

Beginning September 1, 2014, Missouri Delta Medical Center and Missouri Delta Physician Services will be instituting "Provider based Billing". This brochure is to answer any questions you may have. Please let us know if you need additional information

# Does this mean patients will pay more for services?

Some patients may be covered by their supplemental insurance and will not have to pay more out-of-pocket; Medicare patients without supplemental insurance may have to pay a small amount.

With some specific insurance benefits, additional out-of-pocket expenses may be incurred by Provider Based Billing. Depending on the particular insurance coverage, it is possible benefits may differ for certain outpatient services and procedures at provider-based/hospital outpatient locations. Also, depending on each patient's specific insurance benefits, deductible, co-insurance and co-payments may be applied for provider-based services.

#### MISSOURI DELTA MEDICAL CENTER

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# Provider Based Billing Q&A









# What can patients do if they are having difficulty paying for healthcare?

Missouri Delta Medical Center offers discounting and charity policies to help qualified patients. Further details are available by calling the hospital billing office at (573) 472.7657 or (573) 472.6059 (8:00 a.m. to 4:30 p.m.).

#### What is "Provider Based Billing"?

Provider Based Billing refers to the billing process for services rendered in a hospital department such as a physician office owned and operated by Missouri Delta Medical Center. This process takes place when the hospital owns space and employs physicians and other support personnel who are involved in patient care. Medicare and Medicaid have designated specific rules and requirements for Provider Based Billing which we follow.

#### Will the registration process be any different?

Medicare and Medicaid patients will complete the necessary documents during the normal registration process. This process will include the completion of a General Consent form. For Medicare patients, a Medicare Secondary Payer Questionnaire form will be completed and you will also receive an estimate of the out-of-pocket expenses for your office visit.

# How does this affect the billing process?

Because care is provided in a location that is considered a department of the hospital, there is a difference in how the Medicare and Medicaid patient is billed.

If you are a Medicare or Medicaid patient, your bill will now be separated and

tient, your bill will now be separated and you will receive a bill for the professional services and facility charges rendered by your provider at this location. You will receive a separate bill from the Hospital for all other charges related to your visit, such as lab and/or x-ray.

Although this will not have much effect on the total combined charge for services, Medicare beneficiaries are responsible for the co-insurance amount on each bill. These co-insurance amounts are determined by Medicare and are based on the services performed.

Some Medicare patients will be covered by their supplemental insurance and will not have to pay more out-of-pocket costs, but Medicare patients without supplemental insurance will have to pay additional out-of-pocket costs related to the new Provider Based Billing structure.

### Is this billing process new for Missouri Delta Medical Center?

No, this is simply an expansion of the billing model already in use for hospital-based services.

For hospital-based services, such as Emergency Department, Therapy Services, Laboratory, and Operating Room procedures, Missouri Delta Medical Center has always billed separately for physician services and facility (technical) fees - one bill from the hospital and a separate bill from the physician.

As we convert physician office locations to hospital-based departments under Provider-Based status, the billing methods currently used for all other hospital-based services will expand to these outpatient services.

Depending on each patient's specific insurance benefits, deductible, co-insurance and co-payments may be applied for provider- based services.

# Will there be a change in how patients receive care?

No. Patients will continue to receive excellent quality care with their physician and scheduling appointments and tests will be handled as they always have been in the past. However, there is a change in how Missouri Delta Medical Center will bill your insurance carrier for these services.

# What if I am confused about the bills I receive in the mail?

If you have any questions about your bills, call our Customer Service for clarification of how this might impact you directly at (573) 472–7657 or (573) 472-6059 (8:00am – 4:30pm)