

Department of Planning and Budget 2024 Session Fiscal Impact Statement

1. **Bill Number:** HB935-H1

House of Origin Introduced Substitute Engrossed
Second House In Committee Substitute Enrolled

2. **Patron:** LeVere Bolling

3. **Committee:** Labor and Commerce

4. **Title:** Health insurance; coverage for doula care services.

5. **Summary:** Requires health insurers, corporations providing health care subscription contracts, and health maintenance organizations whose policy, contract, or plan includes coverage for obstetrical services to provide coverage for doula care services provided by a state-certified doula. The bill requires such coverage to include coverage for at least eight visits during the antepartum or postpartum period and support during labor and delivery. The bill provides that health insurance carriers are (i) not required to pay for duplicate services actually rendered by both a state-certified doula and another health care provider and (ii) prohibited from requiring supervision, signature, or referral by any other health care provider as a condition of reimbursement for doula care services, except when those requirements are also applicable to other categories of health care providers. The provisions of the bill apply to policies, contracts, or plans delivered, issued for delivery, or renewed in the Commonwealth on and after January 1, 2025.

The substitute requires the provisions of the first enactment of this act shall not become effective unless reenacted by the 2025 Session of the General Assembly. The Health Insurance Reform Commission (the Commission) shall consider coverage for doula care services provided by a state-certified doula as provided in the first enactment of this act in its 2025 review of the essential health benefits benchmark plan pursuant to § 30-343.1, Code of Virginia. The Commission shall include such coverage in its recommendation to the General Assembly for a new essential health benefits benchmark plan unless the Commission identifies a compelling reason to exclude such coverage.

6. **Budget Amendment Necessary:** No.

7. **Fiscal Impact Estimates:** Indeterminate – see Item 8.

8. **Fiscal Implications:** The proposed legislation is expected to have a fiscal impact on the state health plan; however, the cost is indeterminate. According to the Department of Human Resource Management, the average cost of doula services is \$1,500. There were 2,973 unique claimants with a pregnancy diagnosis, incurred July 2022 through June 2023, paid through September 2023. Assuming 18% of pregnant state employees utilize doula services, the fiscal impact could be \$803,000; however, it is not known how many state

employees would utilize doula services. The fiscal impact of the proposed legislation is not expected to change the health insurance premiums funded in HB 30.

According to the State Corporation Commission, qualified health plans (QHPs) sold through the Health Benefit Exchange are not impacted by the provisions of this bill. Section 38.2-6506 A 1, Code of Virginia, states that if services are identified in addition to the ones contained in the state's Benchmark Plan, QHPs sold through the Exchange would not be required to cover these services; therefore, the proposed legislation would not require defrayal of costs to insurers.

9. Specific Agency or Political Subdivisions Affected: Department of Human Resource Management, State Corporation Commission, and Health Insurance Reform Commission

10. Technical Amendment Necessary: No.

11. Other Comments: This bill is identical to SB 118, as introduced.