

CareOregon doula coverage FAQ:

External guidance document

Last updated: July 2025

CareOregon is committed to supporting our members during the perinatal and birth experience. Doula care is a covered benefit for Oregon Health Plan (OHP) members whose benefit package covers labor and delivery. We are working closely with birth workers across the state to improve member access to doula services. Below is information outlining the process and covered benefit for doulas serving CareOregon members.

Covered doula services

Under the current OHP benefit, CareOregon will provide reimbursement for doula services when a certified doula submits a claim with required billing information. This includes being listed as active on Oregon's State THW Registry (see CareOregon's "Traditional health worker claims submission guide" for more information):

- OHP covers doula support once per pregnancy for any birthing parent whose benefit package covers labor and delivery.
- The standard doula benefit includes, at a minimum, four support visits (two visits before delivery and two visits after delivery), and doula support during the labor and delivery event. These services can be billed as a bundle or itemized.
- Support visits can take place at the birthing parent's home, as part of an office visit, or virtually.

Reimbursement for doula services

Based on the current OHP benefit, doula care can only be reimbursed when a certified Doula submits a claim with the required billing information following coding guidelines per OAR 410-130-0015 Doula Services. Doulas can be compensated at a bundled rate when they provide all covered services, or at the itemized rate when not all covered services can be provided.

The OHP Fee-for-Service (FFS) rates for doula services are below. Please reach out to the CareOregon support contact at metrothw@careoregon.org for more information about CareOregon's enhanced rates. Please note due to laws and regulations we cannot tell how to bill and suggest working with a medical billing company or doula hub if additional support is needed.

Please note it is important that you bill your standard billing costs regardless of insurance even if they are higher than noted below or the enhanced rates. Billing your standard rates will allow us to capture this data for encounter purposes and take that into consideration for future rate setting.

Service		Codes	Description		OHP FFS Rate
Bundled	• 2 prenatal visits	T1033	Global benefit with support at delivery	HD	\$1505
	• Labor and delivery support				
	• 2 postpartum visits				
Itemized	Prenatal/postpartum visits	T1033	Each support visit (up to 2 prenatal and 2 postpartum visits)		\$215
	Labor and delivery	T1033	Doula services day of delivery only	22	\$645
	Additional visits	T1033	Up to 4 additional support visits		\$215

Submitting doula claims

- Doula claims fall under the OHP pregnancy benefit, where a pregnancy diagnosis is used; therefore, timely filing requires a claim to be received within 365 days from the date of service (OAR 410-141-3565).
- Doula services may only be billed once per pregnancy. Additional payment is not available for multiple births (i.e., twins, triplets).
- Certified doulas should be listed as the rendering provider for doula services.
- When billing for itemized services, include the most appropriate place of service on the claim form. When billing for bundled services, use the place of service that best describes where labor and delivery took place. Place of service codes are available at [cms.gov/medicare/coding-billing/place-of-service-codes/code-sets](https://www.cms.gov/medicare/coding-billing/place-of-service-codes/code-sets)

Confirming client/patient insurance status

Prior to submitting a claim, the client/patient's insurance status should be verified so that the correct insurer is billed:

- After enrolling as a DMAP provider, you will be entered into the [Medicaid Management Information System](#). Use the PIN you were provided during enrollment to access this system to check insurance status.
- We recommend confirming eligibility for the date that the service was provided.

For doula services provided to OHP members who also have commercial health insurance on or after May 1, 2024:

- If the commercial health plan does not cover doula services, bill OHA directly.
- If the commercial health plan does cover doula services, submit the claim to the commercial insurer first. Then, bill OHA as the secondary payer for any remaining eligible charges.
- Do not bill OHA if you have already received full payment from the member's commercial health plan.

Coding per OAR 410-130-0015 Doula Services

Doula services should be billed using the appropriate codes. Billable codes for doula services as it relates to the diagnosed condition of pregnancy are as follows:

- Global (bundled) doula package:
 - » CPT T1033+HD
 - » One-time claim per pregnancy
 - » When billing for the global package, all services must be provided by the same doula
- Itemized (support visits) billing:
 - » CPT T1033 for each visit, up to four (not to exceed the bundle total)
- Acceptable day-of-delivery-only codes:
 - » T1033+22

Billing Examples

Below are three examples of the CMS-1500 form, from OHA's [Billing for Doula Services guide](#). These examples show billing for the standard doula benefit, including:

- The licensed practitioner services are billed using the appropriate delivery code.
- The doula services are billed using the appropriate code(s), followed by modifier, if applicable, with the enrolled doula listed as the rendering provider.
- Please note that Place of Service is a required field, although it is not shown in these examples.

Global doula benefit

24. A. DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				E. DIAGNOSIS	F. \$ CHARGES	G. DAYS OR UNITS	H. EPSTD Family Plan	I. ID. QUAL	J. RENDERING PROVIDER ID. #
MM	DD	YY	MM	DD	YY			CPT/HCPCS	MODIFIER			POINT					
1	1	25	1	1	25			T1033	HD				1,505.00			NPI	

Partial services: Delivery only

A. DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				E. DIAGNOSIS POINT	F. \$ CHARGES	G. DAYS OR UNITS	H. EPSTD Family Plan	I. ID QUAL	J. RENDERING PROVIDER ID. #
MM	DD	YY	MM	DD	YY			CPT/HCPCS		MODIFIER							
1	1	25	1	1	25			T1033	22				645	00		NPI	

Partial services: Support visits and additional visits only

24. A. DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)		E. DIAGNOSIS POINT	F. \$ CHARGES	G. DAYS OR UNITS	H. EPSTD Family Plan	I. ID. QUAL	J. RENDERING PROVIDER ID. #
MM	DD	YY	MM	DD	YY			CPT/HCPCS	MODIFIER						
1	1	25	1	1	25			T1033			215	00		NPI	

Documentation per OAR 410-130-0015

Doula services should be documented in the client's medical record by the licensed obstetrical practitioner. The goal of documentation is to verify services were provided and facilitate communication between the member and the obstetrical practitioner. The doula should provide a record of visits to the practitioner, including:

- Dates of service.
- A brief description of education or services provided.
- Assessment of any member needs beyond routine care.
- Any referrals made.
- Birthing plans developed with the member, with member approval.

Contracting with CareOregon for doula services

- Contracts are not required for doula reimbursement.
- CareOregon may consider contracting with organizations/clinics for enhanced or culturally specific doula services. If you are interested in learning more, please reach out to the CareOregon support contact at metrothw@careoregon.org

Doula Hubs

A doula hub is a business, agency, or community organization that has been established to support doulas by billing on their behalf. Doula hubs often serve additional purposes beyond billing, including support for referrals, supervision, and serving as a liaison between doulas and providers. Get in touch with the CareOregon support contact at metrothw@careoregon.org to learn more about doula hubs in your county.

Oregon Administrative Rules for doulas

Please refer to the following Oregon Administrative Rules (OARs) for more information about doula services and requirements:

- *OAR 410-130-0015, Doula Services*
- *OAR 410-180-0315, Birth Doula Certification Requirements*
- *OAR 410-180-0375, Birth Doula Certification Curriculum Standards*

OHA Office of Equity and Inclusion contact information

For additional Information about the THW program, please contact OHA/OEI at:

- Telephone: 971-673-3353
- Fax: 971-673-1128
- Email: thw.program@dhsosha.state.or.us

CareOregon support

Additional questions can be directed to the CareOregon support contact at metrothw@careoregon.org

Additional resources

- *OHA's Office of Equity and Inclusion doula webpage*
- *OHA's THW Registry*
- *Oregon Doula Association website*