

Provider Recommendation for Postpartum Doula Services

Doula services require a written recommendation for additional postpartum visits from a physician or licensed practitioner within their scope of practice. The recommending provider does not need to be enrolled in Medi-Cal or a network provider.

I declare that the following information is true and correct:

1. I am a **licensed** physician or practitioner of the healing arts.
2. I attest that the member listed below would benefit from and/or has requested doula services

Provider Information

Provider name	
Title	
Practice name	
NPI # (N/A)	
Email	
Phone number	
Fax number	

Patient Information

Patient name	
Date of birth	
Address	

A recommendation is required for up to nine additional postpartum visits within one year of pregnancy ending. Please specify any member concerns or needs:

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Provider's signature_____

Recommendation approval date_____