

Doula Benefit Summary

Premier Plan Doula Benefit Program Information

The following information details the Doula benefit available for an individual who is the birth parent (“member”) and is enrolled in a Premier Plan, including the benefit maximum, covered services, and the claim submission process.

Is there a maximum dollar benefit?

The maximum dollar benefit for Doula services is \$3,000 per pregnancy for doula claims incurred on or after September 1, 2020.

What services are covered under the Doula benefit?

The following are Doula services covered by the plan for each stage of pregnancy:

Antepartum Visits

Antepartum services may include the following:

- Review of the member’s home environment, equipment, child-care needs, transportation needs and requirement for interpreter services
- Review the member’s support system (family, friends, and/or significant other)
- Discussion of the member’s preferred infant feeding method. If breastfeeding is preferred, assist in scheduling lactation consult post-delivery
- Provide information regarding prenatal classes
- Identify place of delivery and mode of transportation, if applicable
- Discuss the member’s expectation of the birth experience, labor and delivery process and anesthesia, including discussion of a birth plan to be shared with delivering provider (OBGYN or midwife)
- Support and reinforce information provided in prenatal classes concerning labor, delivery, and postpartum care of both the member and the newborn, including:
 - Confirm that there is a car seat available for transporting infant
 - Review infant safe sleeping practices
 - Offer suggestions for coping strategies in the postpartum period
 - Discuss notification of active labor and expectations regarding attendance during the labor and delivery process

Labor and Delivery Attendance

Services provided during labor and delivery may include the following:

- At the member’s request, be present at the birth and remain through the immediate postpartum period
- Provide help and guidance on measures for comfort and pain relief such as breathing, relaxation, movement, positioning and comforting touch
- Provide emotional support and act as a facilitator to assist in communication with hospital staff

- Provide immediate postpartum support and initiation of breastfeeding, as needed (if applicable and trained to provide such breastfeeding support)

Postpartum Visits

Postpartum services may include the following:

- Discuss the birth experience
- Discuss importance of postpartum physician/midwife follow up
- Follow-up on the infant's first wellness checkup scheduling
- Encourage member to discuss the immunization schedule with the child's healthcare provider
- If breastfeeding, provide support
- Review recommendations for postpartum health, including rest/sleep
- Assist in prioritizing offers of help from friends and extended family
- Assist the member in understanding baby cues and suggest techniques for soothing the baby
- Demonstrate and have the member provide a return demonstration of infant care
- Educate the member on infant carrying devices available

What services are not covered under the Doula benefit?

- Childcare (day or night)
- Housekeeping assistance
- Medical diagnosis or treatment
- Administration of medications
- Placement fees

How do I submit a claim for Doula services?

The attached claim form can only be used when services are rendered by Doulas before, during, and after a birth. It cannot be used for other services not associated with Doulas or pregnancy. Please refer to the covered services and benefit maximum referenced above.

This form was created to help you submit claims for services rendered by Doulas who may be unfamiliar with insurance claim processes. These providers may require you to pay for services up front prior to filing a claim with UHC. Services must be completed before a claim can be submitted; deposits or pre-payments cannot be reimbursed until after services have occurred. Once a claim is received, appropriate amounts will be credited toward your In-Network deductible and out-of-pocket maximum. You may receive reimbursement if your deductible has already been met.

To ensure faster processing of your claim, be sure to do the following:

Use black or blue ink and print clearly and legibly. Complete all the applicable fields on the form. Ask your provider for their license/certification number or have them fill that out for you below. Be sure to submit a separate form for each claim and to attach an itemized receipt/invoice after services have occurred. The itemized receipt/invoice must contain a

summary of services, corresponding dates of service, total cost, and proof of payment, if applicable.

What happens next?

Once you have completed the form, mail it to the address listed below and be sure to include the coversheet at the top of your paperwork. The address and fax number are as follows:

UnitedHealthcare Claims
P.O. Box 30431
Salt Lake City UT, 84130
Fax #: 801-938-2102

Be sure to attach copies of your itemized invoice or itemized receipt detailing what services occurred.

After UnitedHealthcare processes your claim, they will send you an Explanation of Benefits (EOB) in the mail or online, depending on your elected preference. The EOB will explain the charges, how these amounts applied to your plan deductible and out-of-pocket maximum, as well as any reimbursement that may be due to you. You may also view your EOB information online at myuhc.com.

Can I be reimbursed for expenses exceeding the \$3,000 maximum benefit from my FSA?

Yes, you can use your General Purpose FSA (or Limited Purpose FSA if you have reached the medical deductible) for reimbursements for out-of-pocket doula expenses. Please include the attached Letter of Medical Necessity (LMN) when submitting the reimbursement request to Optum to be reimbursed from your FSA.