services, including physical and emotional support, to an individual covered under the medical assistance program during pregnancy, labor and delivery and up to one year postpartum.</p> <p>The department shall maintain a registry of certified doulas who have met the requirements provided under subsection and are entitled to reimbursement under this section.</p> <p>Reimbursement under subsection (a) shall include reimbursement for travel time or mileage expenses in accordance with the annually scheduled rates determined by the Internal Revenue Service.</p> <p>To be listed on the registry of certified doulas and receive reimbursement under subsection (a), a doula shall: (1) Receive and maintain certification by an approved national certification agency identified by the department. Obtain additional training to be reimbursed by an employer at a rate determined by the employer, focused on doula care for special populations, on becoming a Medicaid participating provider and on any additional topics as the department may require.</p> <p>Develop a Doula Advisory Board to act as a workgroup to determine the education requirements and entities from which a doula may receive certification.approved accreditation.</p> | Referred to HEALTH AND HUMAN SERVICES            | 3/12/2021         |       |

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| Rhode Island                               | <a href="#">HB 5929</a> | Medical Assistance -- Perinatal Doula Services  | Rep. Marcia Ranglin-Vassell                              | Provides for medical assistance health care for expectant mothers and would establish medical assistance coverage and reimbursement rates for perinatal doula services. Effective 7/1/22.  | Passed   |                   | See also SB 484 |
| Tennessee                                  | <a href="#">SB 650</a>  | An Act to amend Tennessee Code Annotated, Title 4; Title 8; Title 56 and Title 71, relative to doulas | Senator Katrina Robinson                                 | As introduced, requires that doula services be provided to recipients of TennCare; requires that the doula services be performed by a person who has received certain certification. - Amends TCA Title 4; Title 8; Title 56 and Title 71.   | Assigned to General Subcommittee of Senate Commerce and Labor Committee  | 4/21/2021         | See also HB 932 |
| Texas                                      | <a href="#">HB 158</a>  | Relating to Medicaid coverage of doula services   | Rep. Shawn Thierry, Rep. Lacey Hull, Rep. Victoria Neave | The commission shall provide medical assistance reimbursement for services provided by a doula, including childbirth education and emotional and physical support provided during pregnancy, labor, birth, and the postpartum period. The executive commissioner by rule shall determine the qualifications necessary for an individual to be considered a doula and the doula services to be covered under the medical assistance program.  | Engrossed on May 4 2021 - 50% progression, died in committee<br>Action: 2021-05-13 - Referred to Health & Human Services | 5/13/2021         |                 |
| Texas                                      | <a href="#">HB 415</a>  | Relating to doula services, including Medicaid coverage of doula services                             | Rep. Armando Walle                                       | <p>The department, in consultation with the Texas Maternal Mortality and Morbidity Review Committee and other relevant entities, shall study methods for using doula services to improve birth outcomes of women who face a disproportionately greater risk of poor birth outcomes, including the feasibility of providing Medicaid coverage for doula services. The department and the review committee shall include the findings of the study and legislative recommendations in the joint biennial report submitted as required under Section 34.015 not later than September 1, 2022. This subsection expires September 1, 2025.</p> <p>The department and the commission shall post on their respective Internet websites informational resources regarding doula services, including a description of doula services and the benefits of using doula services.</p> <p>The department, in consultation with other relevant entities, shall develop a statewide, uniform curriculum for an optional doula certification.</p> <p>The commission may provide medical assistance reimbursement for doula services, as defined by Section 32.0212, Health and Safety Code. If the commission provides medical assistance reimbursement for doula services, the executive commissioner by rule shall determine the doula services to be covered and any doula certification requirements.</p> <p>The commission shall determine whether to provide medical assistance reimbursement for doula services under Subsection (nn) based on the findings and recommendations provided in the report required by Section 32.0212(a-1), Health and Safety Code. This subsection expires September 1, 2025.</p> | Referred to Public Health  | 2/25/2021         |                 |

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| Texas                                      | <a href="#">HB 2685</a>   | Relating to a pilot program to provide Medicaid coverage for doula services | Rep. Shawn Thiery  | <p>To reduce maternal mortality rates and racial disparities in health outcomes, the commission shall establish a pilot program to provide doula services to Medicaid recipients, regardless of whether those recipients receive services through a Medicaid managed care or fee-for-service delivery model.</p> <p>The commission shall implement the pilot program in the following phases and geographic areas of this state:<br/>           (1) beginning not later than September 1, 2022, the commission shall implement the pilot program in the most populous county in this state; and<br/>           (2) beginning not later than September 1, 2023, the commission shall implement the pilot program in the county with the greatest maternal health support needs, as determined by the county's maternal and infant mortality rates and the number of births in the county by Medicaid recipients during a period in which provider capacity for the county has been reached.<br/>           (d) The commission shall prescribe eligibility requirements for participation in the pilot program.<br/>           (e) The commission shall ensure that Medicaid reimbursement is provided to a doula who provides doula services to an eligible participant under the pilot program for the following:<br/>           (1) up to four prenatal visits;<br/>           (2) the provision of support services during labor and delivery; and<br/>           (3) up to four postpartum visits. (f) Not later than September 1, 2028, the commission shall prepare and submit to the legislature a written report that:<br/>           (1) summarizes the results of the pilot program, including the effectiveness of the pilot program in reducing maternal mortality rates and racial disparities in health outcomes in the geographic areas of this state in which the pilot program operates;<br/>           (2) includes feedback from participating doulas and recipients who received doula services under the pilot program; and<br/>           (3) includes a recommendation on whether the pilot program should be continued, expanded, or terminated.</p> <p>The executive commissioner shall adopt rules to implement this section, including rules outlining the qualifications necessary for an individual to participate in the pilot program as a doula and the scope of doula services to be provided under the pilot program.</p> <p>(h) The pilot program terminates and this section expires September 1, 2030.</p> | Referred to Human Services | 3/17/2021         |       |
| Washington                                 | <a href="#">SB 5092</a>   | Making 2021-2023 fiscal biennium operating appropriations                   | By Senate Ways & Means (originally sponsored by Senators Rolfe, Wilson, L., and Wilson, C. | As it relates to doulas: Within the amounts appropriated in this section, the authority shall reimburse for maternity services provided by doulas. The authority and the department of health must consult with stakeholders and develop methods to secure approval from the centers for medicare and medicaid services for reimbursement for doulas.  | Passed                     | 5/18/2021         |       |
| Washington, D.C.                           | <a href="#">B 24-0026</a> | Maternal Health Resources and Access Act of 2021                            | Councilmember Christina Henderson  | Establishes a pilot program for Medicaid reimbursement of doula services, which includes emotional and physical support during pregnancy, labor, birth, and postpartum. Among other things, it also requires the Department of Health to conduct a study of the feasibility of establishing a birthing center east of the river.   | Public Hearing Held        | 3/29/2021         |       |