Growing Families Midwifery Service

Financial Agreement

Our rate for comprehensive care is $8,200. This fee must be paid in full by the 36th week of pregnancy. We do not accept private insurance or Medicaid. We can provide you with a superbill after your birth, which you can submit to your insurance company yourself to seek reimbursement. Reimbursements all depend on what your insurance policy allows.

Our Offerings Include But Are Not Limited To

- Prenatal visits
- Lab collection
- Daily phone/text availability — becomes 24/7 availability starting at 37 weeks
- Up to 5 weeks of your midwives being on call for you starting at 37 weeks
- In home labor & delivery and/or transfer assessment
- Use of herbs, medications, medical equipment, and other supplies
- Hospital transport facilitation in the event it is necessary
- Home birth education
- Birth tub service
- 6 weeks of scheduled postpartum care

The following services are also included when birth occurs at home:

- 2+ hours of immediate in home postpartum care
- Suturing of first and second degree lacerations
- Initial newborn assessment
- Filing of newborn birth certificate and registration of social security card

Not Included

- **Travel fee will be assessed for any client that lives outside of a one hour radius. The fee will reflect the mileage and travel time associated.**
- **Fees accrued for lab processing and out of office procedures are not included in the cost of care but can sometimes be covered by insurance. This may include but is not limited to ambulatory services, hospital visits, lab processing, ultrasounds and any other care received from another third party source.**

Discounts

- Cash pay discount of $400 will be given if the total fee is paid in full using cash, check, Zelle, Venmo, or CashApp. The use of any cards, including debit, credit, HSA, or CareCredit financing, will not qualify for this discount and will be charged the full fee.
- Military discount of $200 will be given if the client or partner are active military.
- Return clients will be given a discount of $200.

Payment in Full & Start of On-Call Care

Payment in full is due by 36 weeks of gestation. Payments can be made monthly or in larger installments; we are flexible with what works best for you as long as the total fee is paid off by

the agreed upon time. A $700 retainer fee is required at the initial prenatal appointment. This retainer fee is included in the total fee.

If payment is not received in full prior to 37 weeks of gestation, the midwife will not begin on-call care until payment in full has been received. This means 24/7 availability and on-call coverage will not start until the outstanding balance is paid, regardless of gestational age. Continued prenatal visits and other non-on-call services may continue at the practice's discretion while a balance remains, but on-call status will not begin until payment is complete.

- Late fee of $50 per month for payments extending beyond the agreed upon payment plan.
- Return check/payment fee of $40 will be applied for any insufficient funds.
- No call/no show charge of $30 will be added to the account for missing appointments.
- Delinquent/unresolved accounts will be sent to collections.

Outstanding Balances & Collections

Any balance remaining on a client's account that goes unresolved may be sent to a third-party collection agency for further action. This includes balances resulting from missed payments, broken payment plans, or any fees outlined in this agreement that remain unpaid. Once an account is sent to collections, the client may be responsible for any additional fees or costs associated with the collection process, in addition to the original balance owed. Growing Families Midwifery Service will make reasonable attempts to communicate with the client regarding payment before pursuing this option.

Payment Options

We send out monthly invoices to your email.

You are able to pay via:

- Zelle, Cashapp, Venmo
- Cash
- Check
- HSA card
- CareCredit

Insurance Reimbursement & Superbills

While we do not bill insurance directly or accept insurance as payment, we are happy to provide you with a superbill after your birth. A superbill is an itemized statement of the care you received that you can submit to your insurance company yourself in order to seek reimbursement.

- Every insurance policy varies in its reimbursement policies, so we recommend contacting your insurance company ahead of time to understand your out-of-network benefits.
- To get the best possible return, you may want to ask your insurance company about applying for a gap exception.
- Reimbursement timelines and amounts are determined entirely by your insurance company and can take weeks or months to process.

Refunds

Refunds may be given under certain circumstances. These circumstances may include transferring to a different provider for personal or financial reasons, transfer of care due to medical reasons that risk you out of a home birth, moving away, etc.

Refund policy if you are paid in full:

- Antepartum transfer (transfer of care before the onset of labor):
  - If you transfer out of care before 28 weeks, the remainder of the fee will be refunded after taking out a $700 retainer fee, $2,500 for entry-to-care & administration fees, $350 initial prenatal appointment fee, and $250 for each additional prenatal appointment received.
  - A refund of $2,000 will be given if you transfer out of care after 28 weeks and before 36 weeks.
  - No refund will be given if transferred after 36 weeks and 0 days. No refund is given due to pregnancy going past 42 weeks gestation. From 41–42 weeks, extra visits & care are provided in an attempt to get labor started, and this is accounted for in the breakdown of care received.
- Intrapartum Transfer (transfer of care during labor/immediate postpartum): No refund will be given. Although we will do everything in our power to ensure your ideal home birth, no guarantee can be given that the birth will occur at home or that a transfer of care will not be necessary. You hire us as your care providers to assess the safety of delivery/postpartum recovery at home, and great consideration is given in the decision to transfer care to the hospital. If we decide at any time or for any reason that a transfer of care is necessary to ensure the safety of you or your baby, we will not offer a refund. In the rare case that the birth occurs too quickly for the midwife to make it to your home, no refund will be given. The midwife will still provide postpartum care, newborn assessment, and filing of the birth certificate in the event of a fast birth.

Refund policy if you are NOT paid in full:

- A prorated amount will be calculated to discern the amount of the refund given. The refund policy above applies for the amounts due for care received. An invoice showing the breakdown of care received and amount owed will be sent via email through client care.

Dismissal of Care

If a payment plan is not kept and/or a written agreement for altered payments is not made, our practice has the right to refuse care until payments have been made. If the total fee is not paid in full before labor and delivery, the midwife has the right to refuse care until payment is made.

In the rare case that a client is dismissed from care due to non-compliance, abusive behavior toward staff, requesting the midwife to perform or act outside of her licensing, or any other matter that causes harm to the practice, the client will not receive any ongoing care. The above refund policy applies to this dismissal in relation to the breakdown of refund given.

Our goal is to have a safe and transparent working relationship with you during your care. If dismissal is necessary, you will be notified by staff, given alternative care provider options, and a certified letter will be sent to your current address on file.

Acknowledgement of Agreement

I, _____, agree to the above contract and understand the information given. By signing this agreement, I agree to set up a payment plan with Growing Families Midwifery Service. I understand that I am entitled to the discounts as mentioned above and understand the mentioned refund policy. I understand that the midwife has the right to

refuse care for non-payment and that on-call care will not begin until payment is received in full, and I will keep open communication with the practice regarding any alterations in the plan.

Print Client Name: _____

Signature: _____

Date: _____

I, Misti Balzer, LM, agree to the above contract and care agreement with _____.

Midwife Signature: _____