

1 AN ACT relating to Medicaid coverage for doula services.

2 *Be it enacted by the General Assembly of the Commonwealth of Kentucky:*

3 ➔SECTION 1. A NEW SECTION OF KRS CHAPTER 205 IS CREATED TO
4 READ AS FOLLOWS:

5 (1) As used in this section, "doula" means a trained professional who provides
6 physical, emotional, and educational support, but not medical care, to mothers
7 before, during, and after childbirth.

8 (2) The Department for Medicaid Services and any managed care organization with
9 which the department contracts for the delivery of Medicaid services shall provide
10 coverage for doula services if the doula has:

11 (a) Applied for and received a National Provider Identifier number from the
12 federal Centers for Medicare and Medicaid Services; and

13 (b) Completed enrollment as a Medicaid provider, as required by the
14 Department for Medicaid Services.

15 (3) In order to be eligible to enroll as a Medicaid provider, the Department for
16 Medicaid Services shall require a doula to provide at least the following:

17 (a) Evidence of having completed the following:

18 1. A doula training course offered by the International Childbirth
19 Education Association, Doulas of North America, the Association of
20 Labor Assistants and Childbirth Educators, Birthworks, the Childbirth
21 and Postpartum Professional Association, Childbirth International,
22 the International Center for Traditional Childbearing, or
23 Commonsense Childbirth, or any other doula training course
24 approved by the Department for Medicaid Services;

25 2. At least twenty-four (24) contact hours of in-person education that
26 included any combination of childbirth education, birth doula
27 training, antepartum doula training, and postpartum doula training;

- 1 3. At least one (1) breastfeeding class;
2 4. At least two (2) childbirth classes;
3 5. A cultural competency training course; and
4 6. A training course on client confidentiality and privacy;
5 (b) Proof of cardiopulmonary resuscitation certification for infants, children,
6 and adults; and
7 (c) At least one (1) positive reference from a licensed healthcare provider or a
8 licensed certified professional midwife as defined in KRS 314.400.
9 (4) The Department for Medicaid Services shall promulgate administrative
10 regulations necessary to carry out this section.

11 ➔Section 2. If the Department for Medicaid Services or the Cabinet for Health
12 and Family Services determines that a state plan amendment, waiver, or any other form
13 of authorization or approval from any federal agency is necessary prior to implementation
14 of Section 1 of this Act for any reason, including the loss of federal funds, the department
15 or cabinet shall, within 90 days after the effective date of this Act, request any necessary
16 state plan amendment, waiver, authorization, or approval, and may only delay full
17 implementation of those provisions for which a state plan amendment, waiver,
18 authorization, or approval was deemed necessary until the state plan amendment, waiver,
19 authorization, or approval is granted or approved.

20 ➔Section 3. The Department for Medicaid Services or the Cabinet for Health and
21 Family Services shall, in accordance with KRS 205.525, provide a copy of any state plan
22 amendment, waiver application, or other request for authorization or approval submitted
23 pursuant to Section 2 of this Act to the Legislative Research Commission for referral to
24 the Interim Joint Committee on Health Services and the Interim Joint Committee on
25 Appropriations and Revenue and shall provide an update on the status of any application
26 or request submitted pursuant to Section 2 of this Act at the request of the Legislative
27 Research Commission or any committee thereof.