



ATTESTATION FORM FOR DOULAS WHO ENROLLED WITH THE DOULA SERVICES PILOT *

***REQUIRED FOR DOULAS THAT MUST REVALIDATE BEFORE 2/28/2025**

I, _____, attest that I have fulfilled the following requirements to revalidate as a New York State Medicaid doula provider:

- Completion of six hours of continuing education in the core and/or broader competencies:

Core competencies:

- Foundations on anatomy of pregnancy and childbirth;
- Labor support techniques and nonmedical comfort measures;
- Common medical interventions: risks, benefits, and decision-making;
- Prenatal and postpartum education and support;
- Lactation support, education and infant feeding; and
- Scope of practice;

Broader competencies:

- Cultural awareness/humility and cross-cultural communication;
 - Health equity in medical field, especially reproductive health;
 - Person-centered and trauma-informed care; and
Community-based knowledge and facilitating connection to resources.
- Possession of current CPR certification for Adults and Infants;
 - Possession of current doula-specific liability coverage policy;
 - Updated the New York State Fee-for-Service Doula Directory form, as needed; and
 - Maintained familiarity with the Health Insurance Portability and Accountability Act (HIPAA).

I understand that after this initial revalidation, I will need to follow updated statewide revalidation requirements and revalidate every five years.

First and Last Name of Doula Services Applicant: _____

NPI Number: _____

Signature of Doula Services Applicant: _____

Date: _____