



oklahoma
complete health[®]

Partnering for Better Care:

A Community-Based Doula

Guide for SoonerSelect Providers

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Introduction to the Oklahoma Complete Health Toolkit for Community-Based Doulas

Dear Doula Partner,

Welcome, and thank you for the vital role you play in supporting the health and well-being of pregnant women and their families. At **Oklahoma Complete Health**, we recognize the profound impact doulas have on maternal and child health outcomes (MCH), and we are honored to partner with you in this important work. **Oklahoma Complete Health** is part of the Centene Corporation, the leading provider of government-sponsored health care ensuring access to affordable and high-quality services through Medicaid, Medicare, and Marketplace to families across the United States.

This toolkit was created with you in mind. We understand that navigating health insurance processes can sometimes be complex, and our goal is to make your experience as smooth and supported as possible. To make this information accessible and actionable, the toolkit was designed as a digital guide with embedded links and downloadable PDF documents that can be referenced as needed. Inside, you will find step-by-step guidance on everything needed to work efficiently with pregnant members and their health insurance provider; from onboarding and communicating with the health plan to documentation and billing.

We value the compassionate care you provide to each member that meets their individual needs, and we are committed to minimizing barriers so you can focus on what you do best: caring for women and families during one of the most meaningful times in their lives.

This toolkit reflects our shared commitment to transforming the health of the communities we serve, one person at a time. Together, we look forward to building a strong, respectful, and collaborative relationship.



Here you will find resources that will help you streamline care for pregnant members.

Start Smart for Your Baby® and Care Management

WELCOME TO START SMART FOR YOUR BABY: PARTNERING FOR BETTER BIRTH OUTCOMES

Oklahoma Complete Health supports over 7,600 births each year, with more than 35% classified as high-risk. To improve outcomes for these families, we offer the Start Smart for Your Baby® (SSFB) program — an evidence-based maternity care management initiative that blends advanced data analytics with compassionate and whole-person support. SSFB is designed to identify risks early, coordinate care across disciplines, and provide personalized resources to support healthy pregnancies and postpartum experiences.

Care management is a structured, person-centered approach to coordinating healthcare and support services that addresses the medical, behavioral, and social needs of members. It aims to improve health outcomes, enhance quality of care, and reduce barriers by developing individualized care plans, facilitating access to resources, and ensuring continuity of care.

At **Oklahoma Complete Health**, care managers, registered nurses, or licensed clinical social workers play a vital role in Care Management and the Start Smart for Your Baby (SSFB) program by serving as trusted guides for members throughout their pregnancy journey. They assess each member's medical and social needs, connect them to essential services such as prenatal care, behavioral health, and social support, and develop personalized care plans tailored to individual circumstances. From the initial Notification of Pregnancy (NOP) through **12-month postpartum**, care managers maintain consistent contact with members to ensure continuity of care and to address evolving needs throughout the pregnancy and postpartum period. Doulas are vital partners in this model. Your ability to build trust, provide culturally responsive care, and advocate for pregnant members enhances the

care team's impact. By working closely with care managers, providers, social workers, and behavioral health professionals, you help ensure that care is not only clinically effective, but also person-centered and aligned with each person's values.

Your presence improves engagement and enhances satisfaction with the birth experience. To collaborate effectively with care managers, doulas are encouraged to:

Act as a bridge: Encourage members to communicate openly with their care management team or act as a bridge between the pregnant member and the health plan to ensure they are receiving available services and benefits that can improve care.

Engage early: When a pregnant member is identified, doulas can help ensure the NOP is completed and encourage members to enroll in SSFB.

Share insights: By having a close relationship with members during their pregnancy, doulas gain valuable insight into their needs, preferences, and challenges. Communicating these needs timely to care managers helps in building effective care plans.

Coordinate support: Work alongside care managers to align on care goals, reinforce health education, and connect members to resources such as transportation, housing, or mental health services.

Advocate for inclusive care:

Both doulas and care managers play a key role in identifying and addressing disparities in care. Your advocacy helps ensure every pregnant member receives respectful and inclusive treatment.



To work directly with
Care Managers at
**Oklahoma Complete
Health** please call
1-833-752-1664

Doula Activities to Support Maternal Child Health Core Key Performance Indicators (KPIs)

At **Oklahoma Complete Health**, we track maternal and child health outcomes using Core Maternal-Child and HEDIS (Healthcare Effectiveness Data and Information Set) KPIs. This section outlines how your existing practices align with these national quality measures. It also highlights opportunities to further support improved outcomes through targeted, evidence-based actions. The goal is to connect your day-to-day work with the broader data-driven efforts to improve maternal and child health.

CORE MATERNAL-CHILD HEALTH KPIS AND HEDIS MEASURES

Core Maternal-Child Health KPIs are standardized evidence-based performance measures used to track and improve the quality of care we provide. They focus on key aspects of patient care that are known to lead to better outcomes. This core set also includes HEDIS measures that are comprised of a set of standards that state governments use to measure and improve the quality of care. MCH KPIs and HEDIS Measures are reviewed annually.

CORE MCH MEASURES	
Metric Name	Definition
Severe Maternal Morbidity (SMM) Rate	Defined by the CDC as the unexpected outcomes of labor and delivery that result in significant short- or long-term health consequences. SMM events are identified by 21 indicators that include eclampsia, amniotic fluid embolism, and heart failure. SMM rate is defined as the number of SMM events per 10,000 hospital deliveries.
Maternal Mortality Rate	The death of a pregnant woman from conception to 12 months after the end of pregnancy. This can be defined as pregnancy-related , where the cause of death is related to or aggravated by pregnancy, or pregnancy-associated , where the death occurs in the specified timeframe, but it is not pregnancy-related. The Maternal Mortality rate is defined as the number of maternal deaths per 100,000 live births.
Infant and Neonatal Mortality Rate	Infant mortality is the death of a live-born infant within the first year of life. Neonatal mortality refers to the death of a live-born infant in the first 28 days of life. Rates are per 1,000 live births.
Preterm Birth Rate	The percentage of live-born infants delivered prior to 37 weeks gestational age.
Nulliparous Term Singleton Vertex (NTSV) Cesarean Section Rate	The percentage of first pregnancies (nulliparous) who are <u>low risk</u> that give birth by cesarean section. Low risk for this metric is defined as deliveries that are: • At full term (≥ 37 weeks) • A single baby (singleton) • In the head-down (vertex) position via C-section
Low Birth Weight Rate	Rate of infants weighing less than 5 1/2 pounds or 2500 grams at birth.
Neonatal Intensive Care (NICU) Admission Rate	The percentage of newborns admitted to the neonatal intensive care unit during the first 28 days of life.

CORE MCH HEDIS MEASURES	
Metric Name	Definition
Timeliness of Prenatal Care (PPC-1)	Prenatal Care. The percentage of live births that received a prenatal care visit in the first trimester, on or before the health plan enrollment start date, or within 42 days of enrollment in the health plan.
Postpartum Care (PPC-2)	Postpartum Care. The percentage of live births that had a postpartum visit on or between 7 and 84 days after delivery.

ADDITIONAL MCH MEASURES AND HEDIS MEASURES

In addition to the metrics listed in the Core MCH KPIs, other metrics related to maternity and women's health may be tracked. These include:

- Postpartum Diabetes Screening
- Syphilis Screening and Treatment
- ASCVD (Atherosclerotic Cardiovascular Disease) Risk Evaluation
- Neonatal Abstinence Syndrome (NAS)/Neonatal Opioid Withdrawal Syndrome (NOWS)
- Cervical Cancer Screening (CCS-E)
- Chlamydia Screening (CHL)
- Contraceptive Care – Postpartum women (CCP)
- Prenatal Immunization Rates (PRS-E):
- Prenatal Depression Screening and Follow-Up (PND-E):
- Postpartum Depression Screening and Follow-Up (PDS-E)
- Social Need Screening and Intervention (SNS-E)
- Well Child Visits (through duration of postpartum intervention) (W30)

DOULAS CAN SUPPORT THE MCH CORE KPIs AND HEDIS MEASURES BY:

- Encourage attendance at all appointments and discuss questions regarding pregnancy journey
- Assist in identifying providers and scheduling appointments if needed
- Attend appointments to assist with barriers to understanding plan of care (e.g., language, literacy, and cultural barriers)
- Educating on maternal mental health
- Educate on all aspects of pregnancy, labor, delivery, postpartum, infant care, and transition to parenthood
- Encourage self-advocacy
- Refer to health plan care management department for additional resources and education
- Assist with social drivers of health needs (SDoH) (e.g., transportation, childcare resources, and food)

Your presence, advocacy, and care can help pregnant members feel informed, respected, and empowered throughout their pregnancy, birth, and postpartum journey. By understanding how your work fits into the bigger picture, you can strengthen your practice, support more effectively, and help advance inclusive care in maternal and child health.

Doula Insurance Coverage Benefit

INTRODUCTION TO DOULA BENEFITS

Health plans use the word “benefit” to describe a service that is paid for by the insurance company. Recognizing the profound impact doulas have on maternal and child health outcomes, many health plans now offer a doula benefit — a covered service designed to improve access to competent, continuous, and compassionate care. This is designed to help you understand how the doula benefit is defined, accessed, and utilized within our health plan. To help you understand how the doula benefit is defined, accessed, and utilized within our health plan, the below table outlines services covered and billing codes used.

This benefit may be covered by:

Expanded Benefit

- Health plans can include doula benefits as a supplemental or additional benefit. This allows reimbursement for specific services (e.g., prenatal visits, labor support and postpartum care).

Covered Service through Medicaid

- Inclusive doula services as a reimbursable benefit under the state’s SoonerSelect program.

Fee for Service

- Health plans can reimburse doulas for each visit or event (e.g., prenatal visits, labor support and postpartum care) using designated billing codes.

Covered Services

Prenatal & Postpartum Visit Billing Codes

59899/HD: Other maternity care and delivery procedure other maternity care and delivery procedure

Labor & Delivery Care Billing Codes

59409/HD: Vaginal delivery only (with/out episiotomy and/or vaginal delivery only (with/out episiotomy and/or forceps)

59514/HD: Cesarean delivery only cesarean delivery only

59612/HD: Vaginal delivery after previous cesarean delivery vaginal delivery after previous cesarean delivery

59620/HD: Cesarean delivery following vaginal delivery attempt cesarean delivery following vaginal delivery attempt after previous cesarean delivery after previous cesarean delivery

Prenatal and Labor and Delivery Care Diagnosis Codes

Z32.2: Encounter for childbirth education encounter for childbirth education

Postpartum Diagnosis Codes

Z32.3: Encounter for childcare instruction encounter for childcare instruction

Claims Coding Reminders

- Verify applicable modifiers with Oklahoma Complete Health Provider Services prior to claim submission.
- HD modifier indicates doula services as defined by OHCA billing guidance.

Scope of Doulas within Managed Care

As our health plan increasingly recognizes the value of doula care in improving health outcomes and advancing inclusive care, it is important that we establish a shared understanding of the role doulas play across the care continuum. We understand that doulas provide a wide range of services to pregnant members.

SCOPE OF A DOULA

The scope of a doula's work is strictly non-medical and non-clinical, centered on providing emotional, physical, and informational support to pregnant women while complementing the care provided by physicians or midwives.

Doulas are encouraged to support births in collaboration with qualified healthcare providers and avoid attending unassisted births to help ensure the safety and well-being of all involved. To participate in care delivery, doulas must be enrolled as a provider with **Oklahoma Complete Health** and may be subject to training, certification, or credentialing requirements as determined by **Oklahoma Complete Health** or the state. The goal is to foster a strong partnership between doulas and care teams, with doulas working alongside care managers and other healthcare professionals to provide coordinated, person-centered care. Building this partnership involves clearly defining doulas' roles and scopes of practice, including them in care coordination teams, and supporting their continued training and development.

Understanding Covered Doula Services

This section outlines the doula services that are covered under our health plan. It is intended to provide a clear understanding of which services are eligible for reimbursement. Use this as a reference to ensure alignment with health plan guidelines and to support accurate documentation and billing.

COVERED DOULA SERVICES

Services include:

The Oklahoma Health Care Authority covers 9 visits plus labor and delivery.

• Labor and Delivery

- One visit is allowed and must be in person.

• Telehealth

- Allowable for prenatal and postpartum.

• Prenatal

- Four visits during the gestational period.

• Postpartum

- Four visits after delivery.



Understanding Non-Covered Doula Services

This section outlines services that are not covered by our health plan. It is intended to help identify which activities fall outside the scope of reimbursement. Awareness of non-covered services helps prevent claim denials and ensures pregnant members receive care within approved parameters.

NON-COVERED DOULA SERVICES

Services include:

- Meal preparation
- Housekeeping
- Shopping
- Childcare for other children
- Photography – still or video
- Placenta encapsulation
- Birthing ceremonies
- Group babywearing classes
- Massage
- Yoga
- Vaginal steams
- Belly binding after cesarean section
- Hypnotherapy
- Night Nurse

Doula services do not include diagnosis of medical conditions, provision of medical advice, or any type of clinical examination or procedure.

Doula Certification Requirements

Most state Medicaid agencies determine specific criteria for Doula certification. Managed Care Organizations (MCO) rely on certification to establish consistent standards of quality and professionalism across the field. Certification not only ensures that doulas meet essential benchmarks in knowledge, skills, and ethics, but also fosters trust among pregnant members, healthcare providers, and MCOs alike. The following covers the requirements for Doulas supporting **Oklahoma Complete Health**.

The national or **Oklahoma**-based doula training organizations currently recognized as meeting the curriculum standards can be found by visiting the website below:

<https://oklahoma.gov/ohca/providers/types/prenatal-and-perinatal-services/doula.html>



REQUIREMENTS FOR DOULA CERTIFICATION

- Be at least 18 years old
- Have a National Provider Identifier (NPI)
- Use the taxonomy number required by the state
- Possess a current certification

For the full list of requirements, visit:

<https://oklahoma.gov/ohca/providers/types/prenatal-and-perinatal-services/doula.html>

Enrolling As a SoonerSelect Provider

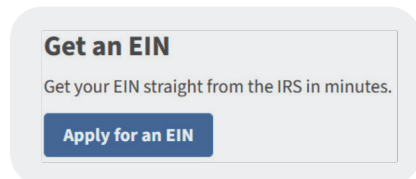
Being a SoonerSelect provider is a powerful way to champion inclusive health, deliver compassionate care to those who need it most, and make a lasting impact on the lives of vulnerable individuals and families in our communities. By completing the enrollment process, you ensure your services are recognized, reimbursed, and seamlessly integrated into the broader healthcare system, helping to close gaps in access and improve outcomes for under served populations.

STEP-BY-STEP ENROLLMENT PROCESS

1 Step 1: Apply for a Tax ID (EIN) number

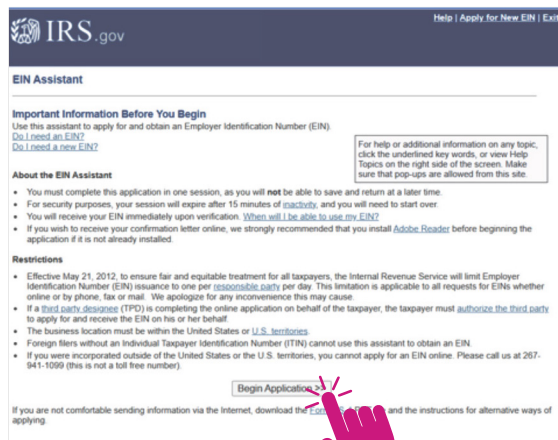
1. Go to the IRS Employer Identification Number (EIN) Application Page

- Visit: [IRS EIN Application](#)
- Click “Apply for an EIN”



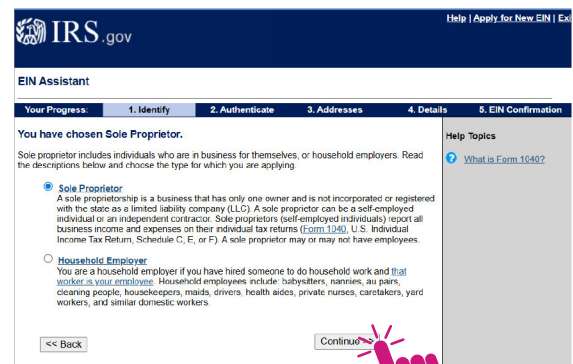
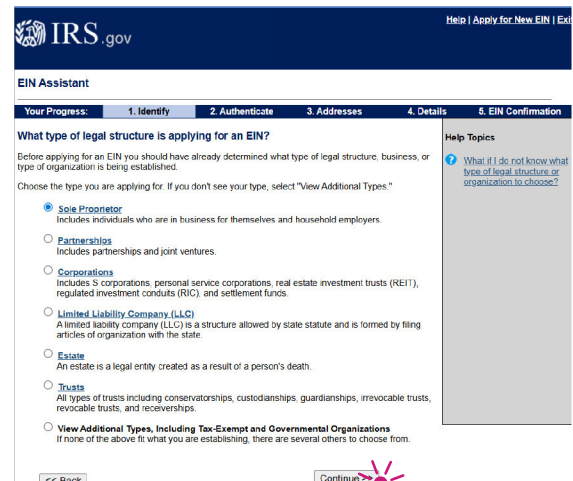
2: Begin the Application

- Click “Begin Application”
- You must complete the application in one session (it will time out after 15 minutes of inactivity)



3: Select Your Entity Type

- Choose “Sole Proprietor” (most doulas use this unless you’ve formed an LLC or other entity)
- Click Continue



4: Confirm Your Selection

Confirm your entity type and click “Continue”

IRS.gov Help | Apply for New EIN | Exit

EIN Assistant

Your Progress: 1. Identify 2. Authenticate 3. Addresses 4. Details 5. EIN Confirmation

Please confirm your selection.

Confirm your selection of **Sole Proprietor** as the type of structure applying for an EIN.

What it is...

- A sole proprietorship is a business owned by one individual.
- A sole proprietor can be a self-employed individual or an independent contractor.
- All business income and expenses are reported on the individual's federal income tax return.
- A sole proprietor may or may not have employees.

IMPORTANT: A sole proprietor may have only one EIN, regardless of the number of businesses you own or operate. If you already have an EIN, you must use that number for all of your sole proprietor businesses.

What it is not...

- The business cannot be incorporated or registered with the state as a limited liability company (LLC).

If you need to change your type of structure, we recommend that you do so now, otherwise you will have to start over and re-enter your information. Additional help may be found by reviewing [all types of organizations and structures](#) before making your selection.

<< Change Type Continue >>

5: Confirm Your Selection

Select why you are requesting an EIN

IRS.gov Help | Apply for New EIN | Exit

EIN Assistant

Your Progress: 1. Identify 2. Authenticate 3. Addresses 4. Details 5. EIN Confirmation

Why is the Sole Proprietor requesting an EIN?

Choose **one** reason that best describes why you are applying for an EIN.

- ☒ **Started a new business**
Select this option if you are beginning a new business.
- ☐ **Hired employee(s)**
Select this option if you already have a business and need to hire employees.
- ☐ **Banking purposes**
Select this option if the reason for applying for the EIN is strictly to satisfy banking requirements or local law.
- ☐ **Changed type of organization**
Select this option if you are changing the type of organization you currently operate, such as changing from a sole proprietor to a partnership, changing from a partnership to a corporation, etc.
- ☐ **Purchased active business**
Select this option if you are purchasing a business that is already in operation.

Continue >>

6: Enter Your Personal Information

Enter your name and Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN)

IRS.gov Help | Apply for New EIN | Exit

EIN Assistant

Your Progress: 1. Identify 2. Authenticate 3. Addresses 4. Details 5. EIN Confirmation

Please tell us about the Sole Proprietor.

* Required fields
Must match IRS records or this application cannot be processed.
The only punctuation and special characters allowed are hyphen (-) and ampersand (&).

First name *

Middle name/initial *

Last name *

Suffix (Jr, Sr, etc.) [Select One]

SSN/ITIN * - - -

Choose One: *

- ☐ I am the sole proprietor.
- ☐ I am a third party applying for an EIN on behalf of this sole proprietor.

Before continuing, please review the information above for typographical errors.

<< Back Continue >>

7: Provide Your Business Address

Enter your mailing address (it can be your home address if you don't have a business location)

8: Provide Details About Your Business

Legal name of your business (can be your name if you're a sole proprietor)

- Trade name or “Doing Business As” (DBA), if applicable
- Start date of your business

9: Choose Why You Are Applying

Select “Started a new business”

10: Answer Additional Questions

- You'll be asked if you plan to hire employees, file excise taxes, etc .
- Most doulas will answer “No” to these unless applicable

11: Choose How to Receive Your EIN

Choose to receive your EIN immediately online (PDF download) or by mail

12: Review and Submit

- Review all your information carefully
- Submit the application
- You will receive your EIN instantly if approved
- Download and save the confirmation letter for your records

Step 2: Apply for National Provider Identifier (NPI)

The NPI is an identification number that is unique to you. It is a 10-digit number used by Medicaid and Health Plans for administrative and to ensure reimbursement for services

Provider View – Initial Application

- Access <https://nppes.cms.hhs.gov>

- Select **Create or Manage an Account**

To obtain an NPI number

1: Access the Access and Identity Portal

2: Create a User ID and Password

Select: “Create a New Account”

Note: To finalize your User ID and Password, you need to verify your identity with an access code that is delivered to you by email or text.

- Complete** the NPI application in National Plan and Provider Enumeration System (NPPES)
- Select** “Registered User Sign In”
- Begin** the NPI Application

Provider View – Initial Application

- Once back at <https://nppes.cms.hhs.gov>, the user will sign in under **Registered User Sign In** to begin the initial NPI application.

3: Confirm Application Submission

Your NPI will be delivered by email from the NPPES team .

For a complete guide (Step by Step including screenshots) visit [I&A and NPPES](#)

Step 3: Enrolling with State Medicaid

Enroll with the Oklahoma Health Care Authority.

- Quick reference guide <https://oklahoma.gov/ohca/providers/provider-enrollment.html>.

Have the following information on hand to begin your application

- Certification documentation
- NPI
- Tax ID

2: If you have questions:

Call toll free (800) 522-0114, option 5 for
Provider Contracts

(Hours: 8 a.m. – 5 p.m. Mon., Tues., Thurs., Fri.,
and 1 – 5 p.m. Wed.)

3: You can also email the Oklahoma Health Care Authority at:

providerenrollment@okhca.org

Liability Insurance

As a doula, having professional liability insurance, also known as “errors and omissions insurance,” is an important step in protecting yourself and your practice and may be required by state Medicaid agencies. This type of insurance helps cover legal costs and potential damage if a pregnant member claims that your services were inadequate or caused harm.

Some states may use the term “malpractice insurance” when referring to liability insurance for doulas. It is recommended to speak to a professional who can provide advice that is relevant to you and your business regarding what insurance coverage is needed.



TYPES OF LIABILITY INSURANCE INCLUDE

Professional Liability Insurance

Covers claims that advice or support was given that caused harm to pregnant members.

General Liability Insurance

Protects from non-medical accidents or incidents that could happen while working with pregnant members.

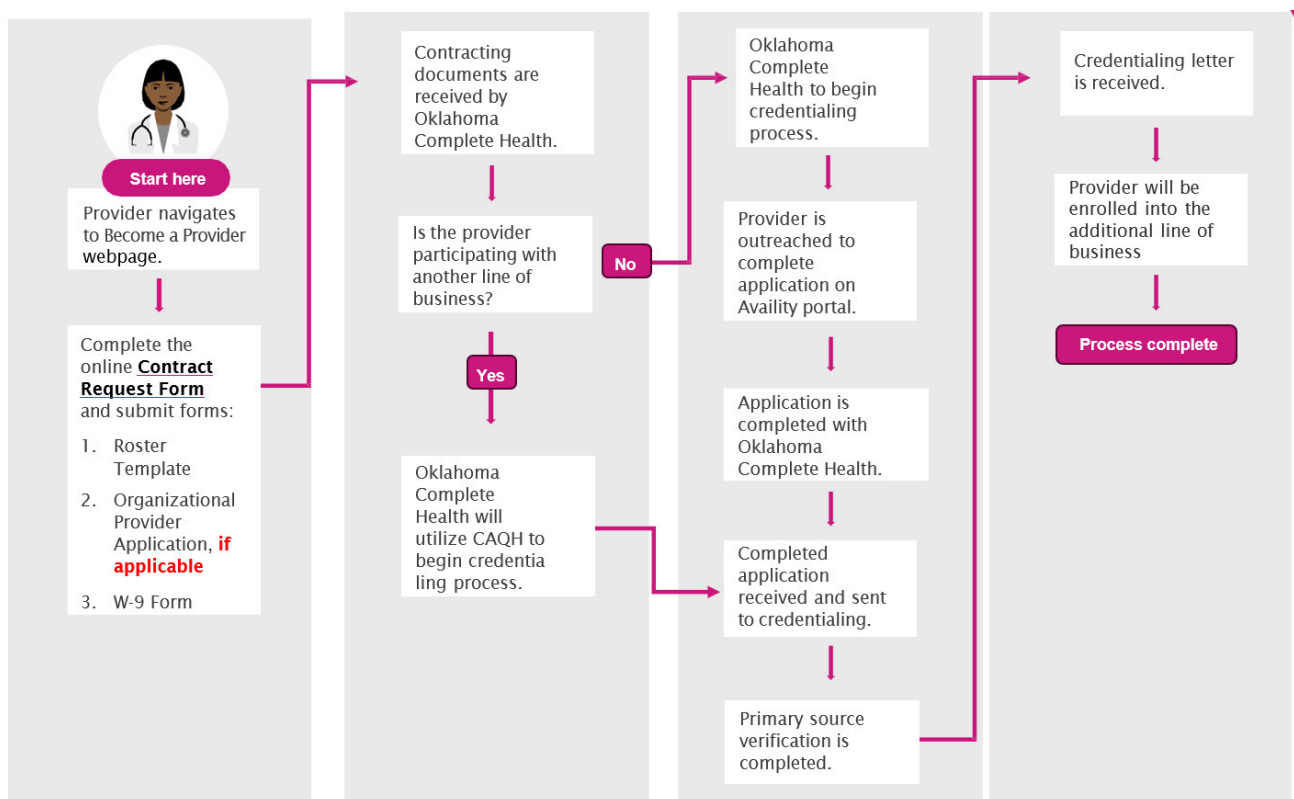
Please reach out to **Provider Relations** if you have questions.

Enrolling and Contracting as an Oklahoma Complete Health Provider

After receiving approval from Oklahoma Health Care Authority, doulas can apply to become a provider with **Oklahoma Complete Health**. Doulas who are interested in contracting with **Oklahoma Complete Health** can reach out directly to us at **1-833-752-1664** or visit website oklahomacompletehealth.com/providers/become-a-provider.html.

This section includes a step-by-step guide to help you navigate the enrollment process. You'll find helpful examples, and direct links to important resources, all designed to support you through each stage of the process.

Below is a step-by-step guide for doulas to enroll as an **Oklahoma Complete Health** provider



Becoming an **Oklahoma Complete Health** contracted doula opens the door to serving more families who need your care the most. By contracting with an insurance company, you gain access to a broader network of pregnant and postpartum members, many of whom may not otherwise be able to afford doula support. This not only increases your access to pregnant members and income potential but also helps reduce disparities in maternal health by making your services more accessible to under served communities. Whether you're just starting out or have years of experience, enrolling as an **Oklahoma Complete Health** provider is a powerful way to grow your practice and make a meaningful impact.

Oklahoma Complete Health Enrollment and Contracting

What to have ready:

- Licensing and Certification details
- National Provider Identifier (NPI) number
- W-9
- Medicaid ID
- Proof of insurance

Contract Request for **Oklahoma Complete Health**

When can a doula initiate the contracting process? The doula may initiate the contracting process once enrollment in **Oklahoma** Medicaid is completed, and a Medicaid Provider ID is assigned.

How long is the contracting process? Once **Oklahoma Complete Health** receives the request, including all the necessary documents, the contract is typically sent within **30 days**.

How can a doula request a contract with **Oklahoma Complete Health**?

Requests to contract with **Oklahoma Complete Health** should be submitted through our website

www.oklahomacompletehealth.com/providers.html

Are there resources available during the contracting process?

- **Oklahoma Complete Health** “Become A Provider” web page is a great resource during the contracting process .

Please reach out to **Contracting at**

Contracting@oklahomacompletehealth.com with questions about enrolling and contracting as a **Oklahoma Complete Health** provider.



Contracting with **Oklahoma Complete Health** helps doulas reach more families and reduce maternal health disparities.

Place of Service

As a doula, your support can be provided in a variety of settings, depending on the needs of the pregnant woman and the policies of the health plan. Understanding the places of service is essential for accurate documentation, billing, and ensuring your services are covered.

Places of service where doula support may be provided:

- In person/Virtual
- Member's Home or Place of Residence
- Clinic
- Hospital or Birth Center
- Office
- Telehealth

Pregnant women may benefit from receiving services in more than one location, depending on where they live. For example, members in rural areas may require both a community-based setting and telehealth services . Accurate documentation of the place(s) of service may be necessary for claims processing. If you have any questions, please contact **Provider Relations at OklahomaCompleteHealthPR@OklahomaCompleteHealth.com**.

Members' Eligibility for Doula Services

Understanding who is eligible for doula services is key to delivering timely, inclusive, and effective care . This section provides an overview of the eligibility requirements for pregnant women to access doula support through **Oklahoma Complete Health**. By becoming familiar with these guidelines, you will be empowered to advocate, support pregnant women, and help ensure that those in need receive the care they deserve .

Members are eligible for doula services through Oklahoma Complete Health if:

- They are currently pregnant
- Have delivered in the last 12 months
- Are enrolled and eligible with **Oklahoma Complete Health**
- They would benefit from doula services or request doula services

Doula services can only be provided during pregnancy; labor and delivery, including stillbirth; miscarriage; abortion; and within one year of the end of the member's pregnancy.

NON-COVERED SERVICES

Below are services that are not covered through **Oklahoma Complete Health**.

- | | | |
|--------------------------------|------------------------------|--|
| • Meal preparation | • Placenta encapsulation | • Vaginal steams |
| • Housekeeping | • Birthing ceremonies | • Belly binding after cesarean section |
| • Shopping | • Group baby wearing classes | • Hypnotherapy |
| • Childcare for other children | • Massage | • Night Nurse |
| • Photography – still or video | • Yoga | |

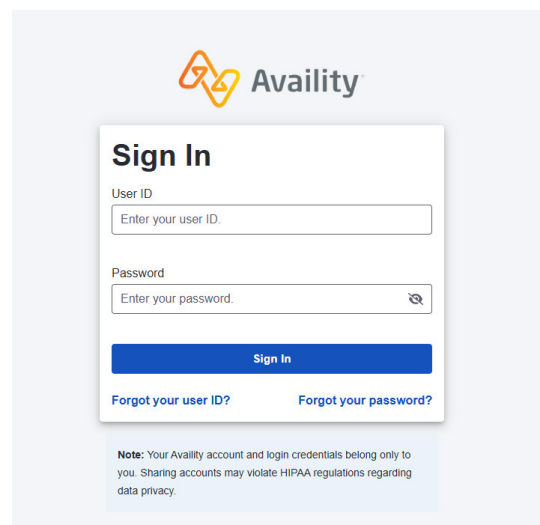
Please reach out to **1-833-752-1664 (TTY:711)** for questions about covered and non-covered services.



Member Verification

It is important to verify the pregnant member's eligibility with **Oklahoma Complete Health** prior to every visit and/or interaction. Eligibility means whether the member qualifies to receive health care coverage through Medicaid. Medicaid is based on ongoing eligibility and can change daily. The member must be eligible on the date of service.

To check eligibility, via the [secure web portal](#) or by calling Provider Services at 1-833-752-1664



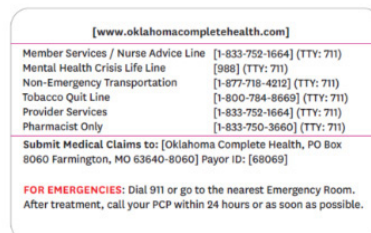
The image shows a digital sign-in form for Availity. At the top is the Availity logo. Below it is a white box with the title "Sign In". Inside the box, there are two input fields: "User ID" with the placeholder text "Enter your user ID." and "Password" with the placeholder text "Enter your password." and a small eye icon to toggle visibility. Below these fields is a blue "Sign In" button. Under the button are two links: "Forgot your user ID?" and "Forgot your password?". At the bottom of the box is a note: "Note: Your Availity account and login credentials belong only to you. Sharing accounts may violate HIPAA regulations regarding data privacy."

MEMBER ID CARDS

Below are examples of the member ID cards to help you become familiar with what to look for.



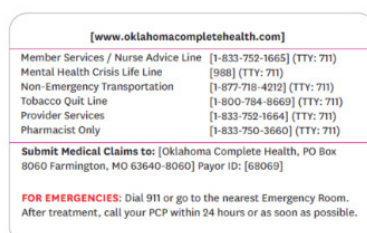
This is a sample SoonerSelect member ID card. It features the Oklahoma Complete Health logo and the SoonerSelect logo. The card displays a placeholder for the member's full name, a QR code, and a Member Portal link. It also shows a placeholder for the member ID number and the card issue date. A note at the bottom states: "You may have some costs for certain services (please see your Member Handbook). You will never have any cost for Emergency Services, Preventive Services or Family Planning Services and Supplies."



This is a sample card listing services and contact information for Oklahoma Complete Health. It includes the website www.oklahomacompletehealth.com and a list of services with their respective phone numbers: Member Services / Nurse Advice Line (1-833-752-1664), Mental Health Crisis Life Line (988), Non-Emergency Transportation (1-877-718-4212), Tobacco Quit Line (1-800-784-8669), Provider Services (1-833-752-1664), and Pharmacist Only (1-833-750-3660). It also provides the address for submitting medical claims: Oklahoma Complete Health, PO Box 8060, Farmington, MO 63640-8060.



This is a sample SoonerSelect Children's Specialty Program member ID card. It features the Oklahoma Complete Health logo and the SoonerSelect logo. The card displays a placeholder for the member's full name, a QR code, and a Member Portal link. It also shows a placeholder for the member ID number and the card issue date. A note at the bottom states: "You may have some costs for certain services (please see your Member Handbook). You will never have any cost for Emergency Services, Preventive Services or Family Planning Services and Supplies."



This is a sample card listing services and contact information for Oklahoma Complete Health. It includes the website www.oklahomacompletehealth.com and a list of services with their respective phone numbers: Member Services / Nurse Advice Line (1-833-752-1665), Mental Health Crisis Life Line (988), Non-Emergency Transportation (1-877-718-4212), Tobacco Quit Line (1-800-784-8669), Provider Services (1-833-752-1664), and Pharmacist Only (1-833-750-3660). It also provides the address for submitting medical claims: Oklahoma Complete Health, PO Box 8060, Farmington, MO 63640-8060.



IMPORTANT:

Record the confirmation number for your records each time you check eligibility.

For assistance, please reach out to the Oklahoma Complete Health at **1-833-752-1664**.

Referrals to other Oklahoma Complete Health Services

As a doula, you play a vital role in supporting the overall health and well-being of our pregnant members. In addition to the assistance you provide, members may benefit from additional services, such as behavioral health, nutrition counseling, care coordination, or social services.

This section offers guidance to help you connect them with **Oklahoma Complete Health** programs and resources that can help.

By making timely and appropriate referrals, you help ensure our pregnant members receive comprehensive, person-centered care throughout their pregnancy journey.

DOULA COLLABORATION WITH CARE MANAGEMENT

Contracted doulas partner with the health plan and the member's Care Manager (CM) to support coordinated, member-centered prenatal and postpartum care. This collaboration focuses on sharing non-clinical insights, identifying member needs, and connecting members to appropriate plan resources to reduce barriers and improve engagement.

Examples of Doula–Care Management Collaboration at Oklahoma Complete Health include:

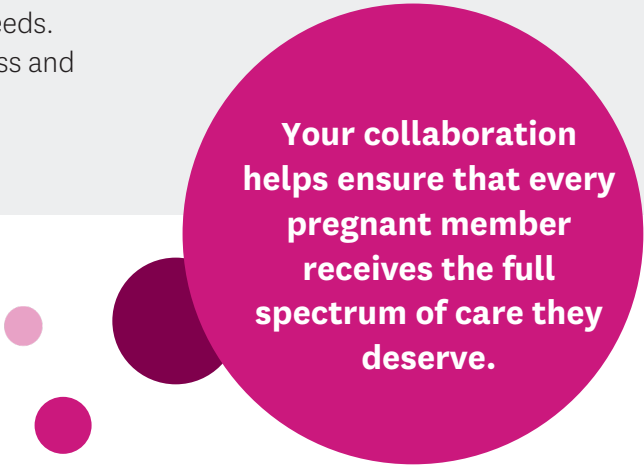
- Sharing brief, non-clinical updates with the CM using the plan's preferred communication process
- Alerting the CM to new or emerging member needs (e.g., transportation, housing, food, benefits)
- Coordinating warm hand-offs to care management or health plan programs when appropriate
- Notifying the CM when doula services begin and conclude to support care plan updates

HOW TO MAKE A REFERRAL

The **Care Management department** is your main point of contact for connecting members to additional **Oklahoma Complete Health** services.

To initiate a referral:

1. Contact the Care Management team at **1-833-752-1664**.
2. Share relevant information about the members' needs.
3. The team will guide you through the referral process and coordinate the appropriate services.



Your collaboration helps ensure that every pregnant member receives the full spectrum of care they deserve.

Claim Submissions

Submitting claims accurately is essential for accurate and timely reimbursement for your services. As a doula, ensuring your claims are filled out correctly helps avoid delays, denials, or extra paperwork. It also ensures that we have all the information needed to process your reimbursement more efficiently. We are here to assist you in submitting accurate claims that help you get paid faster, so you can focus on caring for our pregnant members.

WHAT IS A CLAIM?

- A claim is a request for reimbursement of services provided
- A claim may be submitted through the following methods:
 - Electronically
 - Paper submission
 - Secure portal entry
- A claim may be paid or denied . For each claim processed the doula will receive Remittance Advice (RA). This may be delivered electronically or by mail
- At enrollment you can sign up to receive remittance and payment by mail or electronically
- Claims are processed through our [Availity secure provider portal](#).
- Preferred method is to submit claims electronically through the secure provider portal. Clearing houses: EDI Payor ID 68069
- Providers may also reference the [Provider Manual](#) to obtain the mailing address for submitting paper claims

**Timely Filing
guidelines: 180 days
from date of service.**

**Submit a claim by
visiting our [Secure
Provider Portal](#).**

SECURE PROVIDER PORTAL

Manage patient administrative tasks quickly and easily.

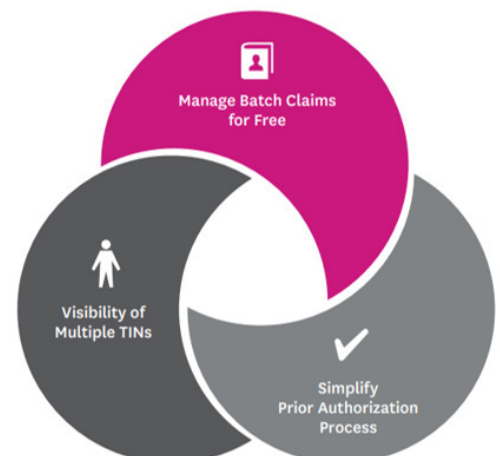


 **Visibility of Multiple TINs**
One point of entry allows for quick and easy access to Oklahoma Complete Health member information for multiple TINs/practices.

 **Manage Batch Claims for Free**
Submit and manage claims, including batch files, for free. View detailed Electronic Funds Transfer (EFT) payment history.

 **Simplify Prior Authorization Process**
"Smart Sheets" feature prompts for required clinical information when submitting prior authorization requests.

**PROTECTED, CONVENIENT ACCESS
AT YOUR FINGERTIPS**

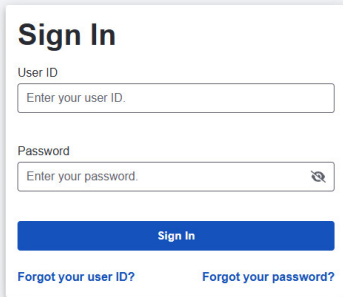
A screenshot of the Availity Sign In form. It features the Availity logo at the top. The form has fields for "User ID" and "Password", each with a "Sign In" button. Below the password field is a "Forgot your password?" link. At the bottom, there is a "Forgot your user ID?" link and a note: "Note: Your Availity account and login credentials belong only to you. Sharing accounts may violate HIPAA regulations regarding data privacy."

Provider Portal and PA Quick Links

Secure Provider Portal:

www.availity.com/Essentials-Portal-Registration

- Verify member eligibility
- Submit and manage claims
- Manage prior authorizations
- And more!



The image shows a screenshot of the Availity Sign In form. At the top is the Availity logo. Below it is a white box with the title 'Sign In'. Inside the box, there are two input fields: 'User ID' with the placeholder text 'Enter your user ID.' and 'Password' with the placeholder text 'Enter your password.' and a small eye icon to toggle visibility. Below the password field is a blue 'Sign In' button. At the bottom of the box are two links: 'Forgot your user ID?' and 'Forgot your password?'. Below the box is a note: 'Note: Your Availity account and login credentials belong only to you. Sharing accounts may violate HIPAA regulations regarding data privacy.'

Prior Authorization

Use the Prior-Auth Needed tool on our website to determine if prior authorization is required.

Submit prior authorizations 2 ways:

- [Secure Provider Portal](#)
- OR Provider Services: **1-833-752-1664**

Website: OklahomaCompleteHealth.com

- Patient care forms
- Prior-Auth Needed tool
- Provider Manual
- Provider Alert
- Member resources

Payment

As a valued provider, your support is essential to the health and well-being of our pregnant members and their families. Ensuring you are paid accurately and on time is a top priority. Once services are approved, payment will be issued directly to you according to **Oklahoma Complete Health** reimbursement schedule. This section outlines how and when you can expect to receive payment, what to do if there are delays, and how to keep your payment information up to date. Your time and expertise matter, and we are committed to honoring that through reliable and timely compensation.



Improve cash flow by receiving payments faster



Settle claims electronically through Electronic Fund Transfers (EFTs) and Electronic Remittance Advices (ERAs)



Eliminate re-keying of remittance data by choosing how you want to receive remittance details



Create custom reports including ACH summary reports, monthly summary reports, and payment reports sorted by date



Maintain control over bank accounts by routing EFTs to the bank account(s) of your choice



Match payments to advices quickly and easily re-associate payments with claims



Manage multiple payers, including any payers that are using PaySpan to settle claims

Set Up your Payspan Account Today

Visit [Payspanhealth.com](https://payspanhealth.com) and click Register. You may need your National Provider Identifier (NPI) and Provider Tax ID Number (TIN) or Employer Identification Number (EIN).



Please reach out to **Oklahoma Complete Health** with questions

Contact Provider Services at
OklahomaCompleteHealthPR@OklahomaCompleteHealth.com



Handling Provider Concerns and Questions

As a doula partnering with **Oklahoma Complete Health**, you play a vital role in supporting members throughout their pregnancy journey. We understand that navigating administrative processes such as billing, enrollment, and service documentation can sometimes be challenging. If you encounter any issues, whether it's delayed payments, questions about covered services, or other operational concerns, help is available.

What to Do When You Encounter Issues:

1 Reach Out to Provider Support

- Contact **Oklahoma Complete Health's** provider support via the designated phone number or email
- Clearly describe your concern and include any relevant documentation (i.e., claim numbers, service dates, member ID, etc.)

2 Document Your Communications

- Keep a log of all interactions, including:
- Date and time of contact
- Name and role of the person you spoke with
- Summary of the conversation or guidance provided
- This record can be helpful for follow-up or escalation if needed

Your Voice Matters

Your feedback and questions help improve the experience for all doulas and providers. **Oklahoma Complete Health** is committed to responding within a reasonable timeframe and working with you to resolve any concerns. Don't hesitate to speak up as your role is essential.

3 Use Provider Portals

If available, log into the provider portal to:

- Check claim status
- Submit inquiries
- Access payment history
- Review service documentation requirements

4 Follow Up Promptly

- If you don't receive a response within the expected timeframe, follow up with the provider support team
- Your advocacy helps improve the system for everyone



Need Help?

For assistance, please reach out to the Oklahoma Complete Health at **1-833-752-1664**.

Handling Member Concerns and Questions

Doulas play a vital role as trusted partners for members throughout pregnancy, birth, and postpartum care. Because of the close and supportive relationship you build, you may be the first to hear about a member's challenges not only with health coverage or access to services, but also with medical concerns such as pain, complications, or emotional distress.

Your ability to respond with empathy and clarity can make a significant difference in their experience. When a member shares a health-related concern, encouraging them to reach out to their healthcare provider promptly can help ensure they receive the care they need. You can also help by guiding them to available resources, clarifying benefits, or connecting them with care coordination support.

COMMON MEMBER CONCERNS

Members may share a variety of issues with you, including:

Eligibility or Benefits

Questions about what services are covered, how long coverage lasts, or whether specific providers are in-network.

Access Barriers to Health Plan Services

Difficulty using services such as transportation, behavioral health, lactation support, or home visits.

Referral or Care Coordination Questions

Uncertainty about how to get a referral, connect with specialists, or coordinate care across providers.

HOW YOU CAN SUPPORT MEMBERS

When concerns arise, here are steps you can take to assist:

1 Verify Coverage

Use the Member Verification process to confirm the member's current eligibility and benefits. This helps clarify what services they can access.

2 Refer to Member Services or Care Coordination

Direct members to **Oklahoma Complete Health's** Member Services team for help with benefits, referrals, or service access. If applicable, connect them with care coordinators who can assist with complex needs.

3 Document and Escalate

Record the concern in accordance with your organization's documentation protocols or the requirements outlined in your health plan agreement. If the issue requires further attention, follow the health plan's escalation process to ensure it is addressed promptly and appropriately.

WHY YOUR ROLE MATTERS

Your support helps bridge gaps in understanding and access, ensuring members receive timely, appropriate care. By listening carefully and guiding members to the right resources, you contribute to better health outcomes and a more positive care experience.



Quality, Monitoring, and Oversight

As a doula working with **Oklahoma Complete Health** members, you might wonder why we are focused on tracking data and what this has to do with your day-to-day work. The support you provide plays a powerful role in improving health outcomes for pregnant women and their families. We use specific metrics, like preterm birth rates or postpartum visit completion rates, to understand what is working and where more support is needed. The information below breaks down how and why these metrics are used, and how they help show the real impact doulas make in improving care, reducing disparities, and shaping the future of maternal health.

YOUR CONTRIBUTIONS AS A DOULA PLAY A VITAL ROLE IN ADVANCING KEY HEALTH GOALS, INCLUDING:



Increasing Prenatal and Postpartum Visit Rates

By encouraging consistent engagement with healthcare providers, doulas help ensure that pregnant individuals receive timely care throughout pregnancy and after delivery.



Reducing Low Birth Weight and Preterm Births

Through emotional support, education, and advocacy, doulas help reduce stress and promote healthier pregnancies, which can lead to better birth outcomes.



Improving Member Satisfaction

Doulas foster trust, cultural responsiveness, and personalized care, which enhances the overall experience for members and strengthens their connection to the health care community.

TO SUPPORT THESE GOALS, YOU MAY BE ASKED TO:



Submit Documentation of Services

Accurate and timely records help us track service utilization, outcomes, and ensure compliance with Medicaid and managed care requirements



Participate in Training and Continuing Education

Ongoing learning opportunities help you stay informed about best practices, emerging research, and policy updates



Share Feedback and Insights

Your experiences and observations are invaluable in shaping program improvements and advocating for the needs of the communities you serve

These efforts are essential to demonstrating the value of doula care to stakeholders, including Medicaid programs, managed care organizations, and policymakers. Together, we are building a stronger, more equitable maternal health system.

Conclusion

As a community-based doula, your role is vital, not only to pregnant women and the families you serve, but to the broader effort to improve maternal and infant outcomes. Your knowledge, advocacy, and connection help build trust and bring compassion to the healthcare system. As you continue this work, know that you are not alone. **Oklahoma Complete Health** is committed to partnering with doulas like you to support healthier pregnancies, safer births, and stronger families. We hope this toolkit has offered practical guidance, resources, and encouragement to support you in your journey. Thank you for the care you give, the voices you lift, and the impact you make every day.

Together, we can ensure that every pregnant woman receives the respectful, informed, and continuous support they deserve before, during, and after childbirth.



Appendix Terms & References

KEY RESOURCES

Oklahoma Complete Health Provider Page

<https://www.oklahomacompletehealth.com/providers.html>

Secure Provider Portal - Availity

<https://www.availity.com/>

Oklahoma Health Care Authority

<https://oklahoma.gov/ohca/providers/provider-enrollment.html>

Start Smart for Your Baby® (SSFB) program: An evidence-based maternity care management initiative that blends advanced data analytics with compassionate and whole-person support

<https://www.startsmartforyourbaby.com/>

IRS EIN (Employer Identification Number) Application: Apply for a Tax ID

<https://www.irs.gov/businesses/small-businesses-self-employed/get-an-employer-identification-number>

National Provider Identifier (NPI): Unique 10-digit ID for healthcare providers

<https://nppes.cms.hhs.gov/login>

CMS-1500 Claim Form Guide: Instructions for completing paper claims

https://www.nucc.org/images/stories/PDF/1500_claim_form_instruction_manual_2024_07-v12.pdf

PaySpan Health: Electronic Funds Transfer and Remittance Advice

<https://www.payspanhealth.com/nps>

KEY TERMS

Fee-for-Service (FFS)

A payment model where you're paid for each service you provide

Managed Care Organization (MCO)

A type of health care delivery system that coordinates and oversees the provision of medical services to ensure appropriate utilization and quality of care

Medicaid Managed Care Organization (Medicaid MCO)

A health plan that works with Medicaid to deliver services

Place of Service (POS)

The location where you provide care (e.g., home, clinic)

Core Metrics

Health outcomes used to measure the impact of doula services

For questions related to this toolkit please contact

OklahomaCompleteHealthPR@OklahomaCompleteHealth.com

