

South Metro Obstetrics & Gynecology

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James R. Lingle, MD
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Dear Patients,

As part of our ongoing effort to help control the cost of health care for our patients and to streamline our administrative processes, the physicians and staff at South Metro Ob/Gyn has implemented a modification to our “Payment at Time of Service” policy. A new automated credit card system, **Modern Payments**, has been established for the convenience of all patients in our practice. This arrangement will simplify payment of your potential co-pay, deductible, or any non-covered Ob/Gyn services as defined by your insurance provider.

This system is similar in practice to car rental agencies and hotels worldwide. The **Modern Payments** system will securely hold your credit card information until your health insurance processes your claim and mails you their Explanation of Benefits which outlines the patient’s financial obligation. Your credit card will only be charged when the exact patient responsibility charges are specified by your insurance company.

South Metro Ob/Gyn continues to put the well-being of our patients first. It is the intent of this policy to save you time, to simplify the billing process, and to be environmentally friendly by reducing the amount of paper generated within our practice.

If you have any questions, please don’t hesitate to contact South Metro Ob/Gyn.

Thank you,

The Physicians and Staff of South Metro Obstetrics & Gynecology



OB/Gyn Affiliates
An OB/Gyn Medical Group
Administrative Offices
1745 Shea Center Drive, 4th Floor
Highlands Ranch, CO 80129
720/344-4915 303/678-0823 (Fax)

Littleton OB/GYN Associates, PC
Debra H. Bowman, MD, PC
OB-GYN Center, PC
RidgeGate OBGYN at SkyRidge, PC

Robert B Gore, MD, PC
Lone Tree OB/GYN, PC
Sheri L Gipson, MD, PC
South Metro Obstetrics & Gynecology, PC

The Women's Group, PC
Women's Health Care Associates, PC
Women's Health Consultants, PC

Why has your office made this change?

We are changing our financial policy to decrease our billing expenses and minimize the amount of credit we extend to our patients. We are not a financial institution. Using an electronic payment system will also be an advantage to you, our patient, by decreasing the bills you receive and the checks you must write and mail.

What are the benefits of electronic payment systems?

- Eliminates the possibility of lost or stolen checks
- Eliminates postage expense and reduces the risk of late payments
- Ensures rapid, timely, and accurate payments
- Helps to ensure security and confidentiality for all transactions
- Allows patients to schedule future payments

Who will have access to my account information?

The same people who would have access to your information had you paid over the phone or mailed a payment with your statement will have access to your account information with our electronic payment system.

How is my debit/credit card/checking account information kept secure?

Your information is stored on the Modern Payments secure website, which has the same HIPAA security as all of our patient records. With Modern Payments your billing information is just as secure as PayPal, Amazon.com, United Airlines, etc.

How long is my authorization effective?

Your signed authorization does not expire unless you terminate the agreement with a written request.

How will I know how much I will be charged?

Our office can give you an estimate of the fees we will be billing to your insurance company. Your personal insurance plan and benefits structure will determine what your patient responsibility will be. We will only charge your account for the amount listed as patient responsibility on the Explanation of Benefits (EOB) from your insurance carrier. We encourage all of our patients to become familiar with the terms of their coverage.

Will I be notified before a charge hits my account?

Most insurance companies send their patients a copy of the explanation of benefits (EOB). You can expect our office to charge your account within a couple of days after you receive your EOB.

Will I receive a receipt for my payment?

If you provide us with an email address, a receipt will be emailed to you as soon as your payment has been processed. If you do not have an email address, you may request a receipt be sent to your home address.

What if I disagree with an amount I have been charged?

The actual amount of the charge can only be disputed with your insurance company. If you feel the "patient responsibility" portion of the explanation of benefits (EOB) is inaccurate, you must resolve this issue directly with your insurance company. Any change in the EOB by the insurance company will be reflected as a credit or additional charge on your credit card, HSA debit card, or directly to your checking or savings account.

What if I do not have a credit or debit card?

In addition to credit and debit cards, we accept H.S.A. (Health Savings Account) debit cards, and checking or savings accounts. We also accept cash payment at the time of service.

What happens if I do not have enough funds in my account to process a payment?

If the primary payment source on file does not have sufficient funds we will contact you for an alternative payment method.

Revised: 5/09

Monica C. Abarca, M.D.	Elise Chu, M.D.	Robert B. Gore, M.D.	William H. Lee, M.D.	Pamela K. Snyder, M.D.
Carolyn F. Abman, M.D.	A. Rachel Corbett, M.D.	Ann J. Granadillo, M.D.	James R. Lingle, M.D.	John C. Stallworth, M.D.
Karen Ashbeck, D.O.	Bruce R. Dorr, M.D.	Steven M. Grover, M.D.	Susan Ljunghag, M.D.	Jyl M. Voss, M.D.
John D. Bell, M.D.	Theresa Eiten, M.D.	Susan K. Harding, M.D.	Michele McGould, M.D.	David J. Watson, M.D.
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Catrina Bubier, M.D.	Sheri L. Gipson, M.D.	Rodney L. Lamb, M.D.	Randi McVay, M.D.	Melissa P. Zart, M.D.

FINANCIAL POLICY FOR SOUTH METRO OBSTETRICS & GYNECOLOGY

The physicians of *South Metro Obstetrics and Gynecology* appreciate the difficult financial times we are all enduring. Our office provides medical services in good faith with the expectation that they will be paid for those services.

In order to clarify our position with regard to receiving payment, we have provided this information to outline our financial policy as they relate to and the complexities of medical health insurance. Today's medical health insurance is complex, therefore, we are providing the following information to help educate our patients regarding these issues.

Your Medical Insurance:

Your medical insurance policy is a contract between you and the insurance carrier. *South Metro Obstetrics and Gynecology* is not a party to that contract. Your coverage, the requirements for pre-authorization, pre-certification, second surgical opinions, deductibles, co-payments and co-insurance are all defined in your policy. You are responsible for reading, understanding, and following the procedures outlined in your policy handbook. We will be happy to assist you when and where we can with specific questions and concerns. **Your employer or the federal government determines the range of benefits eligible to you.**

Who is Responsible?

You are responsible for all charges, whether they are incurred in the hospital or office from the date of service. As a courtesy to you, we are happy to assist you by processing all claims for our services with your primary insurance company. If you have secondary insurance, we will automatically file a claim with them as well. Once we know your insurance has been paid in full, if there is a remaining portion of the bill, it will be transferred to a patient payment responsibility category (a credit or a debit). **Accurate, up to date information is the patient's responsibility. Inaccurate information will result in insurance claim denials and make it difficult or impossible to assistance you. This may result in our request for immediate payment for the services that were provided to you.**

Copayments, Deductibles, and Coinsurance:

South Metro Obstetrics and Gynecology contracts with insurance plans that in turn contract with many area employers who have HMO's, PPO's, EPO's and various insurance companies and government agencies including Medicare. Because of our contractual obligation with these various plans, we agree to accept a percentage of billed charges as payment in full. However, the patient will often have financial responsibility for a portion of these charges.

**** Co-payments must be paid at the time of the office visit **** We cannot waive any co-payments, deductibles or coinsurance amounts defined as patient responsibility under the terms of our contract with these various insurance plans. In fact, such a waiver may violate state and federal laws. For patients with deductibles that have not been met or a co-insurance percent, we require patients to sign an agreement with Modern Payment Systems (referred to as Mod-Pay) to automatically bill their charge or debit card upon receipt of the insurance Explanation of Benefits. For your convenience, we accept Visa, MasterCard and American Express credit cards.

Prior Authorization and Referral Forms:

If your medical insurance plan requires that you have a referral form prior to being seen by one of our doctors (a specialist) and you come to our office to be seen without the form, we will not be able to see you. We realize this is an inconvenience, but without the referral form the physician will not be reimbursed. If you wish to be seen without the referral form, you must sign a waiver of financial responsibility and pre-pay that visit by cash, check or charge.

Prompt Payment Is Expected:

All medical services provided must be paid at the time the services are rendered to the patient. Our office staff will assist you in determining what portion of your bill will be your responsibility if you have insurance. We collect the patient's responsibility portion by Mod-Pay guarantee following the insurance payment.

***Obstetrical and Surgery Patients** – After your first visit to our office (OB) or the decision for surgery (GYN), our staff will verify benefits with your insurance company and obtain the approximate amount that your insurance will not cover in addition to your deductible and co-insurance.

- **OB Patients** - The portion that is your responsibility will be divided into monthly installments over a 90 day period and/or fully paid by the beginning of the 24th week of pregnancy. Your financial obligation will be set up on "Mod-Pay" to automatically pay your responsible portion.

- **Surgery Patients** – The portion that is your responsibility must be paid at the time of your pre-operative exam OR you may choose to guarantee the final balance on our "Mod-Pay" Plan.

After your insurance has reimbursed *South Metro Obstetrics and Gynecology*, there may be an unpaid balance. We will process the amount that you owe through "Mod-Pay" after our billing company has notified you. If there is a credit due on the statement, a refund will be mailed to you.

***South Metro Obstetrics and Gynecology* does not carry patient accounts without a specific written payment plan arrangement through Modern Payment Systems. Contact Marcie in our office to arrange this at (303) 788-7888.**

How can I pay?

We accept payment by cash, check, Visa, MasterCard, Discover and American Express and through Modern Payment Plan (Mod-Pay). By using Visa/MasterCard, for co-payments, etc. you assign the right to *South Metro Obstetrics and Gynecology* to bill future co-payments and balances, etc. on your credit card.

Use of Collection Agencies:

Defaulting on a payment plan may cause your account to immediately be turned over to a collection agency. Payment plans can be arranged by contacting our patient accounts receivable representative in the business office at 303-788-7888.

Once a patient account has been turned over to a collection agency, the patient may be discharged from the practice and cannot schedule further appointments with our physicians unless the account is paid in full with cash and all future services are paid with cash or charge prior to being seen by a physician.

If you have a question about your personal account balance, please contact our patient accounts receivable representative in the business office at 303-788-7888.

Personal Balance Questions:

The bills that you receive from South Metro Obstetrics & Gynecology are separate from any hospital, radiology, pathology or reference laboratory bills.

THE “WELL-WOMAN” EXAM:

Insurance issues, requirements and coverage are ever changing. We are making every effort to be in compliance and to eliminate payment denials before they occur. Your insurance plan may or may not cover routine preventative services (well woman exam).

We are legally obligated to assign procedure codes based on the service provided to you, whether it is a well woman exam or a visit to take care of problems or both. We cannot change the insurance coding to allow you to receive benefits for non-covered benefits if your policy does not allow for the annual physical benefits. ***Based on the kind of coverage you have, some or all of this cost may have to be billed to you.***

Please keep in mind that some insurance companies require 2 co-payments if the annual well-woman exam is done along with any other gyn services provided. **It depends entirely on your insurance plan coverage.**

Financial Payment Plan –

Minimum Payments for obstetrical and surgical care cannot be less than \$125.00 and the entire balance of your bill must be paid within 90 days of the service that is provided.

Payment in full at the time of service – we will apply the 25% discount (Federal Law limits this to non-insured only).

By my signature below, I acknowledge that I have read and fully understand the Financial Policy of South Metro Obstetrics and Gynecology.

Date: _____

Signature of Patient or Patient Representative: _____



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 720/344-4915 303/678-0823 (Fax)
 www.obga.net

**SOUTH METRO OBSTETRICS & GYNECOLOGY
 ELECTRONIC PAYMENT AUTHORIZATION via MODERN PAYMENTS**

As a medical practice our goal is to provide you with the best, most current medical care available in a positive and supportive environment. As a small business we must constantly strive to reduce and minimize our expenses and costs of doing business. Today insurance plans are becoming more complicated in how they determine what the medical practice can collect and what the patient actually owes. Insurance plans now have numerous different co-payments and deductibles that are often confusing to their clients and can even elude the smartest medical practice office manager. What a patient actually owes once insurance pays its portion is a function of the individual's co-payment, deductible, coinsurance, maximum out-of-pocket expenses and where the patient falls within this continuum.

In an effort to streamline this system and make it more cost effective, we are asking the patient to provide us with a credit card, HSA debit card, or a voided check at the time of service. This system is used in all hotels, rental car companies, clinical laboratories, gasoline stations, Amazon.com, PayPal, and mail order pharmacies. Nothing will be charged to your credit card or checking account until the Explanation of Benefits (EOB) returns from your insurance company. Our billing company will enter the contractual adjustments and amount paid by your insurance company to your account with us. The only amount charged to your credit card or checking account will be the **PATIENT RESPONSIBILITY** portion as defined on your insurance company's EOB (similar to an invoice). You will receive an E-MAIL notification with the amount charged to your credit card or deducted from your checking or savings account. This will significantly reduce the costs of repeat statements and collection attempts. Thank you for your cooperation and understanding.

If you have questions about this process please call our Billing Department at 303-788-7888 and ask for Marcie at extension 325.

AUTHORIZATION TO CHARGE MY CREDIT CARD, HSA DEBIT CARD, CHECKING OR SAVINGS ACCOUNT FOR THE "PATIENT RESPONSIBILITY" PORTION OF MY INSURANCE PAYMENT

I authorize OB/GYN Affiliates and Modern Payments, Inc. to charge my credit card, HSA debit card, or my checking or savings account with the balance due (patient responsibility) portion of my insurance explanation of benefits (EOB). If I feel the "patient responsibility" portion of the explanation of benefits (EOB) is inaccurate, I must resolve this issue directly with my insurance company. I understand that the actual amount of the charge can be disputed only with my insurance company, and any change in the EOB by the insurance company will be reflected as a credit or additional charge on my credit card, HSA debit card, or directly in my checking/savings account.

PATIENT NAME: _____ SIGNATURE _____

CHARGE CARD HOLDER'S NAME & ADDRESS: _____

_____ CITY: _____ ST: _____ ZIP CODE: _____

DATE: _____ DOB: _____ E-MAIL (Please print clearly) _____

Note: By providing your e-mail address we will be able to e-mail you a notice of the expected amount that will be charged 4 days prior and a statement on the day we charge your patient balance to your credit card, HSA debit card, checking or savings account. This gives you a few days to call the billing company if you have questions.

Revised: 11/09

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