

211 Florence St. Tomball, TX 77375

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# **Holistic Heritage Homebirth Fee Schedule**

# Global Prenatal and Homebirth fee of \$6500:

Note: This is a cash pay fee for a single birth; twin fee is \$7500. When using insurance, our fee given to insurance may be higher than the cash fee price listed. Please note when using insurance, we can not guarantee what your insurance will reimburse or charge. We do not file insurance or handle insurance claiming. We can provide a resource or you can personally file.

- \$500 is due at the first visit
- \$300 is additionally due at the first visit if you are paying for labs through HHH
- \$1000 is due per month until paid in full
- \$35 a week late fee will be added for nonpayment. Two non-payments and HHH will relinquish your care.
- If you are not paid in full by 36 weeks we will need to put a card on file for automatic withdrawals.

### Pregnancy Labs: \$300

Includes: NOB panel, urinalysis, urine culture, gonorrhea, chlamydia, ferritin, glucose test, CBC, Ferritin, GBS culture, and a 2<sup>nd</sup> CBC. We may recommend monitoring for other health conditions, ie.,anemia, thyroiditis, hypertension etc. Additional labs will incur an additional fee. Insurance will typically cover labs.

### Early Pay Discount:

- $\circ$  \$6000: \$500 is due at the first visit and the balance due by the second visit.
- \$6200: \$500 is due at you're the first visit and the balance is paid in full by 20 weeks.

### **Extended Payment Plans:**

\$6750: \$500 is due at the first visit. \$300 a month until paid in full.
 With Extended Payment Plans a card must be put on file with automatic withdrawals monthly.

# Additional Fees:

Birth Supplies: Birth Kit (\$37.50), Pool Liner (\$60), Vitamin K (\$25), Erythromycin Eye Ointment (\$35), Metabolic Screen (\$85), IV fluids in Labor (\$50), Antibiotics in Labor if with IV fluids (\$75) or without (\$35), Postpartum Hemorrhage Medication (\$10-\$50), Nitrous Oxide (\$250), Phenergan (\$15), Nubain (\$50), etc.

These are as needed or if desired. Prices are per dosage/usage. Some items are not purchased through HHH. This list may not include all services and procedures. Please inquire about a quote at your visit or procedure. You are financially responsible for all services rendered. Holistic Heritage Homebirth will try to inform you of all costs prior to a procedure. It is possible these prices change

slightly as we do not have control over costs.

#### Other Fees:

- New Client Well Woman or Problem Visit: \$175
- Established Client Well Woman or Problem Visit: \$125
  All labs are additional and paid to HHH or will be billed through insurance.
- IV Fluids Office Visit: \$250
- Returned Check Fee: \$35
- Late Fee (Weekly): \$25

# Transfer of Care/Refunds:

Once a client signs this contract and remits the deposit of \$500, prenatal care has begun and a spot is secured on the roster for the upcoming birth. If a client is referred to another care provider or discontinues their relationship with Holistic Heritage Homebirth at any point, for any reason, NO REFUND WILL BE GIVEN OF PAYMENTS MADE UP TO THAT POINT. Reasons for discontinuation that would not result in a refund include, but are not limited to: moving, change of mind, miscarriage, changing practices or missing scheduled visits for any reason. When a client goes into labor and the midwife and/or any birthing attendants arrive to attend the labor, regardless of outcome and final place of birth, NO REFUND WILL BE GIVEN. If it is a precipitous birth or if the birth team receives delayed notification and misses the birth, NO REFUND WILL BE GIVEN. If the birth process is transferred to a medical facility during labor, the midwife will continue to provide labor support, lactation consultation, and follow up postpartum care. NO REFUND WILL BE GIVEN.

The fee remains the same if the midwife does not make it to the birth due to events outside of her control- weather, fast delivery, delays in communication, traffic, etc. Every effort is made to stay within a reasonable distance of your home when you near your due date (initial) \_\_\_\_\_\_

There are no discounts for late entry to care. More responsibility is assumed by the midwife when accepting entries into care, as well as an increased workload while the client receives all necessary education and preparation (**initial**)\_\_\_\_\_

Transport to the hospital during labor, birth, or postpartum does not constitute a refund. No midwife can guarantee a home birth. Our goal is to provide a safe birth environment for mom and baby. If the need arises for more advanced care plans will be made for your specific needs. In most instances the midwife will accompany you to the hospital and facilitate a transfer of care. Each circumstance will be assessed uniquely in collaboration with the client. The midwives will then continue postpartum care following discharge from the hospital (initial)

The only scenario in which it may be possible for a refund to be given is if a client pays ahead of schedule. For instance, if a client pays the entire fee upon returning the signed contract. and care is discontinued before 36 weeks. The amount of the refund will depend on the Payment Option chosen by the client, how many visits were made, what tests were conducted, what services were rendered, and the exact amount of money paid by the client. Not only will Prenatal Care have been given, the birth team is on call for the client and spaces in our calendars have been set aside for the birth and postpartum visits; precluding the birth team from engaging other clients.

Holistic Heritage Homebirth reserves the rights to decline further care in the event of non-payment within agreed upon terms, assessment of client medical or psychological condition(s), or because of noncompliant/uncooperative actions on the part of one parent or both.

I have read and agree to all sections of this contract. It is agreed that Holistic Heritage Homebirth is contracted for the services stated within this agreement. I accept the full financial obligation of all services rendered. I do hereby understand and accept all information, terms and conditions as laid out. I execute this contract voluntarily and with full knowledge of its significance and ramifications.

Signature (Mother)

Date

Printed Name (Mother)

Signature (Father, Partner, Legal Guardian)

Printed Name (Father, Partner, Legal Guardian)

Date