

# Peninsula Midwives Financial Agreement

This is a financial contract between Peninsula Midwives and \_\_\_\_\_  
(Print Name)

## Insurance Billing

Please understand that your insurance policy is a contract between you and your insurance carrier, whereas this agreement is a contract between you and Peninsula Midwives as your healthcare provider. It is your responsibility to know what your policy covers and what it does not. A verbal quote of benefits from your insurance carrier is not a guarantee of payment. Payment is determined according to the plan provisions of your insurance policy at the time services are rendered. *You are financially responsible for your co-pays, coinsurance, deductible and any charges not covered by your insurance policy for yourself as well as your newborn.*

## Estimates

Peninsula Midwives works with a billing service, Alternative Medical Billing. After entry into care, they will run a benefits check with your insurance plan and come up with an estimate for your out-of-pocket cost after your insurance has been billed. This is meant to be a tool for financial planning with the assumption that the services you are seeking are a covered benefit. *This is an estimate only*, and is subject to change depending on the care provided. If you have a deductible, the deductible will be applied to whichever claims are received first. *Many prefer to pay their estimates up front, prior to 36 weeks.* Any changes in this estimate based on transfer of care or additional care will be balanced out once care is complete, including refunds where appropriate.

## Apple Health/Medicaid

Peninsula Midwives is contracted with Washington State Medicaid and *select* Apple Health Plans. Please check with your midwives or our billing office to make sure we are contracted with the Apple Health plan you have selected. You are *required* to notify us of any changes in your Apple Health coverage. Your entire family is required to stay on the same Apple Health Plan. Do *not* change Apple Health coverage without talking to us or our billing office first.

## Secondary Insurance

You are responsible for informing your midwives if you carry more than one insurance policy, including a policy shared by your parents. This greatly affects our ability to bill insurance and be paid for the care we provided.

## Global Billing

Peninsula Midwives follows the medical billing and coding guidelines set by the American Medical Association. Global maternity care is billed as \$5,000 and consists of: standard obstetric care including routine antepartum care in the office, vaginal delivery and standard postpartum care. Not included are other services such as- initial detailed prenatal visit, blood draws, vaccinations, mental health screenings, ultrasounds, medication administration or additional care provided due to complications of pregnancy/postpartum. *Any care beyond your routinely scheduled care will be billed separately. Medical problems complicating labor and delivery*

*management will be billed separately.* At the time of birth, the newborn is a separate client and will be billed separately.

### **Itemized Billing**

Global maternity care may be itemized under specific circumstances. Receiving prenatal care with another provider during your pregnancy, transferring out of care prenatally or during labor will necessitate a change in coding that will change the charges billed and benefits applied. Global billing will also be itemized if you change to a new insurance company or lose insurance coverage during your care. Insurance companies generally do not pay for concurrent care with both a licensed midwife and an MD. Concurrent routine midwifery care may be considered client responsibility. Please let your doctor know if your visit is only a consultation visit and not a transfer into their care.

### **Prepaid Global Maternity Package Fee**

If you do not have insurance or Peninsula Midwives does not contract with your insurance company you will be required to pay the full amount directly. This cost is \$5,000 and must be paid by the date of your child's birth. *If this amount is paid in full by 35 weeks, you will qualify for a \$1,000 discount.* You will be given a detailed receipt which you can use to submit to your insurance company, though this by no means guarantees reimbursement. A partial refund will be given if a transfer of care takes place prior to labor. *No refund will be given for a transfer during labor or postpartum care.* Failure to pay the full package fee in advance will negate the package fee and discount. You will then receive a bill after your completed care for the full amount and it may include additional fees that were previously included in the package, if any complications arise during labor and birth. This amount will be due in full within 45 days of the statement date.

#### Included in the Cash Pre-Paid Package

Routine prenatal visits  
Email/phone support as needed  
Disposable "birth kit" supplies  
Care during labor and birth  
IV administration and/or suturing as needed  
Medical supplies carried by your midwife  
Qualified birth assistant for your birth Initial  
Newborn examination  
Routine postpartum & newborn visit  
Newborn hearing and heart defect screening  
Client Services Fee

#### Not Included in the Pre-Paid Package

Lab tests  
Ultrasounds  
Vaccinations  
Medicines and herbal supplements  
Birth tub rental  
Extra lactation visits  
Newborn Metabolic screening tests

### **Non-Covered Client Service Fee**

We at Peninsula Midwives believe strongly in the Midwifery Model of Care and that both the quality and style of care differ greatly from what is offered in standard obstetric practice. We emphasize the importance of: individualized care, midwife/client relationship, true informed decision making, client autonomy, continuity of care during transfer whenever possible, social and emotional support for the birthing family and optimizing health and preventing complications through full body and mind wellness. We believe this makes a difference to your experience of your care and

contributes to the excellent outcomes. The costs of providing this style of care as an individual provider continue to rise while insurance reimbursement has remain unchanged or has fallen. Because of this, many midwives have chosen to not accept insurance for care and thus require their clients pay completely out of pocket. We agree that the industrialization of our healthcare is a problem and that our insurance system is a major contributor. Simultaneously, accessibility to care is incredibly important to us and thus we choose to continue to function within the system and remain in-network.

For these reasons, all clients are billed an \$800.00 Client Services fee *which is not covered by insurance*, will be billed separately and must be paid by cash or check. This fee covers the cost of providing important components of your care on which we are unwilling to compromise. At this time these things include:

- Emphasis during care on holistic well-being including: detailed nutritional counseling, herbal and supplement recommendations, mental and emotional support related to pregnancy, relationship, postpartum and the transition to parenthood with referrals as desired.
- Routine prenatal home visit at ~36 weeks to assess home and family readiness.
- Labor evaluation and support leading up to your birth, the length of which varies greatly depending on circumstances.
- A 2<sup>nd</sup> trained attendant at each birth. This is most likely another licensed midwife but may be a senior midwifery student, RN or trained birth assistant. We require they are trained in both neonatal and adult resuscitation, Peninsula Midwives procedures and are available to assist at your birth whenever it may occur.
- Continued support during transfer to the hospital in labor as needed and *as able*.
- Extensive postpartum care spread over 2 home visits and 3 office visits. (The first 3 of which are for both you and your baby.) In addition to the routine assessment these includes lactation and parenting support.

We offer discounts for families for whom this is a financial hardship, and we are more than happy to set up payment plans. We believe strongly that inability to pay the full fee should **not be a barrier to care**. If you believe this applies to you, please discuss this with your midwife. The fee can be made in a lump sum at 20 weeks or in scheduled payments: \$250 due at 20wks gestation, \$250 due at 28 weeks gestation and the final \$300 due at the home visit @36wks. If this schedule does not work for you, please communicate this with your midwives prior to the date it is due and arrangements can be made. This fee is relevant regardless of where the birth takes place. (\*We have a small, select number of clients a year for which we can waive this fee entirely. If you would like to be considered please talk with your midwife. If you have means and would like to contribute to a fund for waiving this fee for someone unable to pay, also please talk to your midwife\*)

### **Newborn Care**

At the time of birth, the newborn is a separate patient and is subject to an individual deductible separate from the mother's deductible. Your insurance company will be billed separately for every newborn appointment (including the immediate newborn exam that takes place after the birth), regardless of whether or not it occurs at the same time you are also being seen for an appointment.

### **Separate Providers**

Services rendered by other providers are not included in global maternity care and will be billed separately by the healthcare providers who rendered the service. Such services include:

- Ultrasound technicians
- Lab work- Blood work, urinalysis, cultures and Pap smears collected by your midwife will be sent to an outside lab for testing. Those tests will be billed by the lab to your insurance company
- Hospital evaluations
- Pharmacies
- Emergent transport
- Hospital birth
- WA State Newborn Screening

### **Transfer of Care in Labor**

Peninsula Midwives does not have privileges at any local hospitals and thus if transfer in labor occurs for whatever reason, your care will be transferred to the team of doctors and nurses at the receiving hospital. At a minimum, in the event of labor transfer, one of your midwives will: accompany you to the hospital, connect with the receiving healthcare team, provide them your relevant medical records and stay at least until you are settled in. It is very much our desire and intention to continue to support you through the birth of your baby. It is important to note that occasionally circumstances dictate otherwise.

### **Payment Options (Please initial next to your payment choice)**

**Private Insurance** I authorize Peninsula Midwives to be paid by my private insurance and release to them any information they require to pay my claim. I agree to pay the patient responsibility in its entirety as outlined above. I understand I must confirm with my insurance company that Peninsula Midwives are in-network in my plan. I understand my insurance company will decide the “patient responsibility” for which I will be billed once care is complete. The Client Services Fee and any additional services such as tub rental or placenta encapsulation will be billed and paid separately as outlined above. \_\_\_\_\_

**Apple Health/Medicaid** I authorize Peninsula Midwives to be paid by my Apple Health managed care plan and release to them any information they require to pay my claim. I understand the Client Service Fee (see above) and any additional services I wish to add such as tub rental or placenta encapsulation are non-covered fees and will be my responsibility to be paid as outlines above.  
\_\_\_\_\_

**Pre-packaged Global Maternity Package:** Peninsula Midwives is not contracted with my insurance and I will be paying the Prepackage Global Maternity Package Fee without insurance involvement. I agree to pay it in full as outlined above. \_\_\_\_\_

## Additional Payment Policy Information

**Payment types accepted:** Payments can be made by cash, check or credit card. Credit card payments will have a 3% surcharge included (with the exception of cards for an HSA account).

**Returned Checks:** Each returned check will result in a \$30 fee charged to the client.

**Late Fees:** Payment is due in full within 45 days of the statement date unless otherwise previously negotiated. Any unpaid balances will be charged a 5% late fee compounded monthly. Payment plans can be set up.

**Unpaid balances:** Any charges remaining 1 year after initial bill was sent will be sent to collections, including the above mentioned late fees. (Unless payment plan was already in place)

## Acknowledgment

I have read the above document in its entirety and understand the terms of payment for the midwifery care provided by Peninsula Midwives. \_\_\_\_\_ (Please initial)

I understand that the **Client Services Fee** is an *uncovered fee* and I agree to pay this \$800 fee by cash or check according to the above outlined schedule. \_\_\_\_\_ (Please initial)

**(or)** I propose a fee schedule as follows for the **Client Services Fee:** \_\_\_\_\_

\_\_\_\_\_

**(or)** I am unable to afford the full **Client Services Fee** and agree to pay this agreed upon amount: \$\_\_\_\_\_ (Please Initial) \_\_\_\_\_ (Midwife initials)

I agree to uphold the terms of the agreement above as well as provide all current and accurate billing information, including any changes that occur during the course of care such as mailing address change or updated insurance coverage.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Midwife Signature

\_\_\_\_\_  
Date