



Class Completion and Insurance Reimbursement Letter

Client Name _____

Class Type _____

Date of Class _____ Amount of Payment _____

The above client attended a prenatal education class and paid tuition in full. Tuition covers one pregnant client and one partner/support person. If the client attends alone, the tuition remains the same.

Authorized Administrator: Nicole Shanks, CEO, RN, CCE - Prepare The Nest

WA State Tax ID # 603153633 Federal EIN # 81-4995734 (NSCS, llc., dba. Prepare The Nest)

Subscriber's Name _____

Policy Number _____

*CPT Codes for class attended _____ *ICD Code _____

NOTE: This form must be accompanied by proof of payment such as, a copy of your Prepare The Nest class receipt to confirm your payment and registration in the class or a copy of your credit card statement. We recommend making a copy of this form for your records before submitting to your insurance company. Also, be sure to submit the following applicable CPT codes (required by most insurance providers). Check with your own insurance company regarding your prenatal education reimbursement benefits and other possible requirements.

Here are the codes your insurance may need for billing and reimbursement. Please call your insurance to ask which code may apply.

*CPT CODES

S9436: Childbirth Education/Lamaze Classes, non-physician, per session

S9447: Infant Safety (including CPR Classes), non-physician, per session 98960-98962: Non-Physician provider doing education - all prenatal classes

*ICD CODES

ICD-10-CM Diagnosis Code z32.2 - Childbirth Education: childbirth instruction

ICD-10-CM Diagnosis Code z71.89 Health Education: individual or group safety and first aid education, CPR/Safety classes