

# Crestwood Maternity Center Pre-Registration for Mother and Baby

Mother's Due Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ OB Physician: \_\_\_\_\_ Pediatrician: \_\_\_\_\_

## MOTHER-TO-BE INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_ Birth date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age: \_\_\_\_\_  
Address (Street, City, Zip): \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_ Employer Phone Number: \_\_\_\_\_  
Employer Address (Street, City, Zip): \_\_\_\_\_  
\_\_\_\_\_

## SPOUSE INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Social Security #: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_ Employer Phone Number: \_\_\_\_\_  
Employer Address (Street, City, Zip): \_\_\_\_\_

## RESPONSIBLE PERSON: *(Person responsible for any payment due)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Relationship to Mother-to-be: \_\_\_\_\_  
Address (Street, City, Zip): \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer Address (Street, City, Zip): \_\_\_\_\_

## OTHER GUARANTOR: *(Insurance Card Holder / Person responsible for any payment due)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Relationship to Mother-to-be: \_\_\_\_\_  
Address (Street, City, Zip): \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer Address (Street, City, Zip): \_\_\_\_\_

## EMERGENCY CONTACT: *(Other than spouse or responsible person)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Relationship to Mother-to-be: \_\_\_\_\_  
Address (Street, City, Zip): \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer Address (Street, City, Zip): \_\_\_\_\_

## INSURANCE INFORMATION: *(Please attach a copy of both sides of your insurance card)*

**Primary Insurance Carrier:** \_\_\_\_\_ Name on Insurance Card: \_\_\_\_\_  
Address on Card (Street, City, Zip): \_\_\_\_\_  
Company Issuing Card: \_\_\_\_\_ Effective Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Contract #: \_\_\_\_\_ Group #: \_\_\_\_\_ Pre-certification Phone Number (if required for admittance): \_\_\_\_\_  
Insurance Company Phone Number: \_\_\_\_\_

**Secondary Insurance Carrier:** \_\_\_\_\_ Name on Insurance Card: \_\_\_\_\_  
Address on Card (Street, City, Zip): \_\_\_\_\_  
Company Issuing Card: \_\_\_\_\_ Effective Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Contract #: \_\_\_\_\_ Group #: \_\_\_\_\_ Pre-certification Phone Number (if required for admittance): \_\_\_\_\_  
Insurance Company Phone Number: \_\_\_\_\_

Additional Information: \_\_\_\_\_

*If you have any questions or wish to pre-register over the phone, please call 256.429.4878, Monday - Friday 7 AM - 7 PM.*

**You may also pre-register online at [www.CrestwoodPrenatalRegistration.com](http://www.CrestwoodPrenatalRegistration.com).**

## Maternity Parking and Entrance

Our dedicated entrance in the Crestwood Medical Pavilion (*connecting building to the right of the Visitors Entrance*) includes free valet parking Monday - Friday 7 AM to 7 PM. However, if your delivery calls for another time of admittance, you'll still have secure, convenient parking with easy hospital access at the same dedicated entrance. Wheelchairs are available upon request.

## Hospital Insurances

For your convenience, Crestwood Medical Center participates with most insurance carriers. ***By completing the pre-registration information and returning to us around your 16th week of pregnancy, we can verify important eligibility information and prior authorization requirements.***

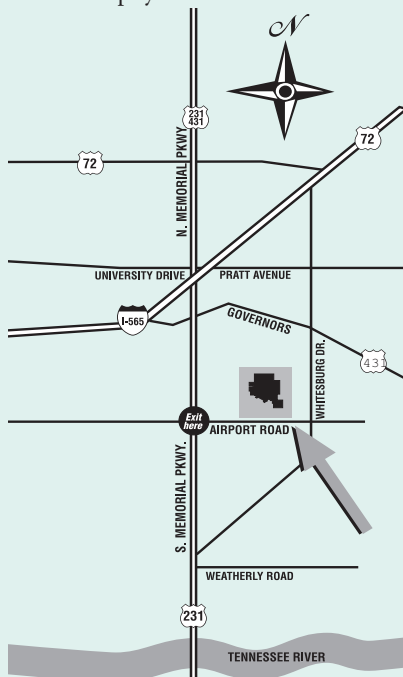
- Additional forms, required by some insurance companies prior to processing of claims are the responsibility of the patient. We will be happy to help you in completing these forms at any time, however, it is best if they are presented at time of pre-registration.
- Your physician is familiar with your medical history and should ultimately obtain prior authorization for delivery. However, we will work with your physician's office to insure proper authorization from your insurance provider as necessary.
- When two or more group hospitalization policies are presented, we will accept multiple assignment of benefits.
- Medical expenses not covered by your policy will remain the responsibility of the patient.
- With proper authorization, Crestwood Medical Center will release medical and supporting documentation as compiled in the medical record during this admission for purposes of benefit payment.

## Prepared Childbirth Classes

At Crestwood Maternity Center, we feel that education is an integral part of your pregnancy. We offer several educational classes including newborn, sibling, breast-feeding, and prepared child birth classes. Prepared Childbirth Class is offered as a four week course or a one-day Saturday session that provides participants with knowledge about the stages of labor, birth, hospital procedures, different types of anesthesia, relaxation skills and comfort measures. The information provided will enable you to make better, more informed decisions regarding your birth experience. A tour of the Maternity Center is included in the class. ***For more information or to register for a class, please visit [CrestwoodMaternityCenter.com](http://CrestwoodMaternityCenter.com) or call 256.527.0285.***

## Professional Service Fees

Crestwood Medical Center will take care of processing your hospital fees for billing and payment. Charges for professional services such as your obstetrician, anesthesiologist, radiologist, pathologist and pediatrician are separate from hospital charges and will be billed by each individual physician.



### *Suggested Checklist for your Hospital Stay:*

- Insurance Information
- List of friends and families' phone numbers
- Labor Helpers: tennis ball for massaging back, heavy socks, hairbrush, snack for dad
- Camera
- Magazines/books
- Gown/robe (hospital gowns will also be provided)
- Toiletries and grooming essentials
- Going home outfits for you and baby
- Receiving blanket
- Infant car seat
- Outfit/props for newborn photos

