

# Doula Advisory Committee (DAC)

## Onboarding Meeting

Facilitated by:  
Government Performance Solutions, Inc. (GPS)

Wednesday, April 16, 2025  
Noon - 2:00 p.m.



**COLORADO**  
Department of Health Care  
Policy & Financing



# Virtual meeting guidelines

Here are some ideas to make virtual collaboration easy on us all:



This meeting is being recorded starting at 12pm



If your computer has a camera, please keep it on when possible. We suggest using the blur feature or virtual background.



Put your computer microphones (or phone) on mute when not speaking.



In addition to coming off mute, please use the chat feature to share ideas and ask questions



Click the Live Transcript icon at the bottom of your screen for captions

# Today's agenda

1. Welcome and roll call *12:00 - 12:20*
2. Recap and DAC follow-up topics *12:20 - 12:45*
3. Federal requirements for NPI referral presentation  
*12:45 - 1:15*
4. DAC brainstorm: outreach and communication to  
generate awareness of the Health First Colorado (HFC)  
Doula benefit to HFC Members *1:15 - 1:45*
5. Upcoming meetings and reminders *1:45 - 1:50*
6. Public comment & wrap up *1:50 - 2:00*

# Roll call



1. Amy Barcenas
2. Amy Du
3. Britt Westmoreland
4. Ebony White
5. Elizabeth Simmons
6. Erin Ross
7. Hannah Saona
8. Helena Santos
9. Kaja Rumney
10. Koryn Holden
11. Laurel Hicks
12. Nicki Dunnivant
13. Phoebe Montgomery
14. Sydney Comstock
15. Tayla Kelly
16. Whitney Buckendorf
17. Wivine Ngongo

# Updates

We have limited time for updates today - **only 5 minutes**. So we to be fair to everyone, we are...

- Prioritizing your time for two key discussion topics:
  1. NPI referral requirements
  2. Brainstorm: communication and outreach to generate awareness of the Health First Colorado Doula benefit
- Maximizing the amount of discussion time for those topics
- Requesting you share updates in the Chat
  - All chat contributions are captured and will be shared in the meeting notes

# Department representatives

Susanna Snyder - Child and Family Health Division Director, HCPF

Sarah Martinez - Reproductive Health Unit Program Coordinator, HCPF

Laura James - Project Manager, Strategic Unit, HCPF

Annette Dayley - Reproductive Health Implementation Specialist, HCPF

# DAC March Meeting Follow-Up Topics



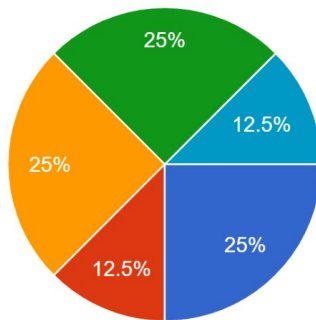
# Follow Up Topics

- DAC Q&A
- Meeting Evaluation + Proposed Process Changes
- March recommendations

# Meeting Evaluation Respondents

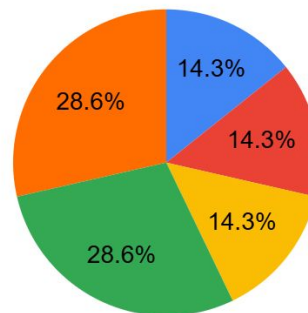
What primary perspective(s) are you representing in the DAC?

8 responses



- Family/Community impacted by this issue
- Regional Accountable Entity
- Doula
- Other healthcare professional
- Hospital, health facility or birthing center
- Doula group in large hospital setting serving mostly medicaid insured patients

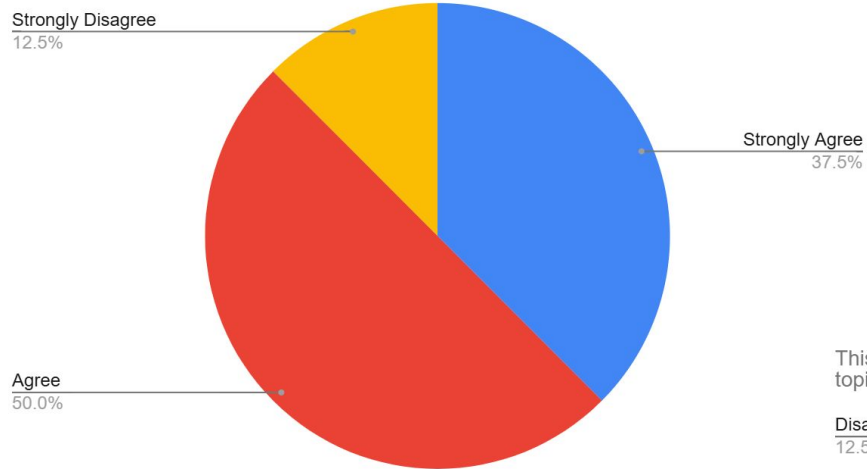
What (other) secondary perspective are you bringing to the DAC?



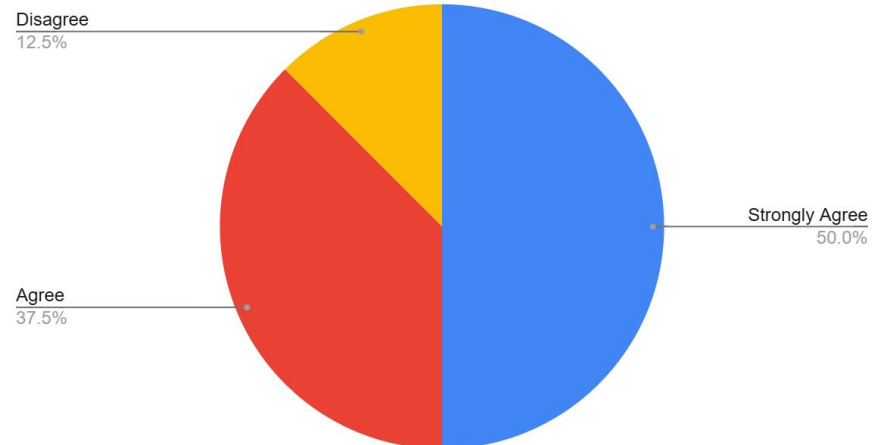
- High Risk Patient that was blessed with a Doula
- Other healthcare professional
- The Southern Colorado Doula Collective
- Doula
- Family/Community impacted by this issue, Other healthcare professional

# Meeting Evaluation Responses (1 of 3)

This meeting was effective in moving forward the shared purpose of the DAC

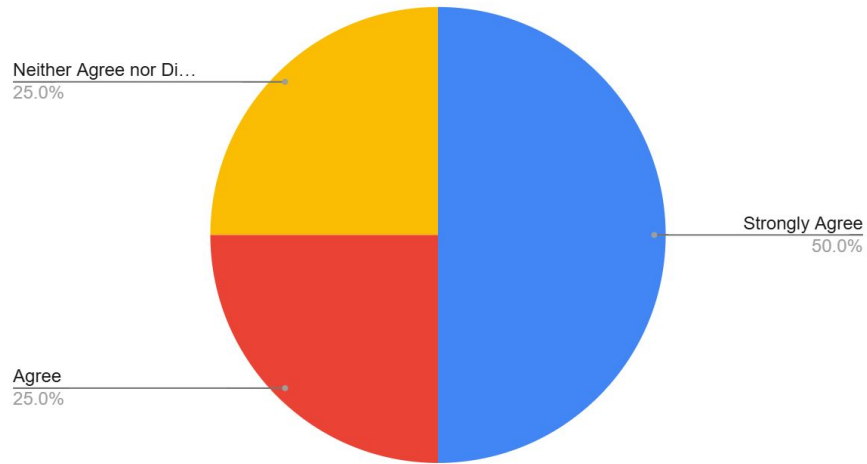


This meeting was productive in raising awareness, fostering discussion on relevant Doula topics, and/or promoting cross-system connections

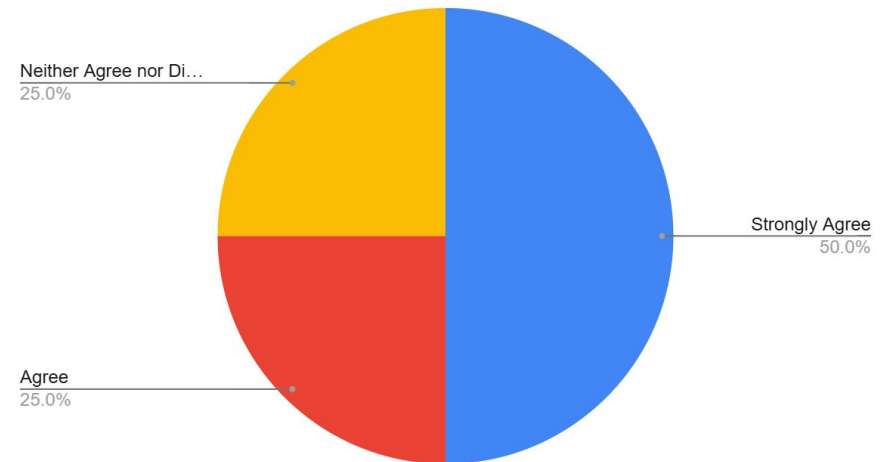


# Meeting Evaluation Responses (2 of 3)

Meeting members respected and abided by our group norms

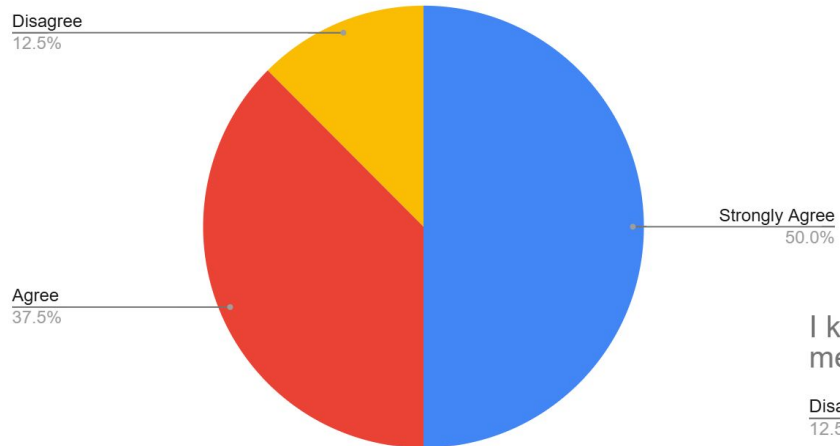


My contributions are both welcome and received openly

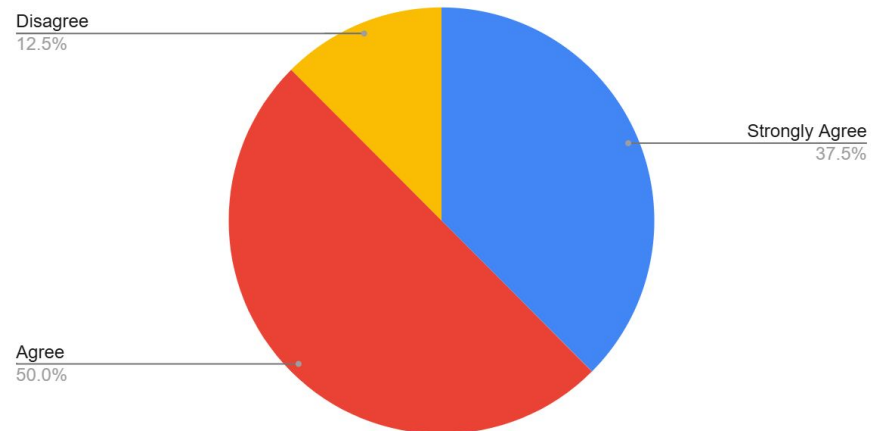


# Meeting Evaluation Responses (3 of 3)

I know how and when to contribute to meetings



I know how and when to suggest agenda items for Council meetings



# DAC Member Comments

- Revisit scope, clearly define goals, and include purpose and "so what" behind each agenda item.
- Timebox agenda items, and refer those that need more time (or not on the agenda) to the facebook group. Meetings could be way more efficient.
- Create a parking lot system for items not on the agenda.
- A process to surface and rotate speakers, ensuring equitable distribution of airtime across stakeholder types (doulas, systems, birthers, etc.).
- An option for written follow-up input when time constraints limit in-meeting discussion, especially for votes.
- 4 of the 8 respondents did not have any proposed changes.

# Proposed Process Changes Based on DAC Feedback

- Agendas and slides will be sent in advance, and any DAC member can share proposed agenda items at any time.
- Facilitators will keep the group to time and agenda items, and will help identify the need for individuals to step up/step back. This may require the facilitator to interrupt. Additional discussion (parking lot or items that did not have enough time) will be referred to the Facebook group.
- Revisit Scope & Goals
  - This group will focus primarily on providing advice to HCPF on how to best navigate existing process, and remove obstacles for members and doulas, given current policy.
  - Recommendations about policy changes can still be made for consideration by HCPF. We will not vote on any recommendations without advance notice to members. The Facebook group will be utilized for discussions. We will vote via google form after the meeting, which allows members time to explore the issue with their communities and provide information along with their responses. ***Reminder: recommendations do not change current Medicaid policy, but will be considered for future changes. No changes to current policy will happen without advance notification from HCPF.***



# Any questions or concerns?

# CPR Recommendation Summary

Motion: Recommend that the CPR requirement be removed. If it isn't removed, we would like to suggest that HCPF increase information about which CPR course meets the requirement and what low-cost or no-cost options are available to help expand access for Doula's to enroll.

Updated Voting: Approximately half of the group supported the motion, about one quarter does not support and about one quarter abstained. Everyone agreed that a list of CPR courses and reducing barriers would be useful.

Recommendation Detail	
In favor	Opposed
<ul style="list-style-type: none"><li>• This should not be a requirement, because it is not a requirement for other non-medical providers (such as behavioral health and CHW's).</li><li>• There are some concerns about scope of practice, as well as doing CPR with pregnant individuals.</li><li>• Neonatal resuscitation is a clinical skill set.</li><li>• Cost and accessibility are a barrier, particularly for folks with lower income or language barriers.</li></ul>	<ul style="list-style-type: none"><li>• This is a simple, life-saving measure and everyone who works with individuals in their homes should have it.</li><li>• There are ways to increase accessibility that we can work on to reduce barriers.</li><li>• This protects Medicaid members, who should not be subject to lower standards.</li></ul>

# Liability Insurance Recommendation Summary

Motion: We recommend that HCPF remove the requirement of liability insurance for Doulas. While that removal is in process, we recommend that HCPF list the liability insurance providers on the website.

Updated Voting: More than half of the group supported the motion, three people do not support and about the rest abstained. Everyone agreed that more information about liability insurance would be helpful.

Recommendation Detail	
In favor	Opposed
<ul style="list-style-type: none"><li>• There are scope of practice concerns with liability insurance.</li><li>• The cost of liability insurance is a significant barrier.</li><li>• It is unclear what the benefit of liability insurance is, given the role of the Doula.</li></ul>	<ul style="list-style-type: none"><li>• Liability insurance protects the doula.</li><li>• Medicaid members should not be subject to removal of standards.</li><li>• There may be ways to support increased access, without removing the requirement.</li></ul>

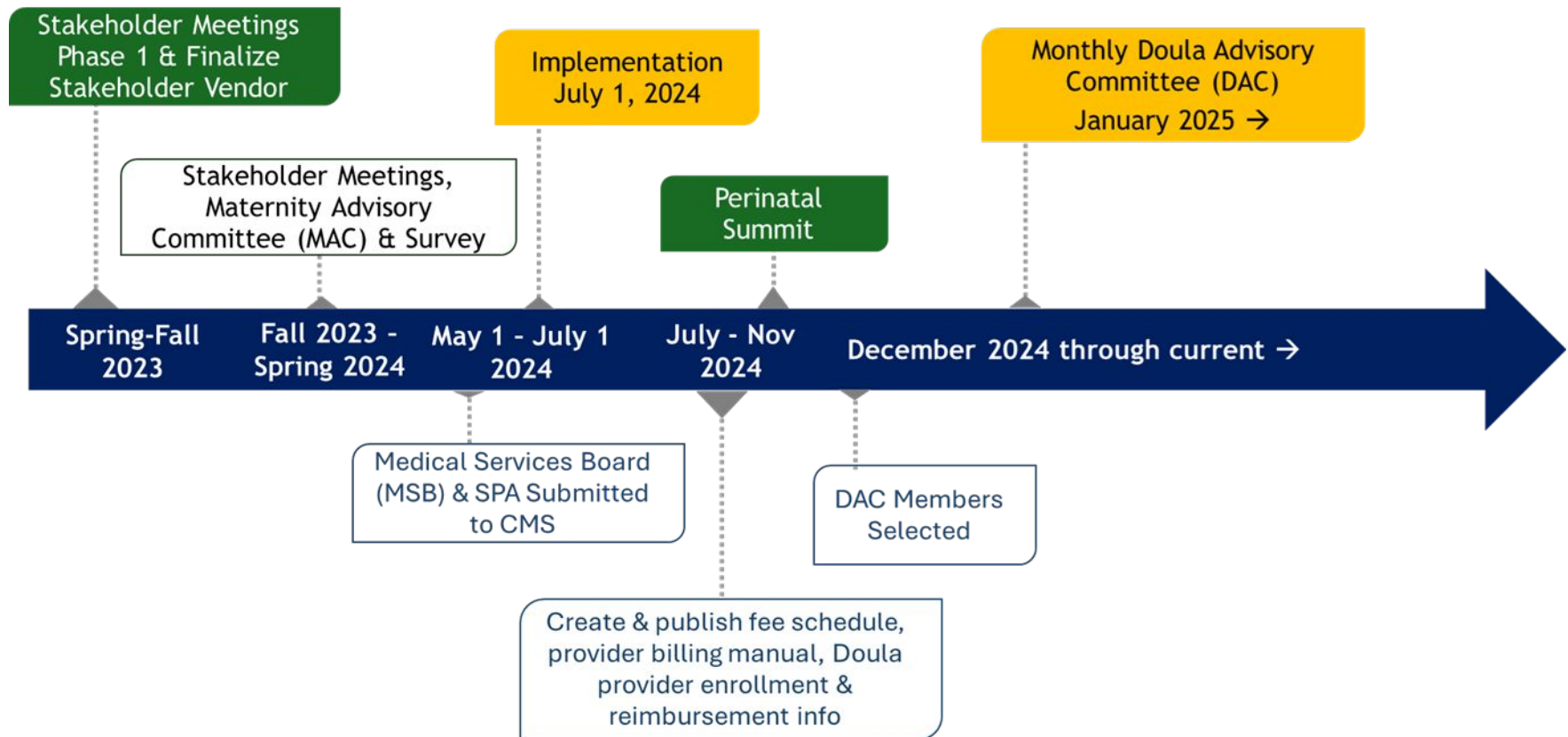
# HCPF Response

- At this time, HCPF is not changing current policy.
- This information will be included as part of the evaluation process in the future. This data will be complemented by additional information from Medicaid members, doulas, and other stakeholders.
- If any adjustments are considered, all stakeholders will be notified ahead of time to allow for preparation and consideration to adapt processes.
- In the short term, HCPF will work with partners to compile lists of resources to make available to the doulas, regarding CPR options. There are opportunities for doulas to continue to share information on liability insurance options with HCPF. Specific information on insurance companies, dates, cost, denials, etc. would be helpful.
- If you have more information that has not already been shared, please feel free to share directly with HCPF at [hcpf\\_maternalchildhealth@state.co.us](mailto:hcpf_maternalchildhealth@state.co.us).

# Recap



# Key milestones: Health First Colorado (HFC) Doula benefit



[Stakeholder Engagement Report](#)

# Quick recap

The Department created the DAC to gather diverse input on topics related to the Health First Colorado Doula benefit, with the goals of:

- Increasing Health First Colorado (HFC) Members' access to the Doula benefit,
- Improving HFC Members' birthing experiences and outcomes, and
- Listening to DAC recommendations to improve the Doula benefit while balancing diverse views and working within budget limits and regulatory requirements.

# What are the roles and responsibilities for the DAC?

## DAC Members:

- Read all required materials to prepare for meetings
- Participate actively in 4+ DAC meetings between now and June
- Respect and consider varying perspectives, asking questions to understand differing viewpoints.
- Serve as ambassadors for the program, fostering awareness and support in their communities.

## GPS Facilitators:

- Organize, structure, and facilitate committee meetings to ensure productive discussions.
- Foster a respectful and open environment that values diverse perspectives.
- Capture meeting summary notes, decisions, and action items.

## Health Care Policy & Financing:

- Act as the primary point of contact for committee queries and clarifications.
- Use DAC input, feedback, and insights for Health First Colorado Doula program to make the processes better.
- HCPF is the insurer.

# DAC responsibilities recapped

## *In scope*

Related to Health First Colorado (HFC)  
Doula benefit:

1. Participate in the discussions
2. Offer your opinions, ideas, and feedback
3. Ask questions to understand the issues and challenges better
4. Represent the voice of people in your community
5. Collaborate to find common ground and make informed decisions

## *Out of scope*

1. Making policy and budget decisions for the HFC Doula benefit
2. Promulgate rules
3. Speaking on behalf of HCPF

# Department Presentation: NPI Referrals

*Goal for the discussion: To get input on how to best support Doulas and Members in getting referrals from an approved healthcare provider.*



# What is the NPI?

- The **National Provider Identifier Standard (NPI)** is a unique number that is assigned to healthcare providers in the US.
- Individual health care providers **MUST** use the NPI in administrative & financial transactions covered by HIPAA.
- Doulas are required to have their own NPI, **AND** are required to have a referral from an eligible healthcare provider with an NPI.

Resources:

[NPI Final Rule](#) (federal register)

[Colorado House Bill 18-1282](#)

# Why do I need a referral NPI?

An NPI number is federally mandated by Centers for Medicare and Medicaid (CMS) for State Medicaid ordering or referring providers for:

- Claims and encounter information
- Claims status
- Coordination of benefits
- Eligibility, enrollment, and disenrollment
- Payment and remittance
- Referrals and authorizations

[Add or update NPI in the Provider Portal](#)

# How does NPI relate to Health First Colorado Doula Services?

All claims for HFC Doula services must have:

- NPI number of the provider who ordered or referred the services on the claim
- In the HFC Provider Web Portal, the field is labeled “Referring Provider”

For more information, go to the [Doula Billing Manual](#)

The enrolled provider types who may recommend these services are:

- Physicians (PT 05, 65)
- Physician Assistants (PT 39)
- Advanced Practice Nurses (PT 41)
- Nurse Midwife (PT 22)  
Certified Professional Midwives/Direct Entry Midwife (PT 69)
- Licensed Psychologist (PT 37) and Licensed Behavioral Health Clinician (PT 38)

# DAC discussion topics

1. What are the most common issues or errors encountered related obtaining the NPI for referrals?
2. What is working well in your community in receiving a referral?
3. What information or tools (e.g., template) will help Members/Doulas with referrals?
4. What could be done to help create awareness amongst providers of the NPI referral process?



# DAC Brainstorm



# Brainstorm purpose

**Generate awareness** of the Health First Colorado (HFC) Doula benefit by identifying:

- Ways to effectively reach HFC members
- Feasible outreach strategies to other Doulas to encourage enrolling in HFC
- Key messaging - what resonates
- Opportunities for partnering with community organizations

[Let's visit the virtual whiteboard!](#)

# Reminders

**DAC meetings are from 12:00 - 2:00 p.m. and cover topics related to Health First Colorado Doula benefit**

1. Wednesday, May 14 (**2<sup>nd</sup> Wednesday**)
  1. HFC Hub update
  2. Billing and reimbursement
2. Wednesday, June 18
  1. Doula Data Dashboard and Outcomes
  2. Evaluate the DAC
  3. Discuss what's next
3. DAC members, please complete the [April Meeting Evaluation Form](#)

For more resources, visit the Department's [Doula webpage](#)



# Public Comment

# Public Comment

Please...

1. Drop your name into the chat.
2. Wait to speak until the facilitator calls your name.
3. Make your comments within the requested time limit to allow other time to speak.

Reminder: written comments are also welcome at [hcpf\\_maternalchildhealth@state.co.us](mailto:hcpf_maternalchildhealth@state.co.us)

# Next Steps

- Please fill out the [April Meeting Evaluation Form](#). This feedback will be used to improve future meetings.
- GPS will send a follow-up email to the DAC in the coming days.
- Our next DAC meeting will be on May 14 from Noon - 2:00 p.m.
- 

For all other feedback, please contact Erin at [erin@governmentperformance.us](mailto:erin@governmentperformance.us) or the HCPF team at [hcpf\\_maternalchildhealth@state.co.us](mailto:hcpf_maternalchildhealth@state.co.us)

# Thank you!





# Government Performance Solutions, Inc. (GPS)

[www.governmentperformance.us](http://www.governmentperformance.us)

# Additional Resources



# Department resources

- [Doula webpage](#)
- [FAQs](#)
- [Provider enrollment portal](#)
  - [Provider Training](#)
  - [Provider help](#)
- [Updated Billing Manual](#) - to bill for birth, must be in attendance at labor and delivery
  - For questions about claims or guidance with billing, call:  
**1-844-235-2387**

# Doula scholarships

For more information on the Doula scholarship opportunities, contact the 3 organizations to learn more about the scholarship program.

[Peaceful Birth Company](#) - [contact@peacefulbirthcompany.com](mailto:contact@peacefulbirthcompany.com)

[Rocky Mountain Doula](#) - [rockymtndoula@gmail.com](mailto:rockymtndoula@gmail.com)

[Roots Family Center](#) - [Crystal@rootsfamilycenter.org](mailto:Crystal@rootsfamilycenter.org)

[2024 CO Stakeholder Engagement Sessions Report & Findings.pdf](#)

# Doula enrollment tips

Step 1: Acquire a National Provider Identifier (NPI)

Step 2: Gather Necessary Documents and Information & Review Forms for doulas

Step 3: Complete the Application

Step 4: Complete the Background check

For additional details, please refer to the [Quick Enrollment Guide](#)

# Compensation for DAC members

- Compensation for attending monthly meetings is available for people who are not otherwise compensated for their participation.
  - DAC members may receive a \$50 gift card (\$25/hour) for each 2-hour meeting they attend.
  - Gift cards will be sent electronically through email. You can choose from a list of where the gift card will be from.
- Please review the Compensation FAQ emailed to you with more information.
- If you are interested in compensation for your email [hcpf\\_maternalchildhealth@state.co.us](mailto:hcpf_maternalchildhealth@state.co.us) email with a copy of your W9.
- Reach out to that same email with any questions.

# Colorado Senate Bill 23-288

## SB 23-288

- **Expansion of Doula Services** - The bill aims to increase access to Doula services for Health First Colorado Members in Colorado to improve maternal and infant health outcomes.
- **Federal Authorization & Actuarial Review** - By July 1, 2024, the Department of Health Care Policy and Financing must seek federal approval to offer doula services to those at higher risk of poor birth outcomes.
  - An independent entity conducts an actuarial review of the potential costs and benefits of including Doula services in health plans.
- **Funding & Reporting** - The Department must produce annual reports required on program utilization, outcomes, and cost-effectiveness.

# Aspects to keep in mind

1. **Budget Limitations** - Restricted by federal and state budgets, often lacking sufficient funds.
2. **Federal & State Regulations** - Bound by strict rules that limit flexibility.
  - **Eligibility Requirements** - Define service, provider, and member criteria.
3. **Provider Availability** - Limited number of healthcare providers accepting Health First Colorado.
4. **Political Pressures** - Must balance diverse stakeholder interests and priorities.

# Share DAC boundaries

The overarching goal of the DAC is to increase access to Doula services for Medicaid members, and this group will focus on making recommendations to HCPF regarding program administration to that end.

## *What the DAC will do*

The DAC will share advice as a group to the Department of Health Care Policy and Financing regarding the Doula benefit for Medicaid in Colorado, regarding:

1. Functions
2. Programs
3. Services

## *What the DAC is not*

1. The DAC is not a decision-making authority
2. The DAC cannot promulgate rules, or make Federal or State Policy changes
3. DAC members do not speak on behalf of HCPF