

Doula Billing Quick Reference Guide

Important Contact Information

| Service Name | Product | Phone Number | Hours of operation |
|--------------------------|--------------|---|---|
| Provider Services | All products | 1-844-477-8313 | Monday-Friday from 8 a.m. to 8 p.m. Eastern |
| Pharmacy Services | All products | 1-800-460-8988 , option 2 | 24 hours a day, 7 days a week |
| Member Services | CMS | 1-866-799-5321 | Monday-Friday from 8 a.m. to 8 p.m. Eastern |
| Member Services | MMA, SMI | 1-866-796-0530 | Monday-Friday from 8 a.m. to 8 p.m. Eastern |
| Member Services | CWSP | 1-855-463-4100 | Monday-Friday from 8 a.m. to 8 p.m. Eastern |

Verifying Member Eligibility

These suggestions are not a guarantee of coverage.

- Verify member eligibility by using the [Sunshine Health Secure Provider Portal](#).
- Using the portal, any registered provider can quickly check member eligibility by indicating the date of service, member name and date of birth, or the Medicaid ID number and date of birth.
 - Ensure you're selecting the correct plan type.
- Alternatively, you can call Provider Services at [1-844-477-8313](tel:1-844-477-8313). Supply the member's name and date of birth or the member's Medicaid identification number and date of birth.

Authorizations

Doula services **do not** require prior authorization.

Referrals

Doulas receive referrals from Primary Care Physicians (PCP's) and Obstetrical and Gynecology (OB/GYN) providers. Members can find a doula using the [Find a Provider tool](#).



Utilization Management

Utilization Management Phone number: [1-844-477-8313](tel:1-844-477-8313) and follow prompts for services required.

- **Standard hours of operation:** Monday to Friday from 8 a.m. to 8 p.m. Eastern.
- **Weekend and After-Hours on Call-Numbers:** (all products) [1-844-477-8313](tel:1-844-477-8313).

Claims

Covered Services

- Birthing classes
- Lactation classes
- Parenting classes
- In-person labor support at birthing locations
- Prenatal and postpartum education
- Unlimited Doula support through pregnancy, postpartum and newborn care
- Text, email and phone support between visits
- 24/7 on-call support at 37 weeks gestation until birth
- Visits can be held in a member's home, or at a doctor's office or public space

Description of the Specialty: Sunshine Health covers doula services for members' ages 13 and older with the goal of improving the mother's well-being, while improving quality of birth outcomes, reducing pre-term births and improving prenatal and post-partum care, including lactation counseling. Prior authorization is **not** required.

Billing: The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply subscriber coverage or provider reimbursement. The codes listed below are not a complete list. Please refer to your contract with Sunshine Health to determine all contracted/covered codes for each membership.

| Doula Expanded Benefit Codes | | |
|-------------------------------------|--|---|
| CPT/HCPC/Rev Code | Procedure Code Description | Modifier |
| S9442 | Birth classes, non-physician provider, per session | No Modifier |
| S9443 | Lactation classes, non-physician provider, per session | No Modifier |
| S9444 | Parenting classes, non-physician provider, per session | No Modifier |
| S9445 | Prenatal education (patient education non classified, non-physician) Postpartum education (patient education non classified, non-physician) | FP, TS, U1 |
| S9446 | Prenatal patient education, not otherwise classified, non-physician provider, group, per session Postpartum patient education, not otherwise classified, non-physician provider, group, per session | TS, FP, or No Modifier |
| 59400 | Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care | UB, XU, UC, or No Modifier |
| 59409 | Doula support for vaginal delivery only | No Modifier, SB, UB, UC, GB, SU, XU, CG, 59 |
| 59510 | Standard doula benefit with support at cesarean delivery; Global code: routine obstetric care including antepartum care, C-section delivery, and postpartum | No Modifier, UB, UC, XU, 22 |
| 59514 | Doula support during cesarean delivery only. 1 per delivery | No Modifier, GB, CG, UA, UB, UC, XU |
| 59610 | Standard doula benefit with support at VBAC delivery; Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care, after previous cesarean delivery codes used | No Modifier, XU, 22 |
| 59612 | Doula support for VBAC delivery only, with or without episiotomy and/or forceps | CG, GB, XU |
| 59618 | Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care, after failed attempt at vaginal delivery after cesarean. | No Modifier, UB, UC, XU |
| 59620 | Doula support for cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery | No Modifier, CG, GB, UB, UC, XU |

*Please refer to the Medicaid Fee Schedule, and the Billing and Procedure Coding Guide for a list of approved modifier codes.



Important Links

- [Provider General Handbook \(PDF\)](#)
- [Sunshine Health Provider Billing Manual \(PDF\)](#)

Timely Claim Submission

Providers must submit claims in a timely manner as indicated in the following table.

| Initial Claim* | | Reconsiderations or Claim Dispute** | | Coordination of Benefits*** | |
|----------------|-------------------|-------------------------------------|-------------------|-----------------------------|-------------------|
| Participating | Non-Participating | Participating | Non-Participating | Participating | Non-Participating |
| 180 days | 365 days | 90 days | 180 days | 90 days | 90 days |

*In an initial claim, days are calculated from the date of service to the date received by Sunshine Health.

**In a reconsideration or claim dispute, days are calculated from the date of the explanation of payment/correspondence issued by Sunshine Health to the date the reconsideration is received by Sunshine Health.

***For coordination of benefits, days are calculated from the date of explanation of payment from the primary payer to the date received by Sunshine Health.

Process for Claims Reconsiderations and Disputes

All requests for corrected claims or reconsiderations/claim disputes must be received within 90 days from the date of the original explanation of payment or denial.

Prior processing will be upheld for corrected claims or claim disputes received following the 90-day period unless there is a qualifying circumstance and appropriate documentation to support the qualifying circumstance.

Qualifying circumstances may include:

- A catastrophic event that substantially interferes with normal business operation of the provider or damage or destruction of the provider’s business office or records by a natural disaster
- Provider documentation showing member refused or was unable to provide member identification card and provider was unaware the member was eligible for services at the time services were rendered

Claim Payment Disputes

(Related to untimely filing, incidental procedure, unlisted procedure code)

Sunshine Health

Attn: Adjustments/Reconsiderations/Disputes

P.O. Box 3070

Farmington, MO 63640-3823



Provider on Behalf of Self – Medical Appeals

- Providers can request an appeal for the following types of denials:
 - No authorization claims denials.
 - Authorization denials due to member not meeting medical necessity authorization denials and medical necessity, in addition to, benefits exhausted and non-covered procedures.

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Provider Changes

Adding Providers to Existing Group or Practice

- A contracted medical or behavioral health practice that would like to add a practitioner should email all relevant documentation to practitioneradds@Centene.com and include the following:
 - List of Affiliated Providers (LOAP)/Practitioner Roster (for additions only)
 - Disclosure of Ownership Form
 - Access our [LOAP \(roster\) template](#) to utilize as a guide when submitting these types of requests.
- The Practitioner Adds Mailbox is equipped with an Auto Response Email to alert the submitter that their request has been received.

Demographic Updates and Changes

- A contracted medical or behavioral health practice that would like to update or make any changes to their demographic information should direct their request to SunshineProviderRelations@SunshineHealth.com.
- Please include all detailed information to assist in making the appropriate changes.
- Providers can also initiate changes like this by visiting our [Secure Provider Portal](#).
 - These changes can be made by selecting “Modify Demographic Information about a specific TIN.”
- Providers can also submit their request via the [Contact Form](#).

Provider Terminations

Providers should refer to their contracts for specific information about terminating their contracts with Sunshine Health.

In general, providers are required to notify the health plan within 90 days of terminating a provider or providers from a group or contract. Providers who want to terminate an individual practitioner within a practice or group should:



1. Provide the termination information on office letterhead and include the practitioner's name, tax identification number, NPI, termination date and membership transfer information, if applicable; AND
2. Email the request to SunshineProviderRelations@SunshineHealth.com and notify your Provider Relations Representative.

Remittances and PaySpan

Access explanation of payment statements (EOPs), change bank account information register for electronic funds transfers.

If you are currently receiving paper checks and would like to register for EFT, please view a copy of a current paper check. It should contain a Payee ID. This is the Plan Number which will be needed when registering.

- The registration for PaySpan is easy and it only takes a few minutes.
- Visit [PaySpan](#), call [1-877-331-7154](tel:1-877-331-7154) or email providersupport@payspanhealth.com.
- If your address is incorrect in PaySpan, please update to the correct address. Also, contact Sunshine Health at [1-844-877-8313](tel:1-844-877-8313) to update your address in our systems.

Case Management

Our Case Management team can be reached Monday to Friday from 8 a.m. to 8 p.m. at the phone numbers below. For after hours or weekend assistance, use option 7.

- Children's Medical Services (CMS) Specialty Plan: [1-866-799-5321](tel:1-866-799-5321), option 2.
- Medicaid (MMA) and Serious Mental Illness Specialty Plan (SMI): [1-866-796-0530](tel:1-866-796-0530), option 2.
- Child Welfare Specialty Plan (CWSP): [1-855-463-4100](tel:1-855-463-4100), option 2.

24-Hour Nurse Advice Line

The Nurse Advice Line can assist providers with checking member eligibility. It can also connect members to telemedicine for urgent care visits. Hours of operation are 24 hours a day, 7 days a week.

- CMS Health Plan: [1-866-799-5321](tel:1-866-799-5321) and follow prompts for Nurse Advice Line, Option 1, then Option 7.
- MMA and SMI: [1-866-796-0530](tel:1-866-796-0530) and follow prompts for Nurse Advice Line, Option 1, then Option 3, then Option 7.
- CWSP: [1-855-463-4100](tel:1-855-463-4100) and follow prompts for Nurse Advice Line, Option 1, then Option 2, then Option 7.

Telemedicine

- Members have 24/7 access to receive services virtually through our telehealth vendor, [Teladoc](#). Members can also download the Teladoc app or call [1-800-TELADOC](tel:1-800-TELADOC).
- Providers may furnish and receive payment for covered eligible telemedicine services in accordance with this policy and the provider's scope of practice.



Additional Resources:

Access and Availability Timeframe Standards:

Sunshine Health establishes and assesses compliance with appointment wait times for various types of visits. Please view our [Access and Availability Timeframe Standards \(PDF\)](#).

Find A Provider (FAP) Tool

If you need assistance locating a specialist or facility for a member, please visit our [Find a Provider Tool](#). Here you will be able to search by provider name, NPI and specialty type.

Find My Administrator

Locate your [Provider Engagement Administrator](#).

Community Resources

Our [Sunshine Health Community Resource Database](#) connects members and caregivers in need with local programs and supports.

For Providers Page

Stay up to date on provider communication by visiting our [For Providers](#) landing page and [Provider News](#).

Vendors Page

Contact information for [Sunshine Health's subcontractors and vendors](#).