

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS

BT201212

APRIL 3, 2012



Facility reimbursement rates for birthing centers

As announced in the November 29, 2011, bulletin [BT201158](#), the Indiana Health Coverage Programs (IHCP) expanded provider enrollment, allowing birthing centers to enroll as Medicaid providers effective January 1, 2012. Enrollment requirements are outlined for quick reference under Provider type 08 – *Clinic*, specialty code 088 on the [IHCP Provider Type and Specialty Matrix](#) at indianamedicaid.com.

Billing guidelines for birthing centers were provided in the February 14, 2012, bulletin [BT201206](#). These guidelines remain unchanged. This bulletin provides maximum reimbursement rates for the services provided by IHCP-enrolled birthing centers. Effective May 1, 2012, for dates of service on or after February 1, 2012, the maximum facility reimbursement rates for IHCP-enrolled birthing centers are summarized in the table on the following page.

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Birthing center facility—maximum reimbursement rates for dates of service on or after February 1, 2012

Service	Revenue code	Procedure code	Maximum reimbursement rate
Vaginal delivery	724	None	\$820.95
Labor occurring but not resulting in a delivery	724	S4005	\$273.65

As a reminder, birthing center providers must include the taxonomy code 261QB0400X (birthing) in field locator 81CCa of the UB-04 claim form (or its electronic equivalent). Additionally, birthing center services must be billed using place of service 25 (birthing center).

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

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