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Oregon Department of Consumer and Business Services Division of Financial Regulation, Bulletin No. DFR 2026-9

To: Carriers offering health benefit plans in Oregon

Date: October 14, 2026

RE: Coverage of Doula Services under ORS 743A.081 between January 1, 2026 and December 31, 2027

Purpose:

To clarify the department's expectations for reimbursement of doula services provided between January 1, 2026 and December 31, 2027.

Authority:

ORS 743A.081; Oregon Laws 2025, chapter 539, section 21 as amended by Oregon Laws 2026, chapter 92, section 15.

Background:

2025 Senate Bill 692

2025 Senate Bill 692 (SB 692) created a new section in the state insurance code, codified in ORS 743A.081. This new section requires health benefit plans to cover the cost of services provided by doulas, lactation counselors and lactation educators including community-based services provided to a pregnant or postpartum individual from conception through one-year postpartum, effective January 1, 2026. The bill also added a new definition of the term "doula" to ORS 414.025(9) and directed the Oregon Health Authority (OHA) to establish a licensure program to regulate the practice of lactation counselors and lactation educators. Under the law, doula services must be covered up to a minimum cap of $3,760 each year, adjusted for inflation on January 1 of each year.

Section 21 of the bill directs the Department of Consumer and Business Services (DCBS) to issue guidance on the implementation of the coverage mandate for health benefit plans "including alignment with the rules and requirements for doulas, lactation counselors and lactation educators as described by the Oregon Health Authority."

2026 Senate Bill 1568

2026 Senate Bill 1568 (SB 1568) amended the coverage requirements created by SB 692, delaying implementation of new rules and coverage requirements for lactation counselors and lactation educators until January 1, 2028. Two sections of SB 1568 amend the language of ORS 743A.081, with one amendment effective immediately and the second amendment applying to health benefit plans issued, renewed, or extended on or after January 1, 2028.

The 2028 amendments, contained in Section 13 of SB 1568, specify a range of services provided by doulas that must be covered. It further states that covered services must be limited to services "that relate directly to medical services covered by the health benefit plan." The bill requires DCBS to conduct rulemaking to specify the types of services that are not covered medical services by 2028[1]. Section 13 also provides a specific methodology for the inflation adjustment required under SB 692 and delays the implementation of these adjustments until January 1, 2029.

The amendments made by Section 12 are effective immediately and are much more limited. Section 12 repeals references to lactation counselors and lactation educators in ORS 743A.081. Section 17 of the bill added a new insurance code section that requires coverage of services provided by lactation counselors starting in 2028. However, Section 12 leaves the references to doula services in SB 743A.081 in place, including reference to the statutory definition of doula in ORS 414.025(9). Section 21 of the bill directs DCBS to issue guidance on implementation of the amended language in ORS 743A.081 "including alignment with the rules and regulations for doulas as described by the Oregon Health Authority."

In prior informal communications with health benefit plan issuers during 2026, DCBS provided incorrect information on the legal effect of SB 1568 based on our understanding of the legislative intent as communicated by legislators and advocates. That is, the agency incorrectly read the bill as delaying a mandate for coverage of doula services until 2028. Under subsequent review of the enrolled bill, we now understand that health benefit plans are still required to reimburse the cost of doula services starting on January 1, 2026, under the modified language of ORS 743A.081. This bulletin describes the department's expectations for coverage of doula services by health benefit plans between January 1, 2026 and December 31, 2027.

Guidance:

Reimbursement for Doula Services

For the purposes of compliance with ORS 743A.081 for health benefit plans issued, renewed or extended between January 1, 2026 and December 31, 2027, "doula" must include a Birth Doula who was registered with the OHA Traditional Health Worker

[1] SECTION 13 (6)(b) directs DCBS to adopt rules "on or before the effective date of this 2026 Act." While other sections of the bill have earlier effective dates, the relevant text of SECTION 13 itself does not apply to health benefit plans until January 1, 2028. Accordingly, we interpret this as not requiring rulemaking before that date.

program at the time of service. The minimum annual reimbursement cap will be $3,760 as specified in ORS 743A.081, consistent with the statutory requirement to begin adjustments for inflation starting in calendar year 2029.

Services covered under this cap are for doula services provided in the course of labor and delivery and a minimum of 24 hours of prenatal or postpartum doula services, regardless of birth outcome. Covered doula services are limited to services that directly relate to medical services covered by the health benefit plan, consistent with applicable definitions and guidance adopted by the federal Internal Revenue Service.

Expectations for Reimbursement by Carriers

For the purposes of compliance with ORS 743A.081, DCBS expects health benefit plan issuers to reimburse doulas for services provided after January 1, 2026, consistent with the limits described above. Issuers should review any claims that were denied based on an understanding that SB 1568 had fully repealed the requirement to cover doula services during calendar year 2026 and should reimburse doulas for any services that were provided consistent with the limits described above.

Compliance & Enforcement Actions Related to Alleged Noncompliance with ORS 743A.081

In light of the incorrect guidance issued by DCBS earlier this year on the substantive requirements for coverage of doula services after the effective date of SB 1568, the department will not engage in any active compliance or enforcement measures related to alleged violations of ORS 743A.081 until adequate time has passed for carriers to review denied claims and adapt their procedures to implement coverage required under the corrected interpretation of SB 1568. Accordingly, the department will not refer any complaints received related to alleged noncompliance with ORS 743A.081 to our compliance or enforcement units until January 1, 2027.

We expect that this delay will allow sufficient time for issuers to identify any claims that should have been paid under ORS 743A.081, to adjust procedures, and to update plan materials for doula services by January 1, 2027.

This bulletin takes effect upon publication.

10/13/2026

TK Keen, Administrator
Oregon Insurance Commissioner
Division of Financial Regulation

Date