
XIX Nurse-Midwife Services

Participating nurse-midwife providers shall be paid only for covered services rendered to eligible recipients, and services provided shall be within the scope of practice of the nurse-midwife.

For services provided on or after July 1, 1990, payments to nurse-midwives shall be at usual and customary actual billed charges on a procedure-by-procedure basis, with reimbursement for each procedure to be the lesser of the actual billed charge or at seventy—five (75) percent of the fixed upper limit per procedure for physicians.

XX Nurse Anesthetist services

Reimbursement will be made at the rate of seventy—five (75) percent of the anesthesiologist's allowable charge for the same procedure under the same conditions, or at actual billed charges if less.

Exception:

For inpatient delivery—related anesthesia services provided on or after December 1, 1988, a nurse anesthetist will be reimbursed the lesser of the actual billed charge or the standard fixed fee paid by type of procedure. Those procedures and fixed fees are:

Normal Delivery	\$150.00
Low Cervical C-Section	\$202.50
Classic C-Section	\$240.00
Epidural Single	\$236.25
Epidural Continuous	\$251.25
C-Section with Hysterectomy, subtotal	\$240.00
C-Section with Hysterectomy, total	\$240.00
Extra peritoneal C-Section	\$240.00