Scheduling Guide
The Delaware Center for Maternal & Fetal Medicine of Christiana Care
DCMFMCC

Scheduling Protocol

Fax:	**302-319-5681**

Include: **Request for consultation (MUST include EDC, insurance information and indication)**
Prenatals
Labs
Copy of insurance card

We will contact your patient within 48 hours of receiving the request.

Referral Protocol **Patients who do not have referrals in place 24 hours before their appts. will be rescheduled**

When obtaining a referral, precertification or preauthorization the following information must be correct

Provider Information					
Group:	**The Delaware Center for Maternal & Fetal Medicine of Christiana Care**				
Tax ID:	**20-5891272**				
Group NPI:	**1356487854**				
Taxonomy:	**207VM0101X (note this is NOT the OB/GYN taxonomy-must specify MFM)**				
Ind. Provider:	**James Manley**	**Anthony Sciscione**	**Philip Shlossman**	**Jennifer Merriman**	**Vanita Jain**
Ind. NPI	**1285614727**	**1447341920**	**1780662502**	**1215073127**	**1992924344**

Exam Types

Always include a 99 code (consultation, E&M). Many times there is no referral needed for the ultrasound but one IS NEEDED for the consultation. All new patients and many revisits require a consultation.

Exam Types:

Level II and Consultation	99242	76811	76820 (dopplers if needed)		
Follow up Level II	99212	76805	76820 (dopplers if needed)		
TV	99242	76817			
Fetal Echo	99242	76825	76827	93975	93325
BPP	76819				
BPP w/ NST	76818				
Amniocentesis	59000				
1st Trimester Screening (consists of)					
Consultation	99242	Dr. will go in for demise/abnormality, check if referrral needed			
NT measurement	76813		Submit to insurance, check if referral ne		
TWINS NT measurements	76813	76814	Submit to insurance, check if referral ne		
Lab code- NTD labs will submit to insurance.					

Diagnosis:

When appropriate use a primary ICD-9 **AND** a **655.83** (fetal anomalies known or suspected).
Certain indications such as exposure to meds may not qualify as a high risk pregnancy for certain plans.

Special note:

Aetna requires that all patients with HMO plans who need pregnancy related testing be preauthorized through the MOMS TO BABIES {Beginning Right} program.

Beginning Right 800.272.3531

Aetna and BCBS will no longer give pre-auths retroactively unless a proven medical emergency.

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