

Policy Name:	Medical Policy: Home Birth	Policy #:	MP-127
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Policy Information

Owner Department:	Medical UM & Systems Department
Owner:	Assigned Medical Director
Electronic Signature/Date:	Krystal Revai (08/08/2023), Lori Slaughter (08/08/2023)

If there is a discrepancy between a medical policy and a patient's policy or plan document/summary plan description, the policy or plan document/summary plan descriptions provisions and limitations will govern the determination of benefits.

Purpose of the Policy

To make utilization decisions, Health Alliance uses written criteria based on sound clinical evidence for appropriately applying the criteria.

Statement of the Policy

To apply objective and evidence-based criteria when determining the medical appropriateness of health care services.

NOTE: Please refer to plan documents for prior authorization necessity/status.

Essential Health Benefits**Applies to State of Washington:**

Per EHB, effective 1/1/2016, home births and any medically necessary supplies are covered when there is a low-risk pregnancy as determined by the attending provider.

Interpretations

Health Alliance Medical Plans does not cover planned deliveries at home. The American College of Obstetricians and Gynecologists has issued a policy statement that hospitals and accredited birth centers are the safest settings for birth. The American Academy of Pediatrics has issued guidelines stating that the hospital and birthing centers within a hospital complex provide the safest setting for labor and delivery. Health Alliance Medical Plans' position is that planned home labor and delivery is not standard of care in the United States and thus, is not a covered benefit.

Medicare Advantage Criteria details:

- As no NCDs or LCDs were available in our service areas for guidance we adjudicate with our Commercial criteria.
- [MCD Search \(cms.gov\)](#) – check for any updates

Codes

*Codes listed are for informational purposes only and do not necessarily indicate prior authorization is or is not required or coverage is guaranteed.

59400-59430	Vaginal delivery, antepartum and postpartum care
59510-59525	Cesarean delivery
59610-59622	Delivery after previous cesarean delivery

Providers are required to indicate the diagnosis and procedure codes when requesting review of coverage.

References

1. "ACOG Committee Opinion No.697: Planned Home Birth". ACOG Committee on Obstetric Practice. *Obstet Gynecol*. 2017 ;129:e117–122.
2. "Planned Home Birth". American Academy of Pediatrics, Committee on Fetus and Newborn. *Pediatrics*; Apr. 2013, peds.2013-0575; DOI: 10.1542/peds.2013-0575.
3. Grunebaum A, McCullough LB, et al. "Apgar score of 0 at 5 minutes and neonatal seizures or serious neurologic dysfunction in relation to birth setting". *Am J Obstet Gynecol* 2013209:323.e1–6.
4. Bastian H. Keirse MJNC, Lancaster PA, Perinatal death associated with planned home birth in Australia: populations based study. *BMJ* 1998; 317(7155):381–388
5. American Academy of Pediatrics and American College of Obstetricians and Gynecologists. Guidelines for Perinatal Care, 4th ed. Elk Grove Village, IL: AAP, 1997.
6. American College of Obstetricians and Gynecologists, Statement on Home Delivery. Washington, DC: ACOG, February 6, 2008.

History

Created Date:	04/23/02		
Effective Date:	04/23/02		
Next Review Date:	08/08/2024		
Revision Date:	03/24/04 – MDC	05/18/05 – MDC	05/10/06 – MDC
	05/09/07 – MDC	05/14/08 – MDC	05/08/09 – MDC
	07/13/10 – MDC	08/10/11 – MDC	06/15/12 – MDC
	06/20/13 – MDC	05/30/14	03/09/15
	12/08/15 – MDC-Added EHB language for State of WA.		
	12/14/16 – MDC-Revision-Updated ACOG and AAP references.		
	12/13/17 – MDC-Revision of Interpretation language related to 2017 ACOG Statement.		
	10/31/18 – MDC	11/08/19 – MDC-Annual review, no changes.	
	09/30/20 – MDC-Annual review, no changes.		
	09/21/21 – MDC-Annual review, no changes.		
	08/16/22 – MDC-Annual review, no changes.		
	07/18/23 – MDC-Annual review, Medicare information updated, no changes.		