

Services, Insurance and Financial Agreement

GYN Care:

- Preconception counseling
- Annual Exams including pap smears
- STI testing and treatment
- Birth control counseling and Rx's including IUD placement and management
- Teen counseling and first GYN appointments
- GYN problems
- Menopausal support

MoonSong Midwifery is not an in-network provider for well woman care for insurance purposes. If you have out-of-network coverage, I can provide an invoice, which may be submitted to your insurance company for reimbursement for GYN care. I charge a reasonable rate if you choose not to use your insurance.

Homebirth care:

Prenatal appointments (each approximately 45-60min) are scheduled every four weeks until 30 weeks gestation, then every 2 weeks until 36 weeks, then at least once weekly until labor starts. I will visit you at your home at least once during your pregnancy so I know the exact location of your house and can get a feel for your home. If you need extra visits or consults for any concerns you will be seen as needed.

At these appointments we do the physical assessment including urinalysis, blood pressure checks, nutrition, fetal growth, fetal heart rate, position and well-being. We also discuss your emotional and spiritual desires and needs about giving birth at home. We talk about postpartum care, breast/chestfeeding, vaccines, pediatricians, doulas, birthing tubs, siblings and pets.

I will discuss prenatal testing options and ultrasounds so that you can make informed choices about your care. I can draw your labs in my office and can give you a prescription for ultrasounds.

During the prenatal period if you or I decide that home birth is not the best option for you, I will assist you with finding the appropriate midwife or doctor for your care. I will transfer all of your records to that provider.

Birth and Postpartum Care

I will be on call for you from 38-42 weeks. I will be available by phone, email or in person throughout your pregnancy and up to 6 weeks postpartum.

I will come to your home for labor and birth when I am needed. We will communicate by phone when early labor starts and depending what is going on with you and your family, we or I will make a decision of when to check out the well being of you and your baby and your labor status.

I bring fetal dopplers to monitor the baby's heartbeat, (in or out of water), equipment to monitor your vital signs, herbs, homeopathic and pharmaceutical medicines, IV equipment and IV fluid, oxygen and resuscitation equipment which are only used when clinically necessary. My assistants and I are certified for CPR and neonatal resuscitation. I bring sterile instruments for cutting the umbilical cord and suturing equipment (and lidocaine) if stitches are necessary.

I do have a well-qualified and wonderful back up midwife for emergency situations.

We generally stay approximately 2- 3 hours after the birth or as long as needed. During this time we clean up after the birth (usually one garbage bag), start the first load of laundry, and after you and your family have time for bonding, I assist with breast/chestfeeding. I perform a newborn exam including weighing the baby, administer medications to baby as discussed prenatally, feed and assist you to the bathroom while instructing you about care of the perineum. We take care of the placenta in the way you have chosen prenatally. We tuck you, your new family in for a long nap. I will leave postpartum instructions. I remain on call for you 24/7 for the next 6 weeks for questions or concerns.

I return within 24-36 hours to reassess the family, within 5-7 days and more often if needed. A pulse ox check on baby is done as well as a PKU during this time period if you choose. At 2 weeks if you are up for a safe outing, you will come to my office. I recommend you make a well visit with your pediatrician between 2-6 weeks to establish your relationship (sooner if there is anything unusual). I will see you for your 6 week postpartum visit at my office. I will connect you with new moms groups and activities if that interests you.

Careful monitoring of the birthing partner and baby is done during labor, if a transfer is necessary or wanted during labor, I will accompany you to the most appropriate hospital and stay with you, supporting you and your family and advocating for your wishes, until your baby is born and you are stable, breast/chestfeeding and ready to rest. You and your insurance will be responsible for my full fee.

A Note About Homebirth Insurance:

I believe homebirth should be accessible for all healthy pregnant women. Medical insurance reimbursement is generally pre-approved for homebirth services. Most NY insurance companies will grant an exception for home birth for out of network midwives to be paid at an in network rate. My professional biller will help with the insurance process including follow up with the insurance company after the birth. My billing service and I will work with you to try and determine what your insurance will pay and what may be your responsibility, depending on the policy you have. You will be responsible for co-payments, deductibles and for paying the biller's fee, these may come out of your deposit, depending again on the insurance.

The first meet and greet is at no charge and following that a deposit will be required for subsequent visits. I would like full payment by 30 weeks, which a portion or all of it (depending on what the insurance pays) will be reimbursed to you once the insurance company pays me, usually 2-6 months after the birth.

The global maternity code used by insurance companies does not include many of my routine services, which are considered "unbillable" or not "medically necessary." The code is defined as "59400: Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and or forceps), and postpartum care." This code ONLY covers:

- 8-10 minute prenatal visits
- 1-2 hours around delivery
- 1-2 postpartum visits

So remember that your insurance company does not value and therefore will not pay for all of the other services I provide as part of your home birth care. Hospitals can bill facility fees that cover nursing and non-clinical expenses, but we cannot. We cannot send insurance claims until your baby is born. This is why I ask that you pay a deposit for my services.

If you do not have insurance, please contact me to discuss options.

FINANCIAL AGREEMENT

Fee and Insurance Policies

The following outlines MoonSong Midwifery PLLC policies with respect to fees and insurance coverage. If you do not have insurance, payment plans are an option.

*Based on the insurance information that you provide on the Registration form, we will contact your insurance company to find out if any pre-authorization is required and, if it is, we will obtain it. If, as part of that process, we become aware of any limitations or contingencies related to your coverage, we will try to inform you of them promptly. Nevertheless, ultimate responsibility for verifying that you indeed have coverage for MoonSong Midwifery PLLC services is yours.

*If your insurance company tells you that they do not cover homebirth or that they will not cover this practice's services because you do not have out-of-network benefits, please contact my billing manager, Haya (haya@clearbill.net). There are certain laws in New York State that give homebirth candidates some rights, but the situation is complicated. We will be happy to give you guidance and assistance that may help you pursue your case.

*If you have a Medicaid plan, I will accept payment that your plan offers for prenatal, labor, delivery and postpartum. There will be an additional fee for home birth individualized services and home care.

*If your plan has a deductible or a co-insurance plan, you will be responsible for that amount.

*MoonSong Midwifery PLLC does not 'accept assignment.' This means that **we expect you to pay the balance of our fee that your insurance does not cover.** In most cases we bill the insurance company after your baby is born and contact you to arrange payment of the balance or return your deposit after they have paid.

*Not infrequently, obtaining the maximum reimbursement from an insurance company is a process that stretches out over months. If we are still disputing your claim three months after billing your insurance company, we may ask you to call your insurance company. **If no insurance payment is made after 6 months of the birth of your baby, you will be responsible for the full fee.**

*We offer to bill your insurance company as a courtesy to you, and make every effort to be careful and thorough in doing so. However, given the complex and often arbitrary nature of insurance policies, we do not accept responsibility for claims that are denied because we failed to comply with filing requirements or deadlines of which we were not aware.

***In the event that you are transferred to the hospital during labor,** please understand that your insurance company is likely to pay the bulk of your benefits to the "delivering provider". We will appeal denial of insufficient payment if necessary but **you may need to pay my full fee out-of-pocket.** Similarly, if you transfer your care to this practice late in pregnancy, our fee remains the same but your insurance benefits are likely to be much less than they would have been had you seen us for your entire pregnancy. You are responsible for the amount that your insurance does not cover.

*In the event of a transfer out of, or elective withdrawal from, this practice during the prenatal period or prior to labor, we will bill based on services rendered. We will attempt to obtain reimbursement from your insurance company but they are unlikely to pay if we did not have time to get authorization or alter the code under which we were authorized. You will be responsible for fees for services rendered.

*If you are unable to pay the full deposit, please discuss this with me. I go out of my way to offer payment options that are realistic given each client's financial situation, and do not charge interest. In return, I ask that you be diligent in honoring any agreement you make, and to kindly notify me in advance if you are unable to make a scheduled payment.

*Please make your initial deposit of minimum of \$500 with your first prenatal visit and pay the remainder of the agreed upon deposit by 30 weeks of pregnancy. Your information will be submitted to your insurance company soon after the birth of your infant.

*My fee does not include laboratory tests, ultrasounds, or hospitalizations. Your insurance will be billed directly by those facilities rendering this care.

*My fee does not cover the birth assistant. Her fee is \$500. I will expect a check made out to cash or cash in the amount of \$500 at the 36w visit. The assistant is not always able to be determined until the day of your birth and this arrangement allows her to be paid promptly and you not to deal with any financials on the day of your birth.

*Please feel free to ask my biller (Haya Brant 347-262-6321 or email haya@clearbill.net) or call me with any questions and we will try to assist you.

*Working out the financial arrangements early on in our relationship will give us the ability to focus on your healthy pregnancy and wonderful birth experience.

Total Fee: _____ Deposit Amount: _____

I have read the above financial agreement and understand these policies.

Client signature _____

Partner signature _____

Midwife signature _____ Date _____

Payment plan:

Amount _____ Weeks gestation _____ Date received _____ Initials _____

Amount _____ Weeks gestation _____ Date received _____ Initials _____

Amount _____ Weeks gestation _____ Date received _____ Initials _____

Amount _____ Weeks gestation _____ Date received _____ Initials _____

Assistant Fee \$500 Weeks gestation 36 Date received _____ Initials _____