A Note About Our Billing Practices

Sorting out your insurance policy and medical bills can be a challenge these days. Here are some key things you should know as a patient of Carolina OB/GYN.

Payment at time of service
In general, payment such as copays, deductible and coinsurance that apply to your services are due at checkout on the day of your visit. We will make an attempt to collect just the right amount but sometimes your insurance company will process your claim differently than we expect, and you may be billed after the fact for a remaining balance. If you are having a financial hardship, please talk to the staff about other arrangements. If you don’t have insurance, we do offer a self-pay discount on most services. Just so you know, contracts with your insurance company do not allow us to “waive” your copay.

Your insurance plan and you
There are so many health insurance plans out there in our marketplace, from states all around the country and with varieties of benefit packages. Because of this, we rely on you as the patient to know the basics of your insurance plan – what’s covered, what’s not, when you need a referral and the dollar amount and/or percentage you’ll need to pay out of pocket for services.

If you have Medicare you may be asked to sign an ABN or “Advanced Beneficiary Notice” for services you receive that are either not covered by Medicare, only covered every so often or only with a particular diagnosis. Please carefully review the ABN before you sign it and ask if you have any questions!

Preventive vs. sick care: about your annual GYN exam
Many insurance policies cover preventive (also called routine or well) care differently from sick/problem visit care. Some may not cover preventive care at all – or vice versa may pay 100% up to a certain dollar limit – but only if it’s coded as preventive or routine. This is an area where you should be especially familiar with your insurance company’s benefits. When we bill your insurance company, the codes we submit must be consistent with nationally accepted coding practices, which means we cannot bill a visit with a certain code that is incorrect, just to get the claim processed in your favor. If your doctor collects a pap smear at your visit, we may bill a special code for collection of the pap in addition to the charge for your visit.

When you come for your annual/yearly and you also have a problem…
Many patients aren’t aware that if your doctor provides evaluation and management of a problem you are having, during the course of your routine annual exam, he or she may charge a preventive/well service along with any “sick” services (in billing terms this is called a “split visit”). By addressing these issues during the preventive care exam, we hope to avoid the inconvenience by asking you to return for a separate visit. Your
insurance company may have special guidelines when it comes to processing these charges together on the same day.

**Lab bills**
If your physician collects a sample and sends it to a lab (pap smear, biopsy, culture etc.), you may receive a bill from the pathology laboratory and/or pathologist physician. Unless you tell us otherwise, we’ll send your specimen to Coastal Pathology or Roper St. Francis Healthcare Laboratory. Some insurances require that all labs be done by a designated laboratory. We expect you to know your insurance’s preferred lab and tell your medical assistant or nurse at your visit.

**Billing quality**
Our office works hard to bill your services according to national coding guidelines and standard insurance company regulations. There are times when you receive your EOB (Explanation of Benefits) from your insurance company – or a bill from your doctor (Physicians Billing) – and you feel something is wrong. If you think your insurance company processed your claim incorrectly, please feel free to give them a call and question it. If you think the charges we submitted may be incorrect, you may call our office and request that a certified coder review the doctor’s documentation to ensure your visit was billed correctly. And finally, if you receive a bill and need to establish a payment arrangement or request financial assistance, Physicians Billing will work with you to do so.

**Questions?**
At Carolina OB/GYN, we hope to keep open communication with you about billing and insurance. We appreciate you as a patient and don’t want billing issues to get between you and excellent care. If you have any questions – before, during or after your visit – please don’t hesitate to ask. Thank you for choosing Carolina OB/GYN!

**Acknowledgement**
I have read and understand the billing practices described above.

________________________________________  ___________________  ____________
Patient Name    Patient Signature   Date