

GATEWAY WOMEN'S CLINIC
OFFICE AND FINANCIAL POLICY

In the interest of a good health care practice, it is desirable to establish an office and credit policy to avoid misunderstandings.

Basic Billing Information: You will need to provide our office with your social security number, show us current picture ID, and have a health insurance card (if applicable) for us to copy at each and every visit unless your total charge is paid in cash at the time of service (see "Discounts we can provide"). Treatment may be postponed if you cannot provide us with all of the above each time you come into the office.

If we bill your insurance company for you, you need to understand that this is a courtesy to you and ultimately, you are responsible for the cost of receiving care from our doctors. Remember, an insurance policy is a contract between the patient, the patient's employer (if applicable) and the insurance carrier. Any questions or disputes about the insurance coverage, how long they are taking to pay a bill, or anything else about the policy is between the patient and the insurance company. You will not receive a bill from us until we have been told the balance is your responsibility by your insurance company, but if you disagree or your insurance denied payment because they do not cover preventative care (annual exams), for example, you will need to contact your insurance yourself. In most cases, your insurance company won't even tell us specific information about your policy so we encourage you to know what kinds of restrictions and coverage your policy has before coming into the office so you won't have any surprises when the bill comes. And we cannot, under any circumstances, change a billing code just so your insurance will pay for a visit. If you have a question about how your insurance was billed, you can call Renae at 503-254-1399, ext. 6. If you have a question about the balance that is left to you, set up a payment plan or make a VISA or Mastercard payment over the phone, you can call Lisa at 503-254-1399, ext. 15.

Co-pays are due at the time of your service and we require \$150 deposit for all IUD inserts regardless of your insurance coverage, unless you have the Oregon Health Plan or have verified with your insurance company that they will pay more than 85% of the insertion and supply cost. We take VISA, Mastercard, Discover, cash and checks. If your insurance pays more than 85%, a refund will be sent to you after the insurance pays us.

If you are covered by the Oregon Health Plan we will attempt to pull you up in their computer system. If we cannot obtain your information and you are not pregnant, you will either be considered a cash paying patient or you can reschedule your appointment. If you recently applied to the Oregon Health Plan and are pregnant, you have 45 days from the date of your application to provide a current identification number. If you are not in their system by that time, you will be considered a cash paying patient and will need to make payments on your account.

Referrals: Occasionally, an insurance company will require you to see your primary care physician before coming to a specialist clinic like us. We try to make sure these referrals are in place before your visit, but it is your responsibility to check with your primary care physician to make sure the referral process has been started by him or her. If we notice that you do not have a referral at the time of your visit, we will reschedule your appointment so you can get one. This way you won't be responsible for the entire cost of the visit.

Discounts we can provide: In general, no employee or any other person affiliated with Gateway Women's Clinic can offer any kind of payment, including any kickback, bribe, or rebate, whether in cash or in kind, in any manner or form, including waiver of copayments or deductibles or any other financial forgiveness to any patient or any other person in exchange for healthcare services. However, we can offer you a discount if you are a cash paying patient and pay before leaving the building at the time of service. This discount is 30% from the usual and customary charge for the service provided. We cannot, however, give any discounts for supplies (injections, IUD's, etc.).

We can also provide a discount up to 50% for patients who fall under the general Federal Poverty Guidelines but do not have any insurance coverage. This is a separate form that would need to be filled out and turned into the front desk along with the required forms at least 24 hours before your appointment. For information on either of these discount programs, call Lisa at 503-254-1399, ext. 15.

Patient Signature indicating information is read and understood: _____