

## Billing & Coding of Midwifery Services

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Billing and coding is as important to midwifery practice as it is complex. ACNM receives frequent questions from midwives about the ever-changing field of reimbursement. Getting accurate and up-to-date information on billing is critical to the success and growth of midwifery practice. The following resources address many of the most frequently asked questions:

### ACNM Publications

*Getting Paid: Billing, Coding and Payment for Midwifery Services*, Third Edition, now has completely revised coding sections with new data on evaluation and management codes, the latest Federal guidelines on billing “Incident to the Physician,” and Federal statutes on fraud, kickbacks, and safe harbors in midwifery practice. The handbook also includes a section on the life cycle of a claim and managed care contracting. ACNM handbooks can be ordered online at [www.ShopACNM.com](http://www.ShopACNM.com) or through the ACNM Resource catalog.

### “Incident to” Rules

Rules that became effective in 2001 regarding billing “incident to” a physician’s services under Medicare are discussed in the *Getting Paid* handbook described above. The following summarizes key information:

According to the Medicare Carriers Manual, the services of certain non-physician practitioners may be covered “incident to” a physician’s professional services. “These non-physician practitioners, who are being licensed by the states under various programs to assist or act in the place of the physician, include, for example, certified nurse-midwives...” [MCM § 2050.2 (Trans. 1463, Aug. 1993)].

Under Medicare, the following criteria must be met in order for CNM services to be billed “incident to” a physician’s:

- The CNM service must be “an integral though incident part of a physician’s services.”
- The physician must provide direct professional services to initiate a course of treatment.
- The subsequent services by the physician must be documented.
- “Personal supervision” does not require that the physician be consulted for each time on each patient for which you are billing.
- The physician must be physically present in the office suite/facility and immediately available for consultation except in an RHC or FQHC.

Please note that the CNM no longer has to be employed by physicians. [CFR § 410.25-410.27].

### Annual Meeting Education Sessions

The ACNM Annual Meeting each year offers opportunities for learning about current billing and coding issues. Past education sessions have included topics such as: “Minding Your Own Business: Secrets of Financially Successful Practices” and “The A-B-Cs and 1-2-3s of Billing and Coding.” These workshops are presented by top midwifery experts on reimbursement issues. Information on our upcoming Annual Meeting and other educational offerings are always available on the ACNM Web site, [www.midwife.org](http://www.midwife.org). Audiotapes of workshops and educational sessions presented at the ACNM Annual Meeting may be obtained from Sound Images, Inc. at (303) 649-1811, or visit their Web site at [www.siattend.com](http://www.siattend.com).

### **Midwifery Business Institute**

The annual Midwifery Business Institute (MBI) includes workshops and education sessions on billing and coding. You may phone MBI at (734) 763-5283, or email them at [cwms@umich.edu](mailto:cwms@umich.edu).

### **Health Resources and Services Administration (HRSA) Grantees and Subgrantees**

From 2001 to 2004, HRSA offered Basic Third Party Reimbursement Training free of charge to HRSA grantees and subgrantees. This two-day program covered fundamentals of coding, billing and collections. The program is no longer available; however archival materials and web casts are available at [www.hrsa.gov/financemc](http://www.hrsa.gov/financemc).

### **Reference Manuals**

The following manuals are available for in-depth coding information:

- AMA ICD-9-CM, 2006, available at (800) 621-8335, or <https://catalog.ama-assn.org/Catalog/home.jsp>. This manual from the American Medical Association (AMA) is recognized by all third party payers for diagnosis codes.
- Ob/Gyn Coding Manual 2006, available at (800) 762-2264, or [http://sales.acog.com/acb/stores/1/product1.cfm?SID=1&Product\\_ID=310](http://sales.acog.com/acb/stores/1/product1.cfm?SID=1&Product_ID=310). This ACOG publication uses CPT codes created by the AMA and gives the provider an authoritative opinion on each code that may be of help dealing with managed care billing issues. These are procedural codes. Because this manual deals only with Ob/Gyn codes, there is considerably more detail and help on coding correctly.
- AMA CPT 2006, available at (800) 621-8335 or [https://catalog.ama-assn.org/Catalog/product/product\\_list.jsp?requestid=1002166](https://catalog.ama-assn.org/Catalog/product/product_list.jsp?requestid=1002166). This publication is a complete set of CPT codes for all medical and surgical conditions. It also contains a detailed section on the evaluation and management codes. The AMA also publishes electronic resources.
- UB-92 book, available at any state hospital association. If the site of birth is a free-standing birth center, some insurance companies are accepting and paying when the UB-92 code #724 is used as the facility code.
- HCPCS 2006, available at (800) 621-8335 or [https://catalog.ama-assn.org/Catalog/product/product\\_list.jsp?requestid=1002846](https://catalog.ama-assn.org/Catalog/product/product_list.jsp?requestid=1002846). This manual contains codes for medical supplies and those services not covered in CPT codes such as ambulance transport.

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The ACNM “QuickInfo” series was developed by the Department of Professional Services to respond to common inquiries, summarizing ACNM resources regarding a particular topic, as well as listing selected literature and a variety of other resources. Your feedback is welcomed; contact Professional Services at (240) 485-1800 or [info@acnm.org](mailto:info@acnm.org).