

SB 1568 -2 STAFF MEASURE SUMMARY

Senate Committee On Early Childhood and Behavioral Health

Prepared By: Katie Hart, LPRO Analyst

Meeting Dates: 2/10, 2/12

WHAT THE MEASURE DOES:

The measure makes changes to doula and lactation counselor coverage by Medicaid and health benefit plans and establishes the Oregon Perinatal Collaborative. Declares an emergency, effective on passage.

Detailed Summary:

Makes changes to doula coverage for Medicaid recipients.

- Defines doulas as providing support during health care related transitions, including the perinatal period.
- Directs the Oregon Health Authority (OHA) to define qualification criteria by rule for, at minimum, birth doulas and postpartum doulas by January 1, 2027.
- Requires coverage of a minimum of 12 visits, 24 hours of services, or a comparable combination of visits and service hours.
- Applies to contracts between OHA and coordinated care organizations (CCOs) entered into, amended, or renewed on or after January 1, 2027.

Makes changes to lactation counselor coverage for Medicaid recipients.

- Removes references to lactation educators.
- Requires coverage of lactation counselor coverage without prior health care provider referral.
- Applies to contracts between OHA and CCOs entered into, amended, or renewed on or after January 1, 2027.

Makes changes to doula coverage for health benefit plan members.

- Requires coverage of a minimum of 12 visits, 24 hours of services, or a comparable combination of visits and service hours for members receiving medical services covered by the plan.
- Directs the Department of Consumer and Business Services (DCBS) to define covered medical services and permits health benefit plans to provide additional restrictions.
- Applies to health benefit plans issued, renewed, or extended on or after January 1, 2027.

Makes changes to lactation counselor coverage for health benefit plan members.

- Removes references to lactation educators.
- Requires coverage of lactation counselor services without prior health care provider referral.
- Directs DCBS to adopt coverage guidance in alignment with requirements established by OHA to the extent possible.
- Applies to health benefit plans issued, renewed, or extended on or after January 1, 2027.

Repeals Oregon Revised Statute (ORS) 676.671 regarding the regulation of practice of lactation counselors and lactation educators, use of titles, and rules.

- Directs OHA to establish a voluntary registry for lactation counselors.
- Defines “lactation counselor.”
- Permits already licensed lactation counselors and lactation educators to continue to practice.

Establishes the Oregon Perinatal Collaborative at Oregon Health and Sciences University (OHSU).

- Directs the collaborative to coordinate efforts and make policy recommendations to improve infant and maternal health.

Fiscal impact: May have fiscal impact, but no statement yet issued.

Revenue impact: May have revenue impact, but no statement yet issued.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

-2 The amendment replaces the measure and makes changes to doula and lactation counselor coverage by Medicaid and health benefit plans and establishes the Oregon Perinatal Collaborative. Declares an emergency, effective on passage.

Detailed Summary:

Makes changes to doula coverage for Medicaid recipients.

- Directs the Oregon Health Authority (OHA) to define qualification criteria by rule for, at minimum, birth doulas and postpartum doulas by January 1, 2028.
- Requires coverage of a minimum of 12 visits, 24 hours of services, or a comparable combination of visits and service hours.
- Applies to contracts between OHA and coordinated care organizations (CCOs) entered into, amended, or renewed on or after January 1, 2028.

Makes changes to lactation counselor coverage for Medicaid recipients.

- Removes references to lactation educators.
- Requires coverage of lactation counselor coverage without prior health care provider referral.
- Applies to contracts between OHA and CCOs entered into, amended, or renewed on or after January 1, 2028.

Makes changes to doula coverage for health benefit plan members.

- Requires coverage of up to \$3,760 of services provided by doulas per 12-month period, adjusted for inflation beginning in 2029.
- Directs the Department of Consumer and Business Services (DCBS) to define services not covered by the benefit.
- Applies to health benefit plans issued, renewed, or extended on or after January 1, 2028.

Makes changes to lactation counselor coverage for health benefit plan members.

- Removes references to lactation educators.
- Requires coverage of lactation counselor services without prior health care provider referral.
- Directs DCBS to adopt coverage guidance in alignment with requirements established by OHA to the extent possible.
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Fiscal impact: May have fiscal impact, but no statement yet issued.

Revenue impact: No revenue impact.

BACKGROUND:

This Summary has not been adopted or officially endorsed by action of the committee.

Doulas are birth companions who provide personal, nonmedical support to birthing people and families throughout a person's pregnancy, childbirth, and postpartum experience. The Oregon Health Authority (OHA), in consultation with the Traditional Health Workers Commission, is responsible for the training requirements and credentialing of doulas in Oregon ([Oregon Revised Statute \(ORS\) 414.665](#); [Oregon Administrative Rule \(OAR\) 950-060-0150](#)). In 2011, [House Bill 3311](#) directed OHA to study ways to use doula care to improve birth outcomes for people receiving medical assistance. In 2014, Oregon began to cover doula services for birthing people on Medicaid. Reimbursement for doula care was raised from [\\$75 to \\$350](#) in 2017 and from [\\$350 to \\$1,500](#) in 2022. In 2025, [Senate Bill 692](#) expanded the coverage of community-based perinatal supports, including doulas, lactation counselors, and lactation educators, for people receiving medical assistance and required coverage of community-based perinatal services by private health insurers.

The Oregon Perinatal Collaborative (OPC), established in 2012, works to improve care and outcomes for mothers, birthing people, and newborns. OPC's current initiatives include improving care and outcomes for severe hypertension in pregnancy and postpartum, support for pregnant and postpartum people experiencing substance use disorders, community birth transfer partnership, and congenital syphilis prevention. OPC is funded by the Oregon Legislature, March of Dimes, and a federal grant through the Health Resources and Services Administration (HRSA).

Senate Bill 1568 makes changes to doula and lactation counselor coverage as established in Senate Bill 692 (2025) and defines the Oregon Perinatal Collaborative in statute.