

## In-Network Exception Form

Please note: Many insurance companies are able to grant in-network exceptions or “network gaps” on the basis of network insufficiency. If so, this means they will pay Best Start Birth Center at the in-network rate and not the out-of network rate. This means your deductible and co-insurance amounts are (typically) lower. They will only authorize this if they can see that there are no contracted birth centers in your area (which is often the case). You as the member can initiate this process. Please fill out the form below as you call your insurance company. Documenting your phone call is VERY important. If your insurance company is not willing to grant the exception, you do not need to inform us of this. Please only return this form if they grant the exception. You may return it to Best Start at your next visit, or you may fax or mail it to us; our information is at the bottom of this form.

Name: \_\_\_\_\_ My phone#: \_\_\_\_\_

Name of insurance company: \_\_\_\_\_

Phone number I called for the exception: \_\_\_\_\_

Date I called my insurance company: \_\_\_\_\_ Time: \_\_\_\_\_

Insurance Rep’s Name: \_\_\_\_\_

“I would like to request an in-network exception based on the fact that there are no contracted birth centers within a 30-mile radius of my home.” (They will check on their computer for any contracted birth centers in your area. They will probably find at least a few hospital-based CNMs – Certified Nurse Midwives – and will tell you they cannot offer you an exception. Your response to this is:) “Yes, but these are all midwives who deliver in the hospital. I want a birth center birth and these midwives do not offer birth center birth. Best Start Birth Center does. Please put in a request for an in-network exception.” (Work with them on this). They should give you a pending # or auth # before you hang up. It usually takes a few days to process an exception. Dates of exception should be from your initial visit (if possible) to 8 weeks AFTER your due date. Be sure newborn care is covered by this exception!

Authorization # or pending #: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ If they would like to call your provider’s office, have them call 619-299-0840 and ask for billing.