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State/Territory Name: Washington

State Plan Amendment (SPA) #: 24-0028

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 (300) Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

September 10, 2024

Susan Birch, Director Dr. Charissa Fotinos, State Medicaid Director Washington State Health Care Authority Post Office Box 45502 Olympia, WA 98504-5010

Re: Washington State Plan Amendment (SPA) – 24-0028

Dear Director Birch and Dr. Fotinos:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 24-0028. This amendment will add doula services to the Medicaid State Plan.

We conducted our review of your submittal according to statutory requirements in Section 1905(a)(13) of the Social Security Act and 42 CFR § 440.130. This letter informs you that Washington State Plan Amendment (SPA) -24-0028 was approved on September 10, 2024, with an effective date of January 1, 2025.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Washington State Plan.

If you have any questions, please contact Edwin Walaszek at (212)-616-2512 or via email at edwin.walaszek1@cms.hhs.gov.

Sincerely,

Digitally signed by James

G. Scott -S

Date: 2024.09.10 18:10:32

-05'00'

James G. Scott, Director

Division of Program Operations

Enclosures

cc: Ann Myers, Section Manager & State Plan Coordinator, Health Care Authority

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER 2. STATE			
STATE PLAN MATERIAL	2 4 — 0 0 2 8 WA			
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT			
	V XIX V XXI			
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE			
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	January 1, 2025			
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)			
Section 1902a of the Social Security Act; 42 CFR 440.130 Section 1905(a)(13) of the Social Security Act	a FFY 2025 \$ 740,000 b. FFY 2026 \$ 2,060,000			
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)			
Attachment 3.1-A page 36a (new)				
Attachment 3.1-B page 36a (new				
Attachment 4.19-B page 24d (new)				
9. SUBJECT OF AMENDMENT	L			
Add Doula Services as a Preventive Service				
10. GOVERNOR'S REVIEW (Check One)				
O GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED: EXEMPT			
O COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	0			
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL				
11. SIGNATURE OF STATE AGENCY OFFICIAL 15	. RETURN TO			
	ate Plan Coordinator			
12. TYPED NAME	DB 42716			
Charissa Fotinos, MD, MSc	ympia, WA 98504-2716			
13. TITLE				
Medicaid and Behavioral Health Medical Director				
14. DATE SUBMITTED July 22, 2024				
FOR CMS USE				
	. DATE APPROVED			
July 22, 2024 PLAN APPROVED - ONE	September 10, 2024			
18. EFFECTIVE DATE OF APPROVED MATERIAL 19	SIGNATURE OF ADDROVING OFFICIAL			
January 1, 2025	. SIGNATURE OF APPROVING OFFICIAL Digitally signed by James G. Scott -S Date: 2024.09.10 18:11:02 -05'00'			
	. TITLE OF APPROVING OFFICIAL			
James G. Scott	Director, Division of Program Operations			
22. REMARKS	Briceton, Britision of Program operations			
8/01/24-State authorizes the following pen and ink changes:				
Box 5: Change Federal Statute to- Section 1905(a)(13) of the Social Security Act.				

REVISION ATTACHMENT 3.1-A Page 36a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	WASHINGTON	
,	DURATION, AND SCOPE OF MEDICAL AND REMEI SERVICES PROVIDED TO THE CATEGORICALLY N	

13. c. Preventive Services

Doula Services

Pursuant to 42 CFR 440.130(c), doula services are provided as preventive services and must be recommended by a physician or other licensed practitioner acting within their scope of practice under state law.

A doula is a nonmedical support person trained to provide physical, emotional, and informational support to birthing persons. A doula advocates for and supports the birthing person and their family to self-advocate by helping them to know their rights and make informed decisions. Doula services are provided during pregnancy, childbirth or end of pregnancy, and the postpartum period (the 12-month period after the last day of pregnancy). These services are inclusive of all pregnancy outcomes.

Services include:

- Prenatal intake visit one per pregnancy
- Labor and delivery support as needed (no limit but may be billed only once per pregnancy)
- Comprehensive postpartum visit one per pregnancy
- Additional prenatal and postpartum visits limited to 20 hours

Limitations may be exceeded based on medical necessity.

Birth doulas must be at least 18 years old and possess current certification as a birth doula with Washington State Department of Health.

REVISION ATTACHMENT 3.1-B Page 36a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State_	WASHINGTON	
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	WASHINGTON	

POLICY AND METHODS USED IN ESTABLISHING PAYMENT RATES FOR EACH OF THE OTHER TYPES OF CARE OR SERVICE LISTED IN SECTION 1905(a) OF THE ACT THAT IS INCLUDED IN THE PROGRAM UNDER THE PLAN

IX. Other Noninstitutional Services (cont)

O. Doula Services

The Agency sets doula services on a fee-for-service basis, based on pregnancy, regardless of outcome. The Agency sets doula services fees based on periodic review and examination of market research, other state's fees, budget impacts and other reliable data. The research and data must be sufficient to establish the adequacy of service reimbursement. The legislature may also grant an increase to these fees, subject to CMS approval. The Agency pays the lesser of the usual and customary charge or a fee based on an Agency fee schedule.

Doula's services can be billed once per client per pregnancy. Multiple births (i.e., twins, triplets) are not eligible for additional reimbursement.

Services per pregnancy are limited to one claim for prenatal intake visit, one claim for comprehensive postpartum visit, one claim for labor and delivery support, and a maximum of 20 additional hours across the prenatal and postpartum visits.

Except as otherwise noted in the plan, fee schedule rates are the same for both governmental and private providers of these services. See 4.19-B, I, General, #G for the agency's website where the fee schedules are published.