# Payment Policy | Home Births



**EFFECTIVE DATE:** 12 | 06 | 2011

**POLICY LAST UPDATED:** 02 | 06 | 2020

### **OVERVIEW**

This policy documents Blue Cross & Blue Shield's (BCBSRI) coverage and payment guidelines related to home births.

### **MEDICAL CRITERIA**

Not applicable.

## **PRIOR AUTHORIZATION**

Not applicable.

# **POLICY STATEMENT**

# BlueCHiP for Medicare and Commercial Products

• Credentialing:

Participating providers must notify BCBSRI and be credentialed specifically for home births and carry liability insurance which must include coverage for home births.

- Coverage:
  - 1. The following services are covered:
    - a. Home Births services are covered, including routine antenatal, delivery, and postpartum care
  - 2. All of the following services are not covered and are member liability:
    - a. Additional prenatal counseling sessions or prenatal evaluation/management services specifically related to home birth.
    - b. Any equipment, supplies including emergency kits, and/or services specifically due to home
    - c. Charges related to prolonged personal attendance.
    - d. Home modifications.
    - e. Standby Services such as: supplies, equipment, support personnel, or ambulance.
  - 3. Member transfer to facility for delivery:
    - a. Home birth provider will be paid for attending labor in the home prior to transfer but not for attendance in the ambulance; and
    - b. Delivery services will be paid only to the provider who delivers the child; and
    - c. If during attendance at labor it is determined that the patient must be transferred to a facility and another clinician performs the delivery service, BCBSRI will cover up to one E/M service in the home and up to 3 additional hours of prolonged services with direct care if provided.
- Billing:
  - 1. All global maternity policies apply.
  - 2. The following provider services are not payable by BCBSRI and are not member liability:
    - a. Provider may not bill prenatal care when another provider is also billing prenatal services for the same period; and
    - b. No additional prenatal Evaluation and Management services related to high-risk pregnancies for home birth patients will be covered as home births are expected to be uncomplicated.

### **COVERAGE**

Benefits may vary. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, Subscriber Agreement for applicable maternity benefits/coverage.

#### **BACKGROUND**

Not applicable.

## **CODING**

Not applicable.

### **RELATED POLICIES**

High Risk Pregnancy Services and the Maternity Global Reimbursement

### **PUBLISHED**

Provider Update, April 2020 Provider Update, December 2018 Provider Update, February 2018

# **REFERENCES**

1. The American College of Obstetricians and Gynecologists. The American College of Obstetricians and Gynecologists Issues Opinion on Planned Home Births. April 2017. Accessed on February 3, 2020: https://www.acog.org/Clinical-Guidance-and-Publications/Committee-Opinions/Committee-on-Obstetric-Practice/Planned-Home-Birth

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