STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 25-C New Medicaid Coverage of Services Provided by Certified Doulas

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS). Public comment information is at the bottom of this document.

Changes to Medicaid State Plan

Effective on or after January 1, 2025, SPA 25-C will amend Attachments 3.1-A, 3.1-B, and 4.19-B of the Medicaid State Plan to cover services rendered by doulas enrolled in Connecticut's Medicaid program. This addition of doula coverage will improve maternal and newborn/infant outcomes, improving health equity, and coordination with access to other medically necessary services throughout the perinatal period. To be eligible for reimbursement under Medicaid, the doula must be certified by the State of Connecticut Department of Public Health (DPH) and enrolled as a doula with Medicaid.

As defined in Public Act No. 23-247, certified doulas are trained, nonmedical professionals who provide physical, emotional, and informational support to a pregnant person during the perinatal period. Effective for dates of service on and after January 1, 2025, doulas/doula groups enrolled with Medicaid will be paid under the new doula fee schedule.

Perinatal Visits:

HUSKY Health members will be allowed up to four (4) perinatal visits with the doula and each visit will be reimbursed \$100.00. Based on medical necessity, additional visits with the doula could be requested and they must be authorized by the medical administrative service organization.

| Procedure Code | Description | Rate |
|-------------------|--|----------|
| T1033 | Services performed by a doula birth worker, per diem | \$100.00 |

Billing for the Attendance at Birth:

The modifier *HD- parenting/pregnant women's program* will be required when the doula is billing for their attendance at the birth.

| Procedure | Description | Rate |
|-----------|-------------|------|
| Code | _ | |

| T1033- | Services performed by | \$800.00 |
|--------|-----------------------|----------|
| HD* | a doula birth worker, | |
| | per diem (specific to | |
| | attendance at birth) | |

Fee schedules are published at this link: <u>http://www.ctdssmap.com</u> (select "Provider", then "Provider Fee Schedule Download" accept the terms and conditions and select the applicable fee schedule.

Fiscal Impact

This proposed change is estimated to have a gross fiscal impact of \$1,924 in SFY 2025, \$47,764 in SFY 2026, and \$129,329 in SFY 2027. Since doulas are not currently enrolled as CMAP providers, it is assumed that utilization will ramp up over time as providers enroll. Therefore, the full estimated gross cost of approximately \$177,000 will not be reached until SFY 2028.

Obtaining SPA Language and Submitting Comments

The proposed SPA is posted on the DSS website at this link: <u>https://portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-State-Plan-Amendments</u>. The proposed SPA may also be obtained at any DSS resource center, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: <u>Public.Comment.DSS@ct.gov</u> or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105. Please reference "SPA 25-C New Medicaid Coverage of Services Provided by Certified Doulas".

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than **November 5, 2024**.