AN ACT relating to Medicaid coverage for doula services.

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

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

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

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

(a) Applied for and received a National Provider Identification Number from the federal Centers for Medicare and Medicaid Services; and

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

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

(a) Evidence of having completed the following:

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

2. At least twenty-four (24) contact hours of in-person education that included any combination of childbirth education, birth doula training, antepartum doula training, and postpartum doula training;
3. **At least one (1) breastfeeding class;**

4. **At least two (2) childbirth classes;**

5. **A cultural competency training course; and**

6. **A training course on client confidentiality and privacy;**

   (b) **Proof of cardiopulmonary resuscitation certification for infants, children, and adults; and**

   (c) **At least one (1) positive reference from a licensed healthcare provider or a licensed certified professional midwife as defined in KRS 314.400.**

(4) **The Department for Medicaid Services may promulgate administrative regulations necessary to carry out this section.**

⇒ Section 2. If the Cabinet for Health and Family Services or the Department for Medicaid Services determines that a waiver or any other authorization from a federal agency is necessary prior to the implementation of any provision of Section 1 of this Act, the cabinet or department shall, within 90 days after the effective date of this Act, request the waiver or authorization and shall only delay full implementation of those provisions for which a waiver or authorization was deemed necessary until the waiver or authorization is granted.