Table of Contents

State/Territory Name: Rhode Island

State Plan Amendment (SPA) #: 21-0013

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

May 24, 2022

Ana P. Novais, MA, Acting Secretary Executive Office of Health and Human Services | State of Rhode Island 3 West Road, Virks Building Cranston, RI 02920

Re: Rhode Island State Plan Amendment (SPA) 21-0013

Dear Acting Secretary Novais:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number 21-0013. This amendment proposes to add coverage of Doula services to support pregnant individua ls, improve birth outcomes, and support new mothers and families with culturally specific antepartum, intrapartum, and postpartum services.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 440.130. This letter is to inform you that Rhode Island Medicaid SPA Transmittal Number 21-0013 was approved on May 23, 2022 with an effective date of July 1, 2021.

As described in the state's letter to CMS dated April 29, 2022 regarding its Hospital Licensing Fee (HLF) and in CMS's response letter dated May 19, 2022, please note that CMS's approval of this State Plan Amendment (SPA) whose non-federal share source may include the HLF relates only to the requested change in payment methodology, not the source of non-federal share. Approval of this SPA does not relieve the state of its responsibility to comply with federal laws and regulations, and to ensure that claims for federal financial participation are consistent with all applicable requirements.

If you have any questions, please contact Joyce Butterworth at 857-338-0554 or via email at Joyce.Butterworth@cms.hhs.gov.





James G. Scott, Director Division of Program Operations

cc: Kristin Sousa, Interim Medicaid Program Director Kathryn Thomas, Senior Economic and Policy Analyst

DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION			FORM APPROVED OMB NO. 0938-0193
	ND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL		21-0013	RI
FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR		4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE AND MEDICAID SERVICES		July 1, 2021	
	IEALTH AND HUMAN SERVICES	2	
5. TYPE OF PLAN MATE	RIAL (Check One):		
NEW STATE PLAN	AMENDMENT TO BE (CONSIDERED AS NEW PLAN	XX AMENDMENT
	BLOCKS 6 THRU 10 IF THIS IS AN AME		
	EGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	in umenumenty
42 CFR 440.130		a. FFY 2021 \$110,208	3
		b. FFY 2022 \$418,128	3
8. PAGE NUMBER OF TH	IE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPER OR ATTACHMENT (If Applicable	
Attachment 3:1 A Supplement 3 to Page 9a		NEW	
Attachment 4.19-B Page 3F		NEW	
Attachment 4.19-B Page-3F-1-		NEW	
Attachment 3.1-A, Supplement to Page 6, Pages 6.14 and 6.15			
10. SUBJECT OF AMENE Doula Services			
COMMENTS OF C	EW (Check One): FFICE REPORTED NO COMMENT GOVERNOR'S OFFICE ENCLOSED IVED WITHIN 45 DAYS OF SUBMITTAL	XX 🗌 OTHER, AS See Attached Le	
12. SIGNATURE OF STATE AGENCY OFFICIAL:		16. RETURN TO:	
		EOHHS	
13. TYPED NAME:	Womazetta Jones	3 West Rd, Virks Building Cranston, RI 02920	
14. TITLE:	Secretary	1	
15. DATE SUBMITTED:	September 28, 2021		
	FOR REGIONAL OF	FICE USE ONLY	
17. DATE RECEIVED:	September 28, 2021	18. DATE APPROVED: May 23, 24	022
	PLAN APPROVED – ON	E COPY ATTACHED	
19. EFFECTIVE DATE OF	F APPROVED MATERIAL:		
	July 1, 2021		
21. TYPED NAME:	James G. Scott	Director, Division of I	Program Operations
23. REMARKS: Box 8	8 Pen & Ink change to correct pagination issue	es.	
	0 10		

Reimbursement for Preventive Services: Doula Services.

- 1. Payment Methodology:
 - a. Payment is based on a fee schedule; and the specific fees are determined by the stage of pregnancy (prenatal, labor/delivery, or postpartum). The rates are accessible on the EOHHS website here:
 <u>https://eohhs.ri.gov/providers-partners/fee-schedules</u>. A doula may not receive more than \$1500.00 per pregnancy. In order to bill each visit for the rate, the doula must have visited the member for at least 60 minutes.
 - b. The rates are structured to capture all of the staff costs associated with providing doula services, including providing emotional and physical support with traditional comfort measures and educational materials, as well as assistance during the transition to parenthood in the initial postpartum period; education on pregnancy, labor, and birth; meetings with the member's interdisciplinary care team; screening; case management; postpartum and/or bereavement supports; telephone time; travel time; and time writing case notes.
 - c. Payment does not include room and board.
 - d. All visits will be documented and billed for reimbursement with the proper billing code as described in the provider manual.

2. <u>Rate Increases:</u>

EOHHS does not increase rates based on a set inflation factor on a pre-determined basis.

3. Date of Effective Rates:

EOHHS' rates were set as of July 1, 2021 and are effective for services on or after that date.

13C. Preventive Services

13C.2 Doula Services

- 1. Doula services are provided if recommended by a physician or other licensed practitioner of the healing arts within the practitioner's scope of the practice under State law to:
 - a. Prevent disease, disability, and other health conditions or their progression;
 - b. Prolong life; and
 - c. Promote physical and mental health and efficiency.
- 2. Scope of Services: A doula may provide services to a pregnant individual such as:
 - a. Services to support pregnant individuals, improve birth outcomes, and support new mothers and families with cultural specific antepartum, intrapartum, and postpartum services, referrals and advocacy;
 - b. Advocating for and supporting physiological birth, breastfeeding, and parenting for their client;
 - c. Supporting the pregnancy, labor, and birth by providing emotional and physical support with traditional comfort measures and educational materials, as well as assistance during the transition to parenthood in the initial postpartum period;
 - d. Empowering pregnant people and new mothers with evidence-based information to choose best practices for birth, breastfeeding, and infant care;
 - e. Providing support to the laboring client until the birth of the baby;
 - f. Referring clients to their health care provider for medical advice for care outside of the scope of doula scope of practice;
 - g. Working as a member of the client's multidisciplinary team and offering evidence-based information on infant feeding, emotional and physical recovery from childbirth, and other issues related to the postpartum period.
- 3. Limitations:
 - a. Coverage of doula service is limited to three (3) prenatal visits, one (1) labor and delivery visit, and three (3) postpartum visits per pregnancy, regardless of the number of infants involved. There are no prior authorization requirements for the three (3) prenatal visits, one (1) labor and delivery visit, and three (3) postpartum visits. Limitations on services provided to people age 21 and under can be exceeded based on medical necessity
 - b. Labor and Delivery shall be covered regardless of the duration of the birthing process.
 - c. A member is allowed up to three postpartum visits. If a member's pregnancy does not result in a live birth, or if the member did not receive the full allotment of three (3) prenatal visits and/or one (1) labor and delivery visit, the allotted benefit amount remaining from prenatal and labor and delivery can be used towards postpartum and/or bereavement supports.
- 4. Provider Qualifications:

a. Doulas must meet the following provider qualifications:

i. Be certified as a doula by the Rhode Island Certification Board.

- Certification by the Rhode Island Certification Board includes the following requirements:
 - Completion of 20 hours of relevant education/training;
 - Documentation of current CPR certification, including competencies for adults and infants; and
 - Documentation of current SafeServ certification for meal preparation