

Financial Policy:

Office Visit:

We participate in most insurance plans, including Medicare. It is your responsibility to check with your plan prior to your visit to make sure we are participating physicians. Failure to do this could result in reduced payments by your insurance company. We do not file automobile, general liability, homeowner's or workman's compensation insurance.

If you have HMO/POS insurance, it is your responsibility to obtain a referral number from your PCP prior to being seen. If you fail to obtain this, the bill is your responsibility. You and your insurance company are responsible for your bill. Knowing your insurance benefits is your responsibility. Any questions concerning your coverage should be directed to your insurance company.

If your primary insurance company requires a co-payment, you must make the co-payment at the time of service. Failure to pay your co-pay at the time of service will result in a billing fee of \$25.00. Please remember that we are contractually obligated by your insurance company to collect your co-pays at time of service.

The balance of your charges will be billed to your insurance company. After payment of insurance company, any remaining balance will become patient responsibility which is due upon receipt of statement.

Proof of current, valid insurance must be provided at time of service. If you do not provide this information, you will be considered a self-pay patient. Self-pay patients are required to pay their office visit charges in full. Failure to pay your office visit charges at the time of service will result in a billing fee of \$25.00. You will be billed for the balance of your charges. Payment in full will be expected with receipt of your statement.

Failure to receive your statement does not relieve you of your financial obligation. It is your responsibility to notify us of any changes in your billing information.

We accept cash, checks, money orders, and major credit cards. Returned checks are subject to a \$25.00 return check fee. Past due accounts are subject to our collections process and any fees assessed by a collection agency. You agree in order for us to collect any amounts that you owe, we may contact you at any number associated with your account, including wireless cellular numbers. We may also contact you using any email address you provide. Methods of contact may include, but not be limited to, pre-recorded, artificial voice messages, or automatic dialing devices.

Procedure:

As a courtesy to our patients, our office will pre-certify procedures performed at Braselton Endoscopy Center, LLC and Gainesville Endoscopy Center, LLC with your insurance company. However, this is not a guarantee of payment. It is your responsibility to verify benefits with your insurance company prior to having the procedure.

Endoscopy

If you are scheduled for an endoscopy, a physician in our group will perform it. You may receive several bills for this service:

-If your procedure is scheduled at Gainesville Endoscopy Center, LLC or Braselton Endoscopy Center, LLC, you will receive a bill from Gastroenterology Associates of Gainesville, PC (for the physician's charge of the procedure) and Gainesville Endoscopy Center, LLC or Braselton Endoscopy Center, LLC (for the facility charge of the procedure). You will also receive a bill for the anesthesia performed. If polyps or biopsies are removed, you may also receive a bill for pathology services, if not covered in full by your insurance carrier.

-If your procedure is scheduled at Northeast Georgia Health Systems or Habersham County Medical Center, you will receive a bill from Gastroenterology Associates of Gainesville, PC (for the physician's charge of the procedure) and Northeast Georgia Health Systems or Habersham County Medical Center (for the facility charge of the procedure). You will also receive a bill for the anesthesia performed. If polyps or biopsies are removed, you may also receive a bill for pathology services, if not covered in full by your insurance carrier.

Your Care Coordinator will pre-certify any procedures at Gainesville Endoscopy Center, LLC and Braselton Endoscopy Centers, LLC. If there is an upfront amount due for the facility portion, you will be notified of this amount owed via a phone call or letter. Otherwise, your insurance company will be billed and you will be billed for the remaining balance. Please remember, we only collect upfront for the estimated facility fees. We will bill you after insurance has paid for all other services and fees.

Questions?

If you have any questions regarding an outstanding balance or how your procedure will be submitted to insurance please contact our Billing Department at 678-997-2100.

Thank you for choosing Gastroenterology Associates of Gainesville, P.C.