

OAR 836-053-????

- (1) A health benefit plan that reimburses the cost of pregnancy and childbirth expenses shall provide coverage for services provided by Doulas.
 - a. “Doula” has the meaning defined in ORS 414.025, as amended by 2025 Oregon Laws Chapter 539.
 - b. The coverage required by this rule must include a minimum of 24 hours of doula services in addition to labor and delivery services, with an option to approve additional hours based on need.
 - c. A health benefit plan may not require prior authorization, referral, or supervision by another health care provider as a condition of receiving this coverage, except that prior authorization or referral may be required for approval of services beyond the 24 hours described in section (1)(b) of this rule.
 - i. This coverage may be subject to the other requirements that apply to other benefits under the policy, including co-pays, coinsurance, and deductible requirements.
 - d. A health benefit plan contract that was issued, renewed, or extended between January 1, 2026 and December 31, 2026 must reimburse the cost of doula services up to \$3,760.
- (2) A health benefit plan that reimburses the cost of pregnancy and childbirth expenses shall communicate with all members on how they can access doula services.