

Doulas

Policy Number: SC15P0048A5

Effective Date: August 20, 2015

Last Update: October 3, 2025

PAYMENT POLICY HISTORY

Date	SUMMARY OF CHANGES
October 3, 2025	Policy updated in line with MCHP 9/22/2025 guidance to add information regarding labor resulting in emergency Cesarean delivery.
July 10, 2025	Policy updated in line with MHCP 7/18/2025 guidance for billing when labor progresses over multiple days.
March 31, 2025	Annual review complete. Minor updates to definition and payment information sections for clarity.
May 17, 2024	Updated number of covered visits to match MHCP change effective 5/1/24.
April 19, 2024	Annual review completed. Policy updated to more accurately reflect appropriate U4 mod use. Formatting and grammar updates also applied.
February 13, 2024	Updated payment policy to address new provider eligibility standards granted by MN Medicaid and MinnesotaCare Medical Director Jan 2024.
January 8, 2024	Policy updated to reflect the coding changes effective 1/1/2024.
January 1, 2024	Policy updated to reflect supervision requirements changes made in approved DHS State Plan Amendment (SPA) 23-18, effective 1/1/2024.
June 8, 2023	Annual review completed. Formatting and grammar updates applied.
June 1, 2022	Minnesota Statutes 2020, section 148.995, subdivision 2, is amended as it relates to Doula Certification.
May 18, 2021	Annual policy update. No changes were made to the policy.
February 21, 2020	Annual policy update. The policy was move to an updated UCare template.
April 2, 2019	Annual policy update. Other than updating the UCare logo no changes were made to the Policy.
August 2018	Added information under the frequency and service limitations section of the Policy to request a benefit exception if more than 6 sessions are medically necessary.
January 2017	Annual review: no changes made.
January 2016	Under Payment Policy, sub-heading covered services added language to indicate that Doulas were limited to providing childbirth education and support services which include emotional and physical support during pregnancy.

APPLICABLE PRODUCTS

This policy applies to the products checked below:

UCARE PRODUCT	PRODUCT TYPE	APPLIES TO
UCare Connect	Minnesota Health Care Programs (MHCP)	✓
UCare MinnesotaCare	Minnesota Health Care Programs (MHCP)	✓
UCare Prepaid Medical Assistance (PMAP)	Minnesota Health Care Programs (MHCP)	✓

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PAYMENT POLICY INSTRUCTIONS

A payment policy assists in determining provider reimbursement for specific covered services. To receive payment, the provider must be in a contractual relationship with UCare and provide services to a member enrolled in one of UCare's products. This payment policy is intended to provide a foundation for system configuration, work instructions, call scripts, and provider communications. A payment policy describes the rules for payment, which include applicable fee schedules, additional payment rules by regulatory bodies, and contractual terms. This policy is a general guideline and may be superseded by specific provider contract language.

PAYMENT POLICY OVERVIEW

This Policy outlines the payment and billing guidelines for services performed by Doula to individuals covered under one of UCare's PMAP, Connect, or MinnesotaCare products.

POLICY DEFINITIONS

TERM	NARRATIVE DESCRIPTION
Certified Doula	An individual who has received doula certification and is registered with the Minnesota Department of Health to perform doula services.
Doula Services	Services that offer continuous emotional and physical support throughout labor and birth and intermittently during the prenatal and postpartum periods.

ENROLLEE ELIGIBILITY CRITERIA

THIS SECTION OF THE POLICY PROVIDES INFORMATION THAT IS SPECIFIC TO THE UCARE MEMBER, INCLUDING INFORMATION ABOUT THE CRITERIA THE MEMBER MUST MEET IN ORDER FOR THE SERVICE(S) IN THE POLICY TO BE ELIGIBLE FOR PAYMENT.

Pregnant UCare members are eligible to receive Doula services.

ELIGIBLE PROVIDERS OR FACILITIES**OUTLINED BELOW IS THE SPECIFIC CRITERIA A PROVIDER MUST MEET IN ORDER FOR THE SERVICE(S) IN THIS POLICY TO BE ELIGIBLE FOR PAYMENT.****Provider**

- Doulas who are registered with the Minnesota Department of Health (MDH) may enroll as doula providers for UCare.
- UCare-enrolled doula providers are allowed to provide and bill for doula services for eligible members because of the [Recommendation for Doula Services for Pregnant and Postpartum Minnesota Health Care Programs Members](#) from the MN Medicaid and MinnesotaCare Medical Director.

Facility

Not applicable.

Other and/or Additional Information

Not applicable.

EXCLUDED PROVIDER TYPES**OUTLINED BELOW IS INFORMATION REGARDING PROVIDERS WHO ARE NOT ELIGIBLE TO FURNISH THE SERVICE(S) LISTED IN THIS POLICY.**

Not applicable.

MODIFIERS, CPT, HCPCS, AND REVENUE CODES**General Information**

The Current Procedural Terminology (CPT®), Healthcare Common Procedure Coding System (HCPCS), and Revenue codes listed in this policy are for reference purposes only. Including information in this policy does not imply that the service described by a code is a covered or non-covered health service. The inclusion of a code does not imply any right to reimbursement or guarantee of claim payment.

Modifiers

The modifiers listed below are not intended to be a comprehensive list of all modifiers. Instead, the modifiers that are listed are those that must be appended to the CPT® / HCPCS codes listed below.

Based on the service(s) provided, and the circumstances surrounding those services it may, based on correct coding, be appropriate to append an additional modifier(s) to the CPT® / HCPCS code.

When a service requires multiple modifiers, the modifiers must be submitted in the order listed below. If it is necessary to add additional modifiers, they should be added after the modifiers listed below.

MODIFIER(S)	NARRATIVE DESCRIPTION
-U4	For purposes of this policy the U4 modifier indicates services were performed by a doula during a labor and delivery session

CPT and/or HCPCS Code(s)

Effective 1/1/2024:

CPT AND/OR HCPCS CODE(S)	MODIFIER	NARRATIVE DESCRIPTION	Comment
T1033		Non-Labor and Non-Delivery Sessions	
T1033	U4	Labor and Delivery Session	

Previously used codes through 12/31/2023:

CPT AND/OR HCPCS CODE(S)	MODIFIER	NARRATIVE DESCRIPTION	Comment
S9445	U4	Non-Labor and Non-Delivery Sessions	Replaced by T1033
99199	U4	Labor and Delivery Session	Replaced by T1033-U4

CPT® is a registered trademark of the American Medical Association.

Revenue Codes

Not applicable.

PAYMENT INFORMATION

Fee Schedule Updates

Information regarding the update of fee schedules can be found in the [UCare Provider Manual](#).

Covered Services

- Doula Covered services include informational, emotional, and physical support for pregnancy, labor and delivery, and postpartum birthing people. This also includes spiritually and culturally responsive care.
- Under the MHCP products, UCare covers up to eighteen (18) sessions with a doula. These 18 sessions can be completed anytime during the prenatal, labor and delivery, and postpartum period.
- Under the MHCP products, UCare covers doulas who attend labor and delivery in settings where licensed birthing professional is attending the birth. These settings include hospitals, birth centers, and within the home (home births).
- Under the MHCP products, UCare covers attendance of a doula during a labor that results in an emergency Cesarean delivery.

Non-Covered Services

Travel time and mileage are not covered services

BILLING REQUIREMENTS AND DIRECTIONS

- Submit Doula services using the MN-ITS 837P format or the electronic equivalent
- Bill all non-labor and non-delivery sessions with T1033, no modifier
- Bill the labor and delivery session with T1033 appended with the -U4 modifier
- If labor progresses over multiple days, bill for the date the doula was present providing services. Or, if the doula was present throughout the labor and delivery, bill the doula services for the date of birth.
- If the labor results in an emergency Cesarean delivery, the doula may still bill the labor and delivery session with T1033 and U4 modifier.

PRIOR AUTHORIZATION, NOTIFICATION AND THRESHOLD INFORMATION

Prior Authorization and Notification Requirements

UCare does update its' authorization, notification, and threshold requirements from time-to-time. The most current prior authorization requirements can be found [here](#).

Threshold Information

As of May 1, 2024, under MHCP products, UCare covers up to 18 sessions without prior authorization.

RELATED PAYMENT POLICY INFORMATION

OUTLINED BELOW ARE OTHER POLICIES THAT MAY RELATE TO THIS POLICY AND/OR MAY HAVE AN IMPACT ON THIS POLICY.

POLICY NUMBER	POLICY TITLE
SC14P0007A6	Free Standing Birthing Centers

SOURCE DOCUMENTS AND REGULATORY REFERENCES

LISTED BELOW ARE LINKS TO CMS, MHCP, AND STATUTORY AND REGULATORY REFERENCES USED TO CREATE THIS POLICY

[MHCP Provider Manual, Reproductive Health OB/GYN, Doula Services](#)

[Minnesota Statutes, section 144.651, subd. 10](#) (Health Care Bill of Rights: Participation in Planning Treatment; Notification of Family Members)

[Minnesota Statutes, section 148.995, subd. 2](#) (Definitions: Certified Doula)

[Laws of Minnesota 2014, chapter 291, article 4, section 23](#) (amended section 148.995, subd. 2)

[Minnesota Statutes, section 148.996](#) (Registry)

[Laws of Minnesota 2014, chapter 291, article 4, section 24](#) (amended section 148.996, subd. 2)

[Minnesota Statutes, section 256B.0625, subd. 28b](#) (Covered Services: Doula Services)

[HHS omnibus finance bill: Chp. 30, Art. 4, Sec. 3, page 172.1](#) (amended Minnesota Statutes 2020, section 148.995, subdivision 2.)

DISCLAIMER

“Payment Policies assist in administering payment for UCare benefits under UCare’s health benefit plans. Payment Policies are intended to serve only as a general reference resource regarding UCare’s administration of health benefits and are not intended to address all issues related to payment for health care services provided to UCare members. In particular, when submitting claims, all providers must first identify member eligibility, federal and state legislation or regulatory guidance regarding claims submission, UCare provider participation agreement contract terms, and the member-specific Evidence of Coverage (EOC) or other benefit document. In the event of a conflict, these sources supersede the Payment Policies. Payment Policies are provided for informational purposes and do not constitute coding or compliance advice. Providers are responsible for submission of accurate and compliant claims. In addition to Payment Policies, UCare also uses tools developed by third parties, such as the Current Procedural Terminology (CPT®*), InterQual guidelines, Centers for Medicare and Medicaid Services (CMS), the Minnesota Department of Human Services (DHS), or other coding

guidelines, to assist in administering health benefits. References to CPT® or other sources in UCare Payment Policies are for definitional purposes only and do not imply any right to payment. Other UCare Policies and Coverage Determination Guidelines may also apply. UCare reserves the right, in its sole discretion, to modify its Policies and Guidelines as necessary and to administer payments in a manner other than as described by UCare Payment Policies when necessitated by operational considerations.”