



FINANCIAL POLICY

INSURANCE INFORMATION - PLEASE BRING YOUR INSURANCE CARD WITH YOU TO YOUR APPOINTMENT. Lafayette OB/GYN files insurance claims on your behalf as a courtesy. To insure claims are filed timely and accurately, Lafayette OB/GYN requires that insurance information be updated annually. If you present for your visit without valid insurance information, we will not be able to file insurance claims on your behalf and you will be charged for any services received.

CO-INSURANCE – Co-insurance is based on the pre-determined level of coverage outlined in your insurance policy – many commercial insurance companies pay on claims at a level of 80/20, meaning the insurance company will consider and pay on 80% of the charges and the remaining 20% is considered the patient's co-insurance. It is important that you review your insurance coverage to determine your level of co-insurance. If your insurance coverage only pays a percentage portion of your insurance claims, then you will be billed for any remaining balance - deductibles or co-insurance - determined by your insurance company, along with any amount that your insurance considers to be over the usual and customary fee. Additionally, many insurance companies maintain a preferred provider network that allows for reduced co-insurance amounts when patients utilize in-network, preferred providers. It is the patient's responsibility to verify network participation prior to obtaining health care services. In the event that Lafayette OB/GYN has a preferred provider agreement with your insurance, any applicable write-offs will be taken prior to billing you for any remaining balance.

CO-PAYMENTS - Lafayette OB/GYN is a preferred provider with many third party payers. Many of these insurers require a minimal co-payment for office visits. If your insurance coverage requires a co-payment for office visits, you will be required to pay this at the time you check-in for your appointment.

SELF-PAY PATIENTS (no insurance) – Patients without any valid insurance coverage will be required to pay for any charges at the time of service. If you are unable to pay the balance in full, a payment plan may be arranged with our Business Office.

CODING FOR YOUR SERVICES - Many insurance companies have restrictions on the type of services that are covered by their policies. For example, preventative services may be excluded or limited to one preventative visit in a 12-month period, or problem related visits might be subject to a deductible, etc. It is the patient's responsibility to know the limitations of her particular insurance coverage. Lafayette OB/GYN cannot charge for services based on the limitations of your individual insurance policy. Government regulations dictate that all health care providers must submit claims that accurately reflect the services that are provided and documented in the patient's medical record. Please don't request our staff to bill services in a particular manner in an effort to enhance reimbursement by your insurance company. To maintain compliance with current government regulations and uphold the highest ethical standards, our staff is under strict guidelines that demand that they code services to the highest degree of accuracy. Based on this, in the event you are seeing a Lafayette OB/GYN physician for preventative services, but at the same encounter, address additional problem-related issues, Lafayette OB/GYN may be required to charge for these additional services. This occurs when the additional issues addressed meet certain criteria that are considered above and beyond the scope of the preventative visit. This is necessary in order for Lafayette OB/GYN to meet established correct coding guidelines.