

# How to

## Request Insurance Reimbursement for Doula Services

**1** Pay Your Doula in full, then get an invoice from her which includes the following information:

- a.) The Doula's name and address.
- b.) Her social security number/taxpayer ID number or NPI number.
- c.) The date and location services were provided.
- d.) The CPT code for the services provided:
  - Birth Doula (99499), this is a nonspecific code described as "Evaluation and Management Services" and can be applied to the prenatal, birth and postpartum periods when coupled with the appropriate diagnosis codes.
  - Postpartum Doula services (99501 and/or 99502/and or 59430)  
According to this "the CPT code 59430 is also an unspecific code described as "General Postpartum Care" and can be applied to the postpartum period when coupled with the appropriate diagnosis code."
- e.) A diagnosis code. The diagnosis code typically used for prenatal and labor support is V22.2 "Pregnant State Incidental." The diagnosis code typically used for postpartum is V24.2 "Routine Postpartum Follow Up."
- f.) The Doula's signature.



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**2**

Submit the invoice with a claim form to your insurance company. The standard claim form that is usually used is (HCFA-1500). However your provider may have a different form and they should be able to provide you with the necessary form.

**3**

Within four weeks, expect a letter telling you either that:

a.) They need more information before they can process your claim.

b.) This is not a covered expense.

**4**

Ask your Doula to send you the following:

a. A copy of her certification (if she is certified)

b. Other credentials or relevant training

c. A letter detailing her training and experience and what she did for you

**5**

If possible, ask your obstetrician or midwife for a letter explaining why a doula helped you, was necessary, or saved the insurance company money. (Did you have a high-risk pregnancy? Did the doula's suggestions appear to prevent complications or help your labor to progress more quickly? Did the doula's presence decrease your need for expensive pain medications?)



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- 6 Write a letter explaining why you felt the need for a doula and how you believe the doula was beneficial to your health.
- 7 Submit to your insurance company: the doula's letter and credentials, the letter from the doctor and your cover letter.
- 8 If they refuse it, write a letter to Health Services requesting that they review the claim, as you feel it was a cost-cutting measure and they should cover the cost.
- 9 If possible, ask your obstetrician or midwife for a letter explaining why a doula helped you, was necessary, or saved the insurance company money. (Did you have a high-risk pregnancy? Did the doula's suggestions appear to prevent complications or help your labor to progress more quickly? Did the doula's presence decrease your need for expensive pain medications?)
- 10 Follow up by telephone if necessary.
- 11 If they refuse, write a letter to the CEO explaining why you feel that doula care should be a covered expense. They may not pay your claim, but they will consider it for the future. (Kelli Way, ICCE, CD(DONA) 1998. Reprinted with permission.)



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