
CHAPTER 28: FREE STANDING BIRTHING CENTERS

SECTION 28.3: REIMBURSEMENT**PAGE(S) 1**

REIMBURSEMENT

Reimbursement for delivery services performed in a free standing birthing center (FSBC) is a flat fee. Each FSBC has a reimbursement rate established at the time of enrollment specific to the facility.

The flat fee reimbursement is for facility charges only, which covers all operative functions associated with the performance of a vaginal delivery including but not limited to the following:

1. Admission;
2. Patient history and physical;
3. Laboratory tests;
4. Nursing care of the laboring/delivering beneficiary and her newborn infant; and
5. All supplies related to the care and discharge of the beneficiary.

The flat fee excludes payments for the physician, certified nurse midwife or licensed midwife performing the delivery.

Billing

FSBC claims should be completed on the CMS 1500 or 837P. There should only be one line item per claim form using the current procedure code for a vaginal delivery only (this is currently CPT code 59409).

Should the beneficiary be transferred to an acute care setting for the delivery event, the center may append the modifier 53 to the procedure code for the delivery as indicated above. Reimbursement for services provided that did not result in a vaginal delivery at the FSBC will be at a reduced rate.