

ENDOSCOPIC PROCEDURES

FREQUENTLY ASKED BILLING QUESTIONS

Comprehensive Gastrointestinal Health's endoscopic procedural fees include the services of the gastroenterologist and the use of the facility and equipment. Anesthesia and pathology fees will be billed separately. Since we are different organizations, sometimes our fees are processed differently. We have attempted to provide information regarding the most common questions that arise.

MOBILE ANESTHESIOLOGISTS

FREQUENTLY ASKED BILLING QUESTIONS

Mobile Anesthesiologists, LLC, is the exceptional practice providing anesthesia care for our patients. They have been providing office-based surgical and procedural care for over twenty years and have close to 100 clients. Their services include a board-certified anesthesiologist, ER/ICU background pre-operative and recovery nurses, and all the anesthesia and safety related medications, supplies, and equipment.

WILL MY INSURANCE COVER ANESTHESIA IN THE OFFICE SETTING?

This is dependent on your specific insurance policy. Anesthesia is a covered benefit under most medical insurance policies and may be subject to your deductible, co-insurance, and/or copay. We recommend that you contact your insurance company and ask if anesthesia is a covered benefit in the office setting.

ARE YOU IN NETWORK WITH ALL INSURANCES?

Mobile Anesthesiologists are contracted with Blue Cross/Blue Shield and most major commercial insurance plans. In those limited instances when we do not have a direct agreement with an insurance carrier, most carriers will process our claim in-network because Mobile Anesthesiologists are considered a secondary provider. This means that as long as your gastroenterologist and/or facility is in-network with a carrier, our claim will be processed under your in-network benefit.

CAN YOU PROVIDE AN ESTIMATED OUT-OF-POCKET FOR MY PROCEDURE?

Unfortunately, anesthesia is time based and Mobile Anesthesiologists cannot accurately estimate your out-of-pocket expense prior to your procedure. Further, many insurance companies will not quote benefits for specific medications and supplies that may be used during the procedure.

WHY AM I RECEIVING A BILL SO LATE?

In efforts to reduce patient responsibility as much as possible, Mobile Anesthesiologists staff exhausts all options before finally releasing the balance to our patients. This can include multiple phone calls, appeals, and conversations with your insurance company to make sure they make payment on everything they should under your benefit plan.

WHY ARE THERE SO MANY LINE ITEMS ON MY CLAIM?

Mobile Anesthesiologists bills for the anesthesiologist's services, nursing services provided before, during and after your procedure, and anesthesia-related drugs, supplies, and equipment that are needed for your procedure. This results in multiple line items billed to encompass all the costs.

I HAD A ROUTINE (SCREENING) COLONOSCOPY WHICH IS COVERED AT 100% BY MY INSURANCE. WHY AM I RECEIVING A BILL?

Although your insurance covers your screening colonoscopy at 100%, anesthesia medications, supplies, equipment and nursing care provided to you before, during, and after your procedure may be subject to your deductible, co-insurance, and/or copay.

I DO NOT SEE MY BALANCE WHEN I ATTEMPT TO MAKE A PAYMENT ONLINE, DOES THIS MEAN I DO NOT HAVE A BALANCE?

Unfortunately, the Mobile Anesthesiologists patient online payment portal is not linked to our billing system so it will not display your balance. Please feel free to email or call the Mobile Anesthesiologist office if you need your balance information.

WHY AM I RECEIVING A BILL EVEN THOUGH I MADE PAYMENT LAST WEEK?

Mobile Anesthesiologists truly appreciates your timely payment and apologizes for the repetitive bill. The bill was sent prior to receiving your payment due to the time it takes for the payment to be processed. If you need clarification on your outstanding balance, please feel free to email or call the Mobile Anesthesiologists office and we will be more than happy to assist.

BILLING DEPARTMENT CONTACT INFORMATION:

Hours: Monday-Friday 8:00am-4:00pm (central time)

Online payment portal: www.gobillingwise.com/paymybill

Questions: Please allow 1-2 business days for a response to your inquiry.

Illinois: billing@zzzmd.com or (855) 457-9900

CONSOLIDATED PATHOLOGY CONSULTANTS FREQUENTLY ASKED BILLING QUESTIONS

Pathology services are provided by Consolidated Pathology Consultants, an excellent collection of pathologists who examine specimens under the microscopic to provide additional diagnostic information.

INSURANCES ACCEPTED

CPC Pathology will file claims for laboratory services to Medicare, Medicaid, and most commercial insurances.

The following list shows the most commonly billed insurance carriers, which can change from time to time, and is not all-inclusive. If you don't see your insurance carrier on the list or if you have questions about a bill, please feel free to contact our billing service at **630-874-2744** or pay online at InstaMed. For dates prior to 4/1/2019 please call 888-633-8238.

- Aetna (HMO, POS, PPO)
- Aetna all
- Aetna Better Health
- Anthem
- Blue Cross Blue Shield PPO
- Cigna
- Coventry Health Care
- County of Lake (WC)
- Galaxy Health Network (PPO)
- Great West (HMO, PPO, POS)
- Harmony Health Plan
- HFN (WC, PPO)
- Health Payors Organization (PPO, WC) (Interplan)
- Humana
- IDPA
- IlliniCare
- Lake County Physicians' Association
- Medicare
- Meridian Health Plan
- MultiPlan
- PPONext/Beyond Benefits (PPO)
- Preferred Plan, Inc. (PPO) (Interplan)
- Private HealthCare Systems (PHCS) (PPO) (Acquired by Multiplan)
- TriCare/CHAMPUS (HMO/POS/PPO)
- United Healthcare

Blue Cross Blue Shield (BCBS) HMO Plans:

- Northwestern Medicine Physician Partners – CDH (MG#475)
- Northwestern Medicine Physician Partners – Delnor (MG#477)
- Northwestern Medicine Physician Partners – North Region (MG#487)
- Northwestern Medicine Physician Partners – NM Hospital (MG#489)

WHY AM I GETTING A BILL?

Your insurance plan will dictate how much out-of-pocket expense you may incur for medical services including laboratory testing. We may bill you if you have not met your deductible, your plan requires a co-pay or if your plan includes co-insurance. We will also bill you for our services if you do not have insurance or if your insurance company denies payment for our services. Please consult your insurance policy on what your plan covers.

If you still have questions on why you are receiving a bill from us, please contact our billing service at **630-874-2744**.