



# **PROVIDER TYPE SPECIFIC PACKET/CHECKLIST**

**(Louisiana Medicaid Program)**

## **Free Standing Birthing Center**

**(Enrollment packet is subject to change without notice.)**

# GENERAL INFORMATION FOR THE FREE STANDING BIRTHING CENTER (FSBC) FACILITY PROVIDER TYPE

Birth Centers are facilities for the primary purpose of performing low-risk deliveries but are not a hospital or licensed as part of a hospital. "Low-risk pregnancy" means a normal, uncomplicated prenatal course as determined by documentation of adequate prenatal care and the anticipation of a normal, uncomplicated labor and birth, as defined by reasonable and generally accepted criteria adopted by professional groups for maternal, fetal, and neonatal health care. Physicians, Certified Nurse Midwives, and Licensed Midwives\* enrolled in Louisiana Medicaid are eligible to provide delivery services within Medicaid enrolled FSBCs. Neither general nor epidural anesthesia shall be provided in the birthing center.

Centers are required to meet Medicaid's criteria for enrollment and have completed the enrollment process prior to providing services to Medicaid beneficiaries.

Medicaid Birthing Center criteria for enrollment:

- Centers must be CABC (Commission for the Accreditation of Birth Centers) accredited.
- Centers shall be located within a ground travel time distance from the general acute care hospital with which the center maintains a contractual relationship, including a transfer agreement, that allows for an emergency cesarean delivery to be started within 30 minutes of the decision a cesarean delivery is necessary.
- All freestanding birthing center applications for enrollment are subject to review and approval of the Medicaid Medical director.

**\*Licensed Midwives providing delivery services in FSBCs must comply with Title 46 Professional and Occupational Standards Part XLV. Medical Professions; Subpart 3. Practice; Chapter 53. Licensed Midwives Subchapter A. Standards of Practice §5301-§5321.**

# Free Standing Birthing Center

## REQUIRED DOCUMENTS FOR ENROLLMENT

The following checklist shows all required documents that **MUST** be submitted to enroll with Fee For Service (FFS) Louisiana Medicaid. Please make certain to complete each required form in its entirety to avoid processing delays.

\*Form is included in the **Basic Enrollment Packet for Entities/Businesses**.

Completed	Document Name
*	1. Entity/Business Louisiana Medicaid PE-50 Provider Enrollment Form.
*	2. PE-50 Addendum – Provider Agreement Forms <b>(three pages)</b> .
*	3. Medicaid Direct Deposit (EFT) Authorization Agreement Form.
*	4. Louisiana Medicaid Ownership Disclosure Information Forms.
*	5. <b>(If submitting claims electronically)</b> Provider's Election to Employ Electronic Data Interchange of Claims for Processing in the Louisiana Medical Assistance Program (EDI Contract) Form <b>and</b> Power of Attorney Form (if applicable).
	6. Copy of voided check or letter from the bank on bank letterhead verifying the account and routing number for the account to which you wish to have your funds electronically deposited <b>(deposit slips are not accepted)</b> .
	7. Copy of a pre-printed document received from the IRS showing both the employer identification number (EIN) and the official name as recorded on IRS records <b>(W-9 forms are not accepted)</b> .
	8. Copy of Accreditation Certificate from the Commission for the Accreditation of Birth Centers (CABC).
	9. To report "Specialty" for this provider type on Section A of the PE-50, please use Code 70 (Clinic or Other Group Practice).
	10. Copy of CLIA certificate, if applicable.
	11. Emergency Transfer Agreement contract.

**Original Signatures Required – Please Do NOT Use Black Ink**

Please submit all required documentation to:  
**Gainwell Provider Enrollment Unit**  
**PO Box 80159**  
**Baton Rouge, LA 70898-0159**  
**225-216-6370**