



# DOH DMAHS Community Doula Stakeholder Meeting

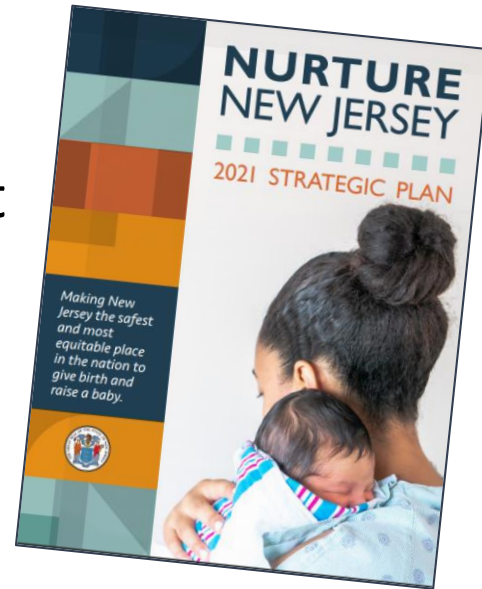
*October 19, 2021*

# 10.19.21 Agenda

- 1:30pm Introductions and Opening Remarks
- 1:45pm Presentation: Overview of our 2019-2021 work together
- 2:10pm Presentation: Doula Learning Collaborative
- 2:30pm Discussion of next steps for this stakeholder group

# New Jersey's community doula benefit...in context

Nurture New Jersey has been a statewide effort to make New Jersey the safest and most equitable place in the nation to give birth and raise a baby.



- Launched by First Lady Tammy Murphy in 2019
- Acknowledges New Jersey's poor statistics in maternal and infant mortality and maternity-related racial health disparities

## Aligned Initiatives in NJ Medicaid

10/01/19: PlanFirst family planning coverage

12/31/19: CenteringPregnancy benefit

01/01/21: Mandated use of Perinatal Risk Assessment Form

01/01/21: Non-payment for Early Elective Deliveries

### **01/01/21: Community doula services benefit**

04/05/21: Expanded breastfeeding equipment benefit

FY2022: Expanded prenatal + contraceptive coverage for women ineligible for Medicaid due to immigration status

FY2022: Expanded access to midwives

FY2022: Postpartum coverage from 60 to 365 days

4/1/2022: Quality-driven Perinatal Episode of Care pilot

FY2022: Lactation Support

FY2022: Postpartum Home Visiting (Targeted and Universal)

07/2022: 1115 Waiver Renewal (proposed): CHW Pilot Program

# Why Community Doulas?

**Doulas** are non-clinical professionals who provide physical, emotional, and informational support before, during, and after birth.

- In 2019, other statewide Medicaid doula benefits in Minnesota and Oregon were focused on labor doula support

**Community doulas** are also equipped to meet particular needs of Medicaid populations and under-served communities.

- *Culturally-competent care*: BIPOC workforce, culturally and linguistically competent
- *Community-based care*: Trauma-informed, aware of the local social services available in NJ

## March of Dimes July 2018 Position Statement

*Studies suggest that increased access to doula care, especially in under-resourced communities, can improve a range of health outcomes for mothers and babies, lower healthcare costs, reduce c-sections (cesarean sections), decrease maternal anxiety and depression, and help improve communication between low-income, racially/ethnically diverse pregnant women and their health care providers.*

March of Dimes supports increased access to doula care as one tool to help improve birth outcomes and reduce the higher rates of maternal morbidity and mortality among women of color in the United States.

March of Dimes advocates for all payers to provide coverage for doula services.

March of Dimes recognizes the importance of increased training, support and capacity development for doulas, including doulas from racially, ethnically, socioeconomically and culturally diverse communities

# DOH DMAHS' Community Doula Stakeholder group

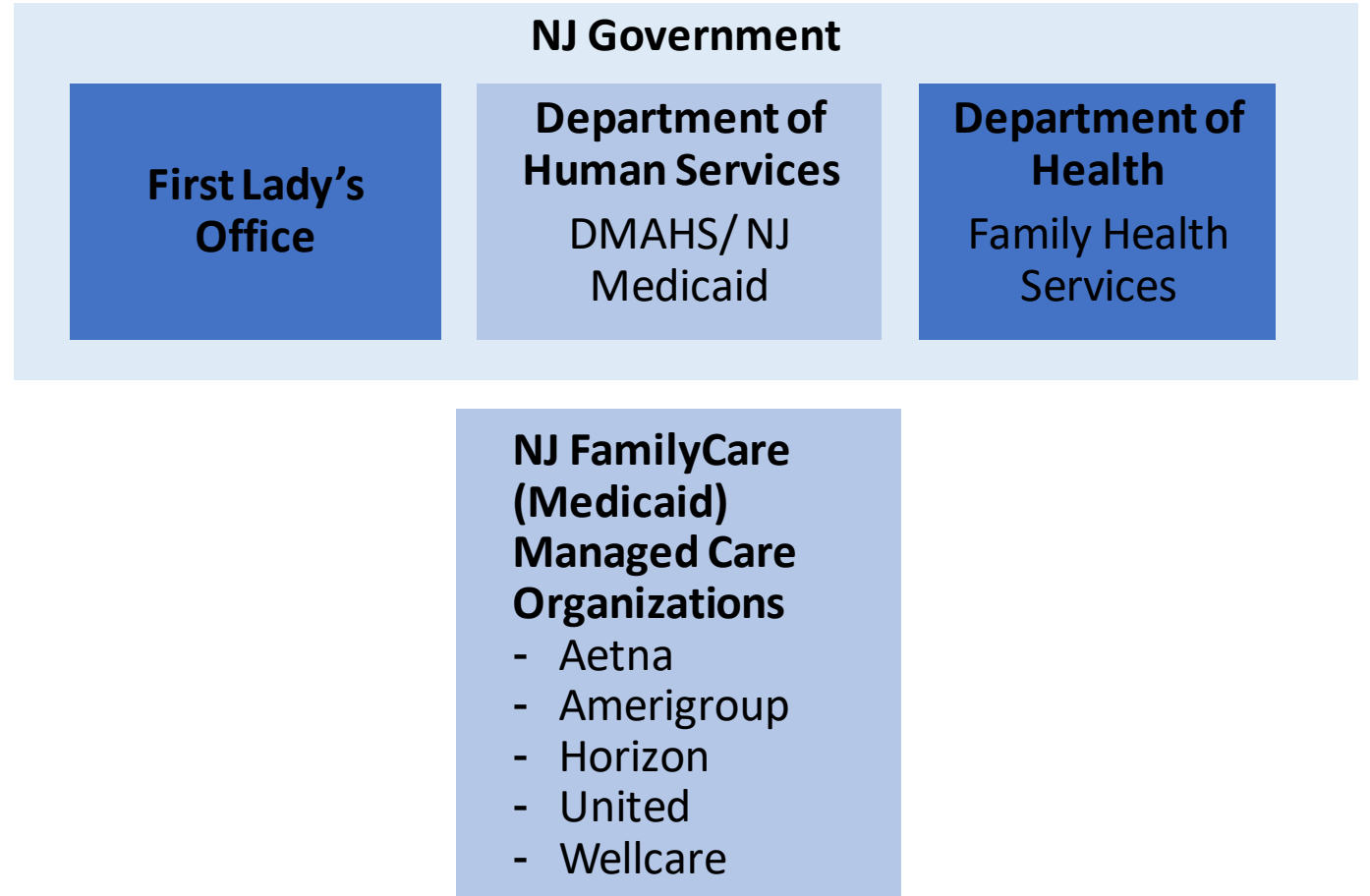
*a multi-stakeholder approach to inform policy related to community doula services in NJ*

## NJ-based community doula training programs

- DOH/Nicolson Foundation funded community doula training programs: Healthy Women Healthy Families Pilot Sites
  - Community Doulas of South Jersey (with SJPC)
  - Children's Futures
  - Sister to Sister (with SPAN)
- Burke Foundation/Turrell Fund/Princeton Area Community Foundation funded community doula training program
  - AMAR doulas (with Children's Home Society of NJ)

## Non-profit organizations

- Burke Foundation
- Nicolson Foundation



***....and most recently:***

**Our enrolled NJ FamilyCare community doulas!**

# Community doula benefit milestones so far

- **Fee for service provider network**
  - We have enrolled individual providers from all four of our NJ-based community doula training sites (as well as alternative training backgrounds), and from 11 counties.
  - We have two enrolled doula-only agencies from our community doula sites.
- **Managed care provider network**
  - We have contracted providers in all five of our managed care organizations.
- **Services**
  - Our members are receiving community doula services. (We are monitoring for claims submission and for successful reimbursement.)

*Thank you for the difference  
your partnership, feedback, and commitment have made!*

# A timeline of our work together...

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**September 2019:** Stakeholder meetings with community-based doulas *on benefit design*

**January 2020:** NJ FamilyCare Managed Care Organizations join our stakeholder meetings

# *Your* impact on our benefit

<i>What we heard...</i>	<i>How we responded...</i>
Community doulas are best equipped to meet particular needs of Medicaid populations	<ul style="list-style-type: none"><li>• DMAHS committed to a community doula workforce</li></ul>
Community doula model of care is unique	<ul style="list-style-type: none"><li>• Built an expansive 8-1 model of care with high reimbursement rate for perinatal visits, and a complex case provision our youngest members</li></ul>
Doula care prioritizes shared decision making	<ul style="list-style-type: none"><li>• Model is non-prescriptive on number or timing of visits</li><li>• Model allows for higher reimbursement rate for initial visit</li><li>• Model allows clients to find the community doula match that best serves them</li></ul>
Doulas are trained non-clinical professionals	<ul style="list-style-type: none"><li>• Doula services are provided independently (do not require clinical supervision)</li><li>• Doulas have flexibility in how they can get paid (as independent providers, in doula-only groups, or with other clinical providers)</li><li>• Backup doula can be reimbursed when the primary doula cannot attend</li></ul>
Community doulas do not have substantial financial resources	<ul style="list-style-type: none"><li>• Doula applications have no fee</li><li>• Doula's fingerprint-based criminal background checks have no fee</li></ul>



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**March 2020:** COVID pandemic begins; stakeholder meetings continue virtually  
*on the impacts of the pandemic on community doula work and  
maternity care in the state*

# *Your impact* on maternity-related services during COVID

<i>What we heard...</i>	<i>How we responded...</i>
Doulas were encountering barriers in providing in-person labor support	<ul style="list-style-type: none"><li>• DOH Executive Directive (6/29/20): “A doula...is essential to patient care...and shall not count as a support person.”</li></ul>
Doulas shared digital divide barriers for birthing individuals in accessing care via telehealth	<ul style="list-style-type: none"><li>• DMAHS redoubled efforts to publicize federal programs (Lifeline Assistance) that provides phones with minutes and data: <a href="https://nj.gov/humanservices/home/digitalaccessforall.shtml">https://nj.gov/humanservices/home/digitalaccessforall.shtml</a></li></ul>

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**January 2021:** NJ FamilyCare Community Doula benefit launch; stakeholder meetings continue  
*on supporting community doulas through provider enrollment and contracting*

# *Your impact* on implementation of the benefit

<i>What we heard...</i>	<i>How we responded...</i>
Doulas identified areas of improvement	<ul style="list-style-type: none"><li>• DMAHS has biweekly monitoring of enrollment/contracting/claims through all of 2021</li><li>• DMAHS recognized inefficiencies in Gainwell fee-for-service enrollment and required corrective actions</li><li>• DMAHS removed requirement for doulas to contract with MCOs as individuals (doulas still have to enroll in fee-for-service as individuals)</li><li>• <b>DMAHS implemented street suppression of community doula provider addresses in all NJ FamilyCare provider directories</b></li></ul>
HWHF pilots requested transitional support from grant-funding to NJ FamilyCare reimbursement	<ul style="list-style-type: none"><li>• DOH extended HWHF program funding</li><li>• DMAHS arranged for single case agreements between HWHF pilot sites and NJ FamilyCare MCOs</li></ul>
Doulas requested a clear pathway for committed doulas with other trainings to be able to serve NJ FamilyCare members	<ul style="list-style-type: none"><li>• DMAHS created APPROVED TRAININGS document with linked resources</li><li>• DOH launched a 11-series training for NJ-based community-based/cultural competency requirements, offered with no fee</li><li>• DOH funded a doula-specific HIPAA training, offered with no fee</li><li>• DOH/DMAHS responded to feedback on requirements of Ancient Song-trained community doulas</li></ul>

# *Your impact* on professional support for doulas

<i>What we heard...</i>	<i>How we responded...</i>
<p>Doulas requested clear documentation of the Medicaid processes</p>	<ul style="list-style-type: none"> <li>• DMAHS doula-specific webpage: <a href="https://www.state.nj.us/humanservices/dmahs/info/doula.html">https://www.state.nj.us/humanservices/dmahs/info/doula.html</a></li> <li>• DMAHS created doula-specific 1-page CHECKLIST for fee-for-service enrollment; <b>MCOs are creating 1-page Resource Guide</b></li> <li>• DMAHS created four informational doula-specific provider trainings; <b>MCOs are creating doula-specific Provider Trainings for their contracted doulas</b></li> <li>• DMAHS created a Clinical Recommendation Form for doula services</li> <li>• <b>ADC creating doula-to-doula RESOURCES slide deck</b></li> </ul>
<p>Doulas requested support to navigate Medicaid successfully</p>	<ul style="list-style-type: none"> <li>• <b>DMAHS-to-doula support:</b> DMAHS Doula Guides (since November 2020) <a href="mailto:mahs.doulaguide@dhs.nj.gov">mahs.doulaguide@dhs.nj.gov</a></li> <li>• <b>MCO-to-doula support:</b> MCO points of contacts for doula contracting (<b>adding points of contact for claims submission support</b>)</li> <li>• <b>Doula-to-doula support:</b> <ul style="list-style-type: none"> <li>– Burke Foundation funded <b>Accompany Doula Care</b> in June 2021</li> <li>– DOH funded <b>Doula Learning Collaborative</b> in August 2021</li> </ul> </li> </ul>

# Doula points of contact as of 10/19/21

Program	Point of Contact for Enrollment	Point of Contact for Claims Issues
Fee-for-service	“Doula Guides” (Rhiannon Reeves, Julie Cato, Sue Lombardo) mahs.doulaguide@dhs.nj.gov 609-610-6511	GWT Provider Services njmmisproviderservices@dxc.com 1-800-776-6334
Aetna Better Health of NJ	Jessica Perez perezj8@aetna.com 609-664-8246	Liarra Sanchez SanchezL7@aetna.com 609-455-8997
Amerigroup NJ Inc	Rhonnda Talton NJDoulaNetwork@Anthem.com 609-364-0107	
Horizon NJ Health	Doula_Credentialing_&_Servicing@h orizonblue.com	Ashley Hines ashley_hines@horizonblue.com 973-752-7041
UnitedHealthcare Community Plan	Michelle Gendrano michelle_gendrano@uhc.com 732-623-1260	Michele Gendrano (info on left), or Patti Ann Prestia patricia_prestia@uhc.com 732-623-1132
Wellcare	Janet Soler-Webb Janet.Soler-Webb@wellcare.com 973-388-0439	

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**January 2021:** NJ FamilyCare Community Doula benefit launch; stakeholder meetings continue  
*on supporting community doulas through provider enrollment/contracting, and  
claims submission*

**August 2021:** Doula Learning Collaborative awardee announcement

# Other states/organizations are looking to our hard work and our innovation in NJ...

...including Virginia, Massachusetts, Rhode Island, California, Michigan; Mathematica, Medicaid Evidence-Based Decisions Project, The National Academy for State Health Policy, Center for Health Care Strategies, Rutgers School of Public Health

- Our emphasis on a **community doula** benefit
- Our **8-1** community doula model and **incentive** payment for followup care in the postpartum period
- Our multifaceted approach to **support** for non-clinical doula providers in navigating the paperwork associated with being a Medicaid provider, including in building relationships with managed care organizations



# Next steps

- The **operations** work continues with community doula enrollment/contracting/claims submission
- Continue to support the **adaptive change** work to increase awareness about community doula support and recruit clinical champions
- Continue to build our **community doula workforce**
  - AMAR doulas training a new cohort of community doula trainees
  - DOH funded a new cohort of community doula trainees through HWHF site
- Our community doula benefit is not intended to operate in a silo, but in **coordination** with the NJ FamilyCare's other benefits and Nurture NJ's parallel initiatives

...Actively support the **Doula Learning Collaborative!**

# NJ Stakeholders Meeting

October 19, 2021

HealthConnect One and National Doula Network

**HEALTHCONNECT ONE COLLABORATES WITH BLACK, BROWN, AND INDIGENOUS COMMUNITIES TO ENSURE BIRTH EQUITY THROUGH SAFE AND HEALTHY PREGNANCIES AND BIRTHS, THRIVING BABIES AND FAMILIES, AND SUCCESSFUL EARLY PARENTING**



# HealthConnect One - DLC Core Team



Dr. Twylla Dillion  
HealthConnect One  
Executive Director



Tatiana Smith, Doula  
NJ DLC  
Project Director



Shonv Millien, Doula  
NJ DLC  
Project Manager



Jonique Freeman  
HealthConnect One  
Chief of Staff



Wandy Hernandez-Gordon  
HealthConnect One  
Business Development Director, Doula

**DLC Email Address: [njdlc@healthconnectone.org](mailto:njdlc@healthconnectone.org)**



## Mission

The National Doula Network's mission is to increase access to insurance-covered doula services to advance equitable maternal health outcomes.

## Vision

Our vision is for every health plan to ensure access to a full spectrum of culturally congruent doula care and provide living wage reimbursement for doula services. We believe cultural humility and compassionate, centered care and support is a right, not a privilege; a reality, not just a goal. No one should birth alone.



@ndndoulas



# National Doula Network - DLC Team



Elizabeth Simmons, MS, CD  
National Doula Network  
Co-founder & CEO



Kara Van de Grift, MSW, MSPH  
National Doula Network  
Co-founder & COO



Coming Dec. 2021  
NJ DLC  
Technical Assistance Coordinator

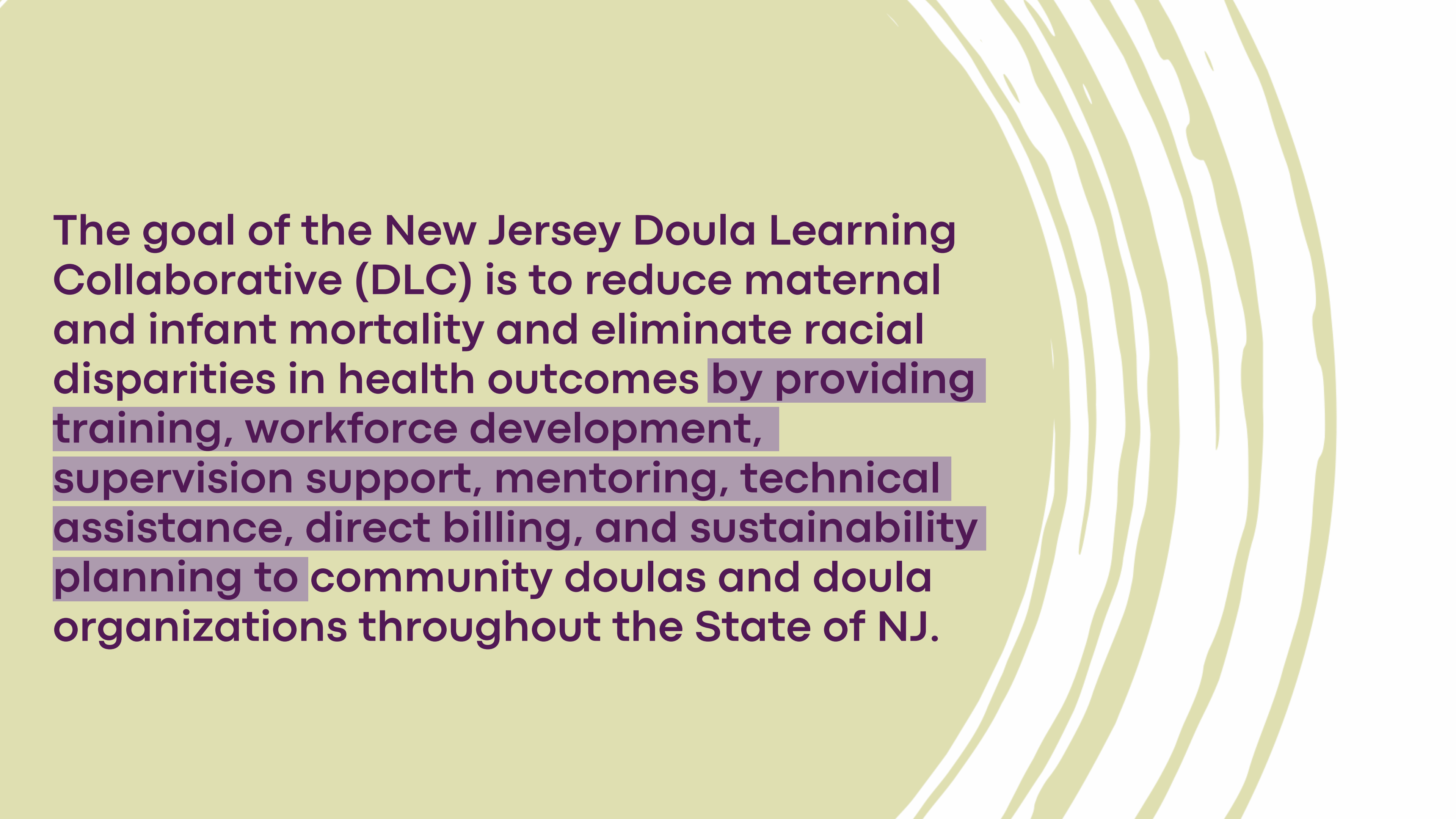


Coming Dec. 2021  
NJ DLC  
Doula Mentor & Support Coordinator

# Objectives

Introductions of  
HealthConnect One and  
National Doula Network

Overview of Project and  
Objectives



The goal of the New Jersey Doula Learning Collaborative (DLC) is to reduce maternal and infant mortality and eliminate racial disparities in health outcomes by providing training, workforce development, supervision support, mentoring, technical assistance, direct billing, and sustainability planning to community doulas and doula organizations throughout the State of NJ.



# NJ DLC Objectives

## 1. Establish an Advisory Board

comprising a diverse membership including representation from doulas, which will provide input to the DLC regarding its organizational structure, work plan, systems development, data collection, evaluation, and plan for sustainability.

2. Secure and host accepted training, supervisor training and train-the-trainer training in Year 1. Create a comprehensive unique-to-NJ doula training curriculum by the end of Year 2.



Advisory



Training



Technical



Leadership/  
Sustainability

# NJ DLC Objectives

**3. Launch and Promote Supplemental Community Competency Training (SCCT)** which provides cultural competency training and education in NJ-specific community-based resources for doulas. While the SCCT is available to any interested practicing doula, the SCCT is intended to fulfill the requirement for additional cultural competency/community-based training required for doulas who otherwise fulfill the training requirements.

**4. Provide Doula Mentoring** to community doulas practicing in NJ and assist supervisors in becoming certified in reflective supervision.



Advisory



Training



Technical



Leadership/  
Sustainability

# NJ DLC Objectives

## 5. Serve as doula registration liaison

A doula registry will be established to facilitate this process overall; the DLC will collaborate with state partners to assist with this process

## 6. Provide Medicaid Enrollment Technical Support to Doulas

and doula organizations for enrollment and contracting as a NJ FamilyCare doula provider, and with the submission of NJ FamilyCare billing for fee-for-service and managed care members—by filing on their behalf either in-house, through a contracted organization (for example, a medical billing agency), or supporting doulas who wish to file independently.



Advisory



Training



Technical



Leadership/  
Sustainability

# NJ DLC Objectives

## 7. Grow doula workforce

Conduct outreach to recruit community doulas, grow the community doula workforce and encourage community doulas to participate in NJ FamilyCare.

## 8. Promote doula awareness

Establish partnerships with health systems and health care providers to promote awareness of and advocacy for doulas.

## 9. Plan for sustainability

Develop a plan for the funding sustainability of the DLC.



Advisory



Training



Technical



Leadership/  
Sustainability

# Advisory Board Development

## Priority 1 for Year 1

The Advisory Board will collaboratively guide the direction and governance of the NJ DLC.

We will discuss formation during the next section of this meeting.

# Technical Support

- Medicaid Reimbursement

## Priority 2 for Year 1

Supporting enrollment and contracting for NJ Family Care doula providers to be eligible for billing is prioritized for year 1.

DLC team members and the National Doula Network will support this work.

Input from the Advisory Board will be key.

# Doula Training

## Priority 3 for Year 1

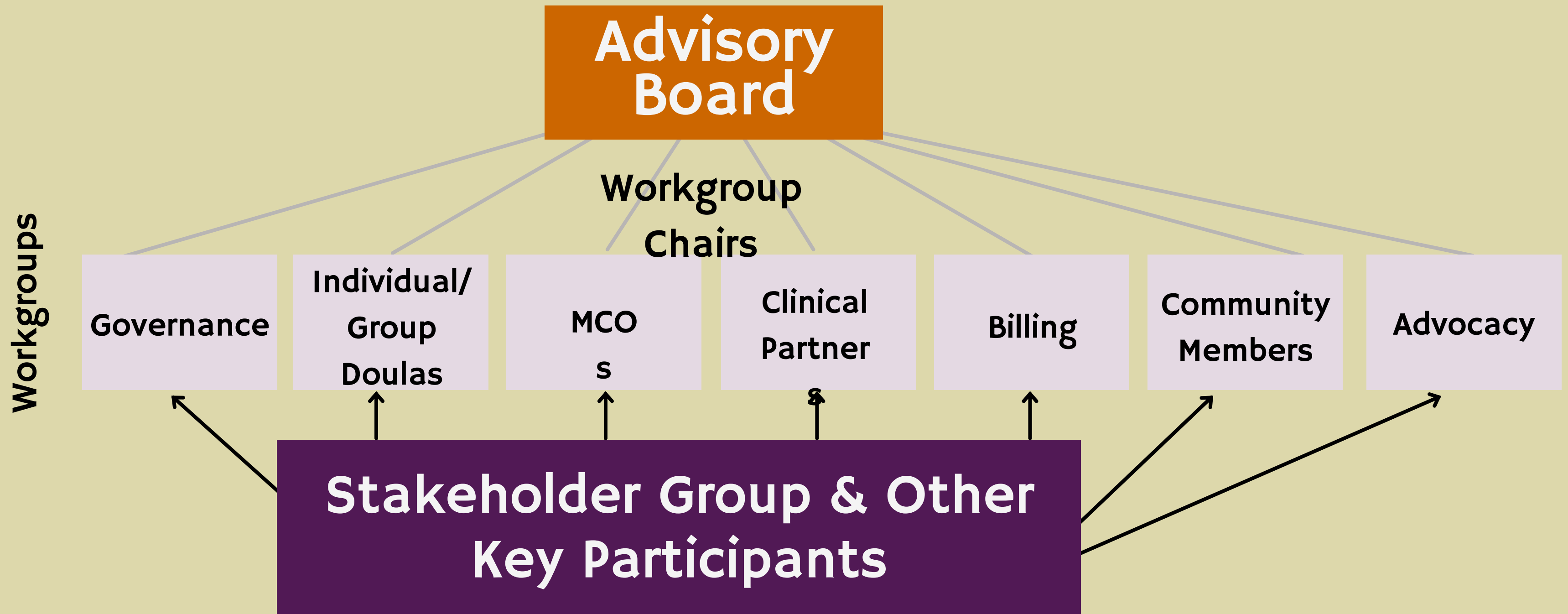
Provision of approved doula training at no charge to interested community members to strategically grow the pool of community-based doulas available to participate in NJ FamilyCare and support NJ's birthing families.

# Advisory Board Overview

The advisory board will be comprised of a diverse membership including representation from community doulas, which will provide input to the DLC regarding its organizational structure, work plan, systems development, data collection, evaluation, and plan for sustainability.



# Advisory Board Formation



**MARK YOUR CALENDAR!**

**New Jersey Doula Learning  
Collaborative Kick-Off**

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**Wednesday, November 10, 2021**

**2:00 - 3:30 pm**

**Online Meeting Notice To Follow**

# Key Takeaways

Introductions to members of the NJ DLC team at HealthConnect One and National Doula Network

Review of the nine Objectives of the NJ Doula Learning Collaborative, and Year 1 priorities

The DLC and advisory board will prioritize Medicaid Doula Reimbursement and Community Based Doula Training

Planning for the advisory board will begin in the coming weeks

NJ DLC Kick-off Event will be held online on Wednesday, November 10 from 2:00 - 3:30 pm

DLC Email Address: [njdlc@healthconnectone.org](mailto:njdlc@healthconnectone.org)