

Will Insurance Cover Everything?

From your Patient Accounts Department

Health insurance coverage is complicated and can be hard to understand. Here are some helpful points to remember when scheduling a procedure or surgery.

You will be responsible for paying each provider for their services according to the individual plan benefits as determined by your insurance company. These may include:

Co-insurance - The fixed percentage of the allowed charge that the member's contract denotes as the patient's responsibility. These amounts can be collected at the time of service by contracting providers. Co-insurance amounts are generally 10, 20, or 50 percent.

Co-pay, Co-payment - A specific set amount patients are required by their contract to pay on a given service. These amounts are not percentages of an allowance—co-insurance, but are a flat fee per the service. An example would be a \$15 co-pay on office visits. A co-payment does not accumulate towards a specified maximum.

Deductible - A specified amount of out-of-pocket expense that a patient must pay in a benefit period before reimbursement will begin. These services must be submitted so that the incurred expenses may be calculated toward satisfying the deductible amount. Deductible amounts can be collected at the time of service by a contracting provider.

Pre-Authorizations/Referrals - Our staff works hard on your behalf to obtain any Pre-Authorizations and/or Referral approvals for your procedure or surgery. However, this does not guarantee coverage or payment. Many insurance plans state that this is the patient's responsibility and you may want to verify this with your insurance carrier prior to your services.

Questions to Ask - You should call your insurance company and ask if the services you are scheduling are covered by your plan and what you might owe.

When calling your insurance company specifically ask:

- What is my co-pay? _____
- What is my deductible? _____
- What is my co-insurance out-of-pocket maximum? _____
- Record the date and name of person(s) you speak with.

Statements - It is possible you may receive services from multiple providers and thus, **receive multiple bills**. These providers may include but are not limited to:

- Your Surgeon
- Their Assistant Surgeons (PA or ARNP)
- Facility where services are rendered
- Anesthesiologists
- Pathologists
- Radiologists

If you have a deductible and are asked to pay at the time of check-in at the facility (hospital or surgery center), please contact our office and let us know, it would be greatly appreciated.