



# Understanding Your Bill

## **Initial Consultations**

If you are evaluated by a physician or physician assistant in one of our offices for an initial consultation, charges incurred cover the time required to obtain a history, your physical examination, review of X-rays, MRIs, and CT scans, review of laboratory studies, review of previous medical records, discussion of your diagnosis and treatment plan, and preparation of a detailed written report which will be sent to your referring physician.

You must be referred by another physician for an initial consultation.

Insurance co-payments are due at the time of your visit.

## **Office Visit**

An “office visit” is exactly the same as a “consultation”, except that there is no physician referral. Our practice is a specialty practice that works almost exclusively on a referral basis, so this type of charge is not commonly used.

## **Follow-up Visits**

Subsequent or follow-up visits are typically briefer and have a lower fee than initial consultations.

Insurance co-payments are due at the time of your visit.

## **Hospital Care**

If you receive non-surgical care in a hospital setting, charges apply for initial consultation and for hospital visits on subsequent days, similar to those described above for the outpatient setting.

Insurance co-payments are NOT required for inpatient services.

## **Surgical Care**

If you undergo a surgical procedure with one of our surgeons, charges are typically billed as a “**global fee**”, which covers the surgeon’s fee for the surgical procedure, as well as all subsequent inpatient and outpatient care for a “global period” of **90 days** after the procedure. (less for some minor procedures).

The fees paid to Surgical Spine Associates specifically DO NOT include fees for the hospital, anesthesia services, operating room time, Xray CT and MRI interpretation by a radiologist, and other hospital charges which are billed separately.



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## **Information for Patients with Insurance**

Surgical Spine Associates participates with most major insurance plans including Medicare, Medicaid, Highmark, UPMC, Aetna, United Healthcare and others. A complete up-to-date list is maintained on our website [www.surgical-spine-associates.com](http://www.surgical-spine-associates.com).

(Note: This list is updated periodically. Insurance contracts require renewal on a yearly basis, so check with your insurance carrier if there is any doubt about our participation.)

If Surgical Spine Associates “participates” with your insurance plan, then we have negotiated an agreement with your insurance carrier, and have agreed to accept a predetermined amount for services rendered.

Under the terms of all insurance plan, the patient is responsible for obtaining their own referral.

**EVERY INSURANCE PLAN IS DIFFERENT. YOU MUST READ YOUR PLAN CONTRACT TO DETERMINE YOUR SPECIFIC COVERAGE.**

Even if you have insurance coverage, you may still be responsible for some or all of the fees for your care:

1. Most insurance plans require small co-payments for initial consults and office visits. Co-payments are due and payable at the time that services are rendered.
2. Pre-approval of services is required by many carriers. Without pre-approval, you may be responsible for fees.
3. Your insurer may only pay a certain percentage of your charges, in which case you will be responsible for the balance.
4. Your insurer may choose not to approve payment for certain services base upon the determination of “medical necessity”. In this case, you can appeal the insurers decision. We can support you in your appeal, but your insurer makes the final determination, regardless if your surgeon documents his opinion on the medical necessity of the procedure.
5. Your insurer may place lifetime or annual limits on some care, such as physical therapy services. Your surgeon CANNOT appeal coverage decisions based upon these limits.
6. Your insurer may consider certain procedures “experimental”, in which case they may choose not to cover services.
7. Your insurer may choose not to cover services of a physician assistant.

**AGAIN: EVERY INSURANCE PLAN IS DIFFERENT. YOU MUST READ YOUR PLAN CONTRACT TO DETERMINE YOUR SPECIFIC COVERAGE.**



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## **Information for Patients with Nonparticipating Insurance**

- If your insurer does not have a contract with Surgical Spine Associates, then services rendered by our physicians are considered “out-of-network”.
- Check your plan contract to see if “out-of-network” services are authorized.
- Typically, “out-of-network” services, if covered, are covered at 50-80% of our usual and customary fees. You **will be** responsible for any balance not covered by your insurer.
- If your insurance plan does not allow “out-of-network” services, see information below for patients with no insurance.

## **Information for Patients covered by Workers Compensation or Auto Insurance**

- Surgical Spine Associates DOES participate with many workers compensation and auto insurance plans.
- We require a determination letter from the compensation or auto carrier that you have a valid claim, and that payment is guaranteed.
- Many compensation and auto claims are contested or disputed – therefore, without a letter of coverage, we require coverage from a standard health insurer (such as Blue Cross/Blue Shield) as a “backup” plan.
- If you do not have a letter of determination yet, and have no standard insurance as a “backup”, then see the information below for patients with NO insurance.

## **Information for Patients with NO Insurance**

- We will not turn away patients because of a lack of insurance.
- Just like our insured patients, you will need to sign a financial responsibility form.
- Call our billing office to make arrangements for payment – our staff can arrange a payment plan.
- In cases of demonstrated financial need, fees can be reduced or waived.
- In the case of inpatient care or surgery, keep in mind that separate arrangement will need to be made with the hospital which bills separately for its services.

## **Payment Options**

Surgical Spine Associates accepts the following forms of payments:

- Cash, Check, or Money Order
- Visa, Mastercard, Discover, American Express
- Debit Cards