



PEACHTREE WOMEN'S SPECIALISTS, P.C.

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Obstetrics and Gynecology

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Suite 225
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KNOW YOUR INSURANCE AND

MAXIMIZE THE BENEFITS

**To ensure that your insurance does pay if you have a covered expense, please follow
The instructions below:**

PRIOR TO YOUR VISIT:

1. Look at your insurance card. If you do not know what is covered, call the toll free number usually listed on the back of the card. Someone will be able to answer your benefits questions.
2. If your insurance requires a referral from your primary care physician, you must contact your primary care physician to discuss your need to see a specialist. If he agrees that you should see a specialist, he/she will contact **YOUR** insurance company and obtain a **REFERRAL NUMBER.**
3. Please bring the referral number issued by your insurance company in with you. If a referral number is required by your insurance company, and you do not have it with you at the time of your visit, you may be required to pay for services received that day or you may need to reschedule your appointment. (We know your time is very valuable and that you do not want to come in to our office only to have to reschedule your appointment.)

**Most managed care plans do not issue referral numbers after the service has
been rendered, so even if you do pay for the services, you could lose the
ability to file the claim!**

There are hundreds of different insurance policies and managed care options in Georgia. Our office cannot be responsible for each plan. **Please know your health care and laboratory benefits.**

Please let our staff know if your labs must be sent to a specific laboratory that Is NOT listed on your insurance card.

Thank you for selecting our office for your healthcare needs.

We look forward to being of service to you now and in the future.



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You are ultimately responsible for the payment of charges for the services you receive from our office. If you are a member of a managed care plan, you are responsible for complying with all of the procedures required by that plan to enable us to receive payment on your behalf. To ensure that your insurance or medical plans will provide covered benefits, you must let us know of all pertinent insurance coverage at the time you schedule your appointment and when you check in for your office visit. If you will be paying personally for our services or if you are responsible for a deductible or co-payment, we expect payment at the time of service. For your convenience, we accept cash, personal checks, VISA, Mastercard and American Express. If you are experiencing personal circumstances that will make the payment of our charges difficult for you, please contact one of our Patient Account Representatives at 404-355-8055 extension 14 or 22.

MEDICARE AND SUPPLEMENTAL PLANS:

We are a participating provider for Medicare; therefore, we will file your Medicare and your supplemental insurance claims for those plans that accept a claim directly from Medicare. If your supplemental plan does not accept a claim directly from Medicare, you must pay the co-payment to us, and we will file a claim to your plan after we receive the EOB (Explanation of Benefits) from Medicare. Some tests are considered a medical necessity (i.e., Pap smears) by our physicians but Medicare will not pay for this except under certain conditions. You will be required to sign a form (Advance Beneficiary Notice) which states that you will be responsible for paying the bill, should Medicare determine it is not payable (i.e., only covered every two years). Please consult with your physician about these requirements.

HMO'S, PPO'S AND OTHER MANAGED CARE PLANS:

We participate with many of the HMO, PPO and POS plans, and other managed care medical plans currently offered in this area. In order for our services to be covered under your plan, we must both comply with the plan's requirements. It is your responsibility to know your plan's requirements for coverage. We will gladly assist you with what we know; however, since these are not "our" plans, we cannot make final determinations regarding coverage. This must be done by our plan. All Co-Payments must be collected at the time of service. We are always available to assist you in these matters.

Thank you for selecting our office for your healthcare needs