

Special Clinics: Freestanding Birthing Centers

Overview

A freestanding birthing center, as defined by Nevada Revised Statutes (NRS) Chapter 449, is a licensed facility that provides maternity care and birthing services for a normal or uncomplicated (low-risk) pregnancy using a family-centered approach. A freestanding birthing center does not include a hospital, an ambulatory surgical center, or the residence of the person giving birth.

Each center shall only admit and retain expectant individuals anticipating a normal, full-term, spontaneous vaginal birth. Freestanding birthing centers are licensed to provide care during pregnancy, birth, and the immediate postpartum period to the low-risk expectant individual and their newborn.

Policy

Nevada Medicaid's policy for Freestanding Birthing Centers can be found on the Division of Health Care Financing and Policy (DHCFP) website under <u>Medicaid Services Manual</u> (MSM) Chapter 200 – Hospital Services, Attachment A, Policy #02-01.

Refer to MSM Chapter 600 – Physician Services, Maternity Care section.

Covered Services

The procedure code 59409 (vaginal delivery only) is the only reimbursable code for this facility type.

Non-covered Services

Emergency treatment and emergency medical transportation as separately billed services provided by the freestanding birthing centers are non-covered services. Policies may be found in the following <u>Medicaid</u> <u>Services Manuals</u>:

Refer to MSM Chapter 200 - Hospital Services for emergency treatment and additional criteria not met.

Refer to MSM Chapter 1900 - Transportation Services under Emergency Medical Transportation.

Rates

Reimbursement rates are listed under provider type (PT) 17, specialty 169 on the Rates Unit page on the DHCFP website at <u>Fee Schedules (nv.gov)</u>.

Prior Authorization (PA)

PAs are not required.

Billing Requirements or Instructions

For billing instructions, please refer to the Nevada Medicaid Billing Manual.