



DOAA

Georgia Department
of Audits & Accounts

Greg S. Griffin
State Auditor

January 10, 2025

Honorable Park Cannon
State Representative
607-H Coverdell Legislative Office Building
Atlanta, Georgia 30334

SUBJECT: Fiscal Note
House Bill (LC 33 9738)

Dear Representative Cannon:

This bill would require the Department of Community Health (DCH) to develop, implement, and report on a pilot program to provide Medicaid coverage for doula care for pregnant Medicaid recipients. This program would provide reimbursement for up to five doula visits for each pregnant Medicaid recipient, which may include visits for prepartum care, labor and delivery, and postpartum care, at a reimbursement rate of up to \$700.00 per visit.

Data from DCH indicates that the bill would have a state cost ranging from \$21.8 million to \$66.8 million (**Table 1**), depending on the cost of the pre- and post-natal visits. The lower amount assumes that the cost of those visits is the same as the average paid by other states that cover doula services, while the higher cost assumes the \$700 per visit that is permitted by the bill. The FMAP used for the state/federal cost share split was the blended FY 2025 of 66.0025%.

Table 1: Additional Costs for LC 33 9738

	Cost Based on Average	Max Cost Under Bill
Cost for delivery visit	\$700*	\$700
Cost per pre/postnatal visit	\$110*	\$700
Number of pre/post-natal visits	4	4
Cost per member	\$1,139	\$3,500
Covered Births	56,148	56,148
Projected Annual Cost	\$63,980,442	\$196,518,000
<i>State Share</i>	\$21,751,751	\$66,811,207
<i>Federal Share</i>	\$42,228,691	\$129,706,793

Note: Numbers may not total due to rounding

*National average for 11 states (including Washington DC) was more than \$774 for delivery and \$110 for pre/postnatal visits. The maximum allowed under the bill, \$700, was used for the delivery visit.

It should be noted that the state does not currently recognize doula licenses in Medicaid. According to DCH, a State Plan Amendment (SPA) would be required, and the SPA would make the

reimbursement permanent instead of a pilot program. In addition, the state does not currently license doulas, which may be necessary for Medicaid reimbursement.

Respectfully,



Greg S. Griffin
State Auditor



Richard Dunn, Director
Office of Planning and Budget

GSG/RD/mb