A BILL

To enact section 5164.071 of the Revised Code related to Medicaid coverage of doula services.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That section 5164.071 of the Revised Code be enacted to read as follows:

Sec. 5164.071. (A) As used in this section:

(1) "Doula" means an individual who provides doula services.

(2) "Doula certification organization" means an entity that is nationally or internationally recognized for training and certifying doulas and whose educational curriculum meets the requirements set forth in this section. "Doula certification organization" includes all of the following:

(a) The international childbirth education association;

(b) DONA international;

(c) The association of labor assistants and childbirth educators;
(d) Birthworks international;
(e) Childbirth and postpartum professional association;
(f) Childbirth international;
(g) The international center for traditional childbearing;
(h) Commonsense childbirth inc.

(3) "Doula services" means physical, emotional, or educational support provided during the prenatal, childbirth, and postpartum periods, other than such support that is considered to be medical, midwifery, or clinical in nature. "Doula services" include all of the following:

(a) Prenatal and postpartum visits;
(b) Birth support and time spent on call in reasonable anticipation of a birth;
(c) Communications between a doula and a pregnant woman or a pregnant woman's support person, including through telephone, electronic, or other means;
(d) Connecting a pregnant woman or woman capable of becoming pregnant with nonprofit organizations that provide assistance in locating available health and social services;
(e) Time spent on related administrative tasks such as documentation.

(4) "Malpractice insurance" means insurance coverage against the legal liability of the insured and against loss, damage, or expense incident to a claim arising out of the death, disease, or injury of any person as the result of negligence or malpractice by the insured in rendering services.

(B) The medicaid program shall cover doula services
provided by a doula with a valid provider agreement who meets all of the requirements of division (C) of this section. Medicaid payments made under the coverage of doula services shall be determined on the basis of each pregnancy, but for each pregnancy, the total of all Medicaid payments for doula services shall not exceed one thousand five hundred dollars, regardless of whether multiple births occur as a result of that pregnancy.

(C) To be eligible for payments under the Medicaid program's coverage of doula services, a doula must submit all of the following to the satisfaction of the Medicaid director:

(1) Proof that the doula has a current, valid certificate issued by a doula certification organization;

(2) An attestation that the doula has completed at least twenty-four 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 a minimum of all of the following:

(a) One breastfeeding class;

(b) Two childbirth classes;

(c) Two births.

(4) At least one positive reference from a birth mother and at least one positive reference from either a physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery or a certified-nurse midwife, as defined in section 4723.01 of the Revised Code.
(5) Proof of completion of instruction in all of the following that meet standards established in rules adopted under division (E) of this section:

(a) Cultural competency;

(b) Cardiopulmonary resuscitation;

(c) Health information confidentiality, including the privacy standards established under the federal "Health Insurance Portability and Accountability Act of 1996," 42 U.S.C. 1320d, et seq.

(D) The medicaid director shall establish a state doula registry. The registry shall include any doula who requests to be included on the registry, if the director is satisfied that all of the following are the case:

(1) The doula is at least eighteen years of age.

(2) The doula meets all of the requirements set forth in division (C) of this section to be eligible for payments under the medicaid program's coverage of doula services.

(3) The doula has not been excluded from participation in the medicaid program.

(4) The doula is covered by malpractice insurance for doula services.

(5) The doula has complied with any other eligibility requirement established by the medicaid director.

(E) The medicaid director shall adopt rules under section 5164.02 of the Revised Code to implement this section.