



# Empowered Midwifery & Wellness

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## *How to Request a GAP Exception / Prior Authorization for Out of Network Care*

### **For Midwife/Home Birth**

Insurance companies now require that GAP Authorization request come from either the patient OR the primary care provider of the patient. Below are instructions to request in-network coverage for your out of network provider, or what in the insurance world is called an GAP exception.

### **In order to proceed with the request, you will need the following information:**

- Provider Name:
  - Ashley Brimer, APRN, CNM
- Business Name:
  - Empowered Midwifery and Wellness
- Business Address:
  - 621 Hawthorne Street Alexandria, MN 56308
- Mailing Address:
  - 22013 Co Rd 10 Barrett, MN 56311
- Estimated Delivery Date
  - Provide & ensure ALL these codes are added to your authorization for best results

### **Mother Services: CPT Codes:**

- |                      |                      |                      |
|----------------------|----------------------|----------------------|
| ○ 59400 x1 @ \$5,000 | ○ 59409 x1 @ \$2,000 | ○ 59410 x1 @ \$2,800 |
| ○ 59425 x1 @ \$2,500 | ○ 59426 x1 @ \$4,000 | ○ 99205 x1 @ \$400   |
| ○ 59430 x1 @ \$600   | ○ 99204 x1 @ \$350   |                      |

### **Infant Services: CPT Codes:**

- |                    |                    |
|--------------------|--------------------|
| ○ 99460 x1 @ \$400 | ○ 99464 x1 @ \$400 |
| ○ 99461 x1 @ \$400 | ○ 99214 x1 @ \$200 |

**Diagnosis Code: Z3800 Z00110 Z00111**



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### **Follow the Steps Below:**

1. Contact your insurance company member service, customer service department which the number is located on the back of your insurance card.
2. Verify your personal and insurance information and ask to be transferred to the prior authorization department (some companies may say pre-certification, it's the same thing).
3. Once transferred, make a request to the representative that you would like to initiate a GAP EXCEPTION or SINGLE CASE AGREEMENT.

### **Key points to tell the representative:**

- You are seeking care from a provider (Midwife) that is not a contracted provider
- If this provider has treated you in the past, state you would like to see this provider for a continuity of care (meaning, you and this provider have a previous treating history).
- Since your insurance policy does NOT provide care from a contracted midwife, a gap of care has been created in your policy and you would like a gap exception to be extended.
- Some insurances may try to provide you a list of contracted OBGYNs or HOSPITALS you may seek care with, inform them that you are seeking care from a specific provider (midwife) and if there are NO specific providers that offer the services you are requesting to please send the case to nurse review.

### **FYI:**

- IF insurance needs to fax documents/requests, please provide fax # 320-227-4440
- Please make sure you ALWAYS keep record of the representative's name of whom you have spoken with and ALWAYS request a reference number.
- The process normally takes approximately 14 business days and an approval or denial is usually sent to you via mail. You can always call and check the status of your request.