

Insurance & Midwifery Services:

Seasons of Life midwifery does *not* participate with any health insurance plan. In New York State, midwifery services for home birth must be covered by law. The extent of coverage is determined by each individual plan. We ask your insurance to cover your global maternity care at your IN NETWORK level, since no other certified midwives who attend homebirths in Rochester area are in their network. We also ask that it is covered AT BILLED AMOUNT. (See contract)

Check out this link for midwives scope of practice in NY state, along with the law about covering maternity/home birth care:

<https://dfs.ny.gov/insurance/ogco2005/rg050409.htm>

HOW WE BILL:

1. During your pregnancy, my calling assistant will help me send your request for a prior authorization from your insurance company.
2. You pay a deposit at first visit to secure your due date, and so we reserve the 4 week period around your date to be on call for your labor. This deposit is non refundable.
3. You submit payments to us (as agreed on in contract) by 36 weeks of pregnancy. The entire contracted forgiven rate must be paid in full for us to be ready and waiting for your labor 24/7 after that. **HSA , and cc via PayPal through website are preferred, or cash / check.**
4. After your baby is born, we promptly provide you with a receipt for you to submit with the prior auth number. We highly recommend you submit this ASAP, and submit online if possible.
5. When you receive reimbursement - let billing assistant know via e mail. If the total is incorrect, or it is denied, we still need to follow up with them. Sometimes, a grievance or reprocessing needs to happen. It is very important for all families to try to get the **maximum coverage-** at the in network rate/ billed. It clears a path for other birthing women in the future. This process can take many weeks or even

months. It is ultimately your responsibility to demand fair reimbursement- considering deductibles and co- insurance- from them. My billing assistant can help guide you.

***Insurance companies can be very frustrating to deal with. They are supposed to be working for US, as the consumer who pays for their plan. Advocating for your full payment is essential. Some companies are better than others!**

HMO & EPO Plans

Insurance plans which do not provide out of network benefits must make in network exceptions for home birth. At this time, several plans purchased through the marketplace established by the Affordable Care Act have not been compliant with this rule, as there is lack of clarification regarding federally mandated insurance purchased through a state marketplace. Midwifery activists and lobbyists are currently working to mend this disparity.e

Managed Medicaid

Seasons of Life is not a registered Medicaid provider. clients seeking maternity care with us must enroll in a Medicaid Managed Care Plan. Available Medicaid MCPs vary from county to county. Medicaid recipients should discuss these options with the midwives during an initial consultation. Most plans pay the Medicaid rate for comprehensive maternity care, which at this time is \$1720 for all prenatal care, labor/ birth and postnatal care. The remainder of the midwives' fee is the family's responsibility and must be paid in advance of the birth.

Self-Funded Plans

Some companies and unions have self-funded insurance plans. They are regulated by the federal government, not the state. Therefore, they can decide which services are covered and which are not. It is legal for a self-funded plan to deny coverage for home birth. We suggest speaking to your HR staff about getting/ demanding coverage, as it is unfair to deny a woman a legal and safe birth /maternity care option of her choice. Out of State Plans. Plans which are offered by large companies with incorporation outside New York may or may not offer reasonable coverage..

Military Insurance

Tricare Plans all pay at the Medicaid rate, which covers roughly 1/3 of our fees. It has been our experience that there is no home birth coverage for active duty soldiers. Prenatal care and births are expected to occur on post. If, however, the client receiving care is the spouse of an active duty soldier or officer, the US Family Plan will pay a flat \$5000 at this time. client may switch from Tricare to USFHP during pregnancy without penalty.

RELIGIOUS BASED PLANS- SAMARITAN, CHRISTIAN HEALTHCARE MINISTRIES etc.

These plans usually cover our entire fee, in advance, and are a wonderful option for many families to avoid a hassle with commercial insurance companies.

