



Governor's Advisory Council for Exceptional Citizens (GACEC) 516 West Looeckerman St., Dover, DE 19904  
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October 30, 2023

Planning and Policy Unit  
Division of Medicaid and Medical Assistance  
1901 North DuPont Highway/P O Box 906  
New Castle, DE 19720-0906

**RE: 27 DE Reg. 235 DHSS/DMMA Doula Services Regulations (October 1, 2023)**

To Whom It May Concern:

The Governor's Advisory Council for Exceptional Citizens (GACEC) has reviewed the Delaware Health and Social Services/Division of Medicaid and Medical Assistance (DHSS/DMMA) proposal to amend the Medicaid State Plan to include the provision of doula services. This change is being made in accordance with House Bill No. 80, which was signed and passed into law in August of 2023. Council would like to share our observations and recommendations with you.

The State Plan amendment attempts to but does not mirror the language in HB 80. First, the proposed language can be interpreted to only require 90-minute sessions for postpartum visits, and not prenatal ones, while the statute very clearly indicates that both can be up to 90 minutes. The proposed amendment 3.1-A Page 3 reads as follows:

*Delaware Medicaid doula benefit is coverage for doula support in the perinatal period, including prenatal support, labor and delivery support, and postpartum support. The scope of the Medicaid doula benefit is to provide doula support to Medicaid members that include:*

- *Maximum of three (3) prenatal visits*
- *Maximum of three (3) postpartum visits • 90 minutes per visit*
- *Labor/birth attendance*

Clarity is needed and may be accomplished by a change in punctuation or formatting.

Second, the reimbursement mechanism described is not clear. The language indicates that services are to be billed in 15-minute increments, and then imposes a billing limit of "four units" per visit.

*Each perinatal service visit may be billed for and reimbursed separately. All visits are reimbursed in fifteen (15) minute increments. Each visit has a maximum unit capacity of four (4) units.*

As written, it appears that if the “four units” are the 15-minute increments, then this is imposing a limit of 60 minutes that is eligible for reimbursement per visit, when the statutory language clearly indicates that recipients are eligible for up to 90 minutes per visit.

Council as a whole is not well versed in the development of doula programs but acknowledge that there is a great deal of literature available regarding best practices for developing a doula program, especially in the Medicaid context. Based on some of the reviewed information and experiences in other states, two areas in particular that require expertise and planning are reimbursement rates and developing doula service infrastructure, particularly around training and licensure. Council would like additional information on the next steps in planning and implementation of the doula program in Delaware. It is critical that this important service gets the attention, expertise and funding it deserves in order to be successful.

Thank you for your time and consideration of our observations and recommendations. Please feel free to contact Pam Weir or me should you have any questions.

Sincerely,

*Ann C Fisher*

Ann C. Fisher  
Chairperson

ACF: kpc