

HAMILTON GASTROENTEROLOGY GROUP, P.C.

1374 WHITEHORSE HAMILTON SQUARE ROAD, HAMILTON, NJ 08690 TEL: (609) 586-1319 FAX: (609) 586-1468

HAMILTON ENDOSCOPY AND SURGERY CENTER, LLC

1235 Whitehorse – Mercerville Road, Suite 310 Hamilton, NJ 08619 Tel: (609) 581-6610 Fax: (609) 581-6620

COMMERCIAL INSURANCE AND SELF PAY PATIENTS

Hamilton Gastroenterology Group, P.C. (HGG) & Hamilton Endoscopy and Surgery Center (HESC) will bill your primary and secondary insurance carrier for the services you receive in our center, in accordance with all applicable laws and rules regarding patient privacy and security to ensure the confidentiality and safety of our patient's medical records. If HGG or HESC are out of network with your carrier, and you do not have secondary coverage with any other carrier or with Medicare or Medicaid, HGG & HESC will accept the payment received from your insurance carrier(s) as payment in full and will not bill you for any balance.

You may receive a bill from HGG for the **PROFESSIONAL FEE** or HESC for the **FACILITY FEE** if:

- 1) Payment is denied by your carrier due to pre-existing conditions.
- 2) You do not provide information requested by your insurance carrier.
- 3) Your policy benefits have been exhausted (i.e. you've reached your benefit maximum).
- 4) Your workers compensation or motor vehicle carrier denies your claim as unrelated.
- 5) You're insurance carrier mailed payment to you rather than HESC and you did not forward the payment as instructed below.
- 6) You have an attorney's letter of protection and the case does not settle in your favor.
- 7) We have had no response from your insurance carrier.
- 8) We participate with your carrier, you will be billed according to your plans benefit allowances i.e. deductible and co-insurance.
- 9) We were given invalid insurance at the time of service and precertification/referrals could not be obtained.
- 10) We were not provided with a referral at your time of service.

HGG & HESC do not participate with all commercial insurance carriers. Payment may be made directly to the patient for the professional and facility fee. **PLEASE DO NOT DEPOSIT THE CHECK.** Endorse the check and forward it with the accompanying explanation of benefits to the address listed above. (Your insurance carrier will inform us that this has occurred.) If you do not turn over the check and the explanation of benefits, you will be responsible for the bill **IN FULL.**

MEDICARE or MILITARY PATIENTS

(This section applies to Medicare, Champus, Tricare - Healthnet Federal and US Family Patients.)

HGG & HESC are participating in the Medicare insurance program. We accept assignment for your professional fee (i.e. office visit) and facility fee. We also accept assignment on all military insurance listed above. To comply with federal regulations, you will be billed and are responsible for payment of your yearly deductible and any applicable coinsurance amounts. If you provide us with secondary insurance coverage information, we will bill that carrier for any balance before billing you.

ANESTHESIA CHARGES (if procedure done at HESC)

The centers anesthesia provider, Hamilton GI Anesthesia, will bill separately for their services.

LABORATORY CHARGES (if procedure done at HESC)

Laboratory services are billed separately, through Hamilton Gastroenterology Group or CBL Pathology.

I agree to the terms and conditions as noted above.

Signature

Date