

SURGERY CENTER OF SANTA MONICA

an affiliate of SCA

To Our Patients:

We understand that having a surgical procedure can be a stressful event. With so many considerations to make, questions about the billing and payment for services associated with your procedure are sometimes overlooked or confusing at best. The following information will hopefully answer some of these questions for you. Please do not hesitate to call our Business Office should you have any further questions.

Insurance Information

We know that understanding your health insurance can be difficult. Please take a brief moment to review this page to help you understand some key points about your insurance as it relates to your procedure at Surgery Center of Santa Monica.

- A financial counselor from Surgery Center of Santa Monica will contact you prior to the day of your procedure to give you an estimate of your portion of the cost of your procedure. This estimate is based on the procedure(s) your physician has scheduled and the type of insurance plan you have.
- It is important to know that this is only an estimate. Sometimes the surgeon needs to do more or maybe even less during the procedure than what is originally scheduled. These changes may affect your final financial responsibility to Surgery Center of Santa Monica.
- Payment of co-pays, coinsurance and any deductible amounts that are due are expected upon your check-in to the center. A description of each is as follows:

A **co-pay** is a form of medical cost sharing in a health insurance plan that requires an insured person to pay a fixed dollar amount when a medical service is received. The insurer is responsible for the rest of the reimbursement. There may be separate co-payments for different services. Some plans require that a deductible first be met for some specific services before a co-payment applies. A **deductible** is a fixed dollar amount during the benefit period (usually a year) that an insured person pays before the insurer starts to make payments for covered medical services. Plans may have both per individual and family deductibles. Some plans may have separate deductibles for specific services. For example, a plan may have a hospitalization deductible per admission. Deductibles may differ if services are received from an approved provider or if received from providers not on the approved list.

Coinsurance is the amount due by the patient after the insurance has paid and applied all deductibles and co-pays. This is the amount that is usually described at "Patient Responsibility" or "Member Responsibility" on the Explanation of Benefits. It is usually a percentage of the allowed amount covered by your insurance (i.e. 80/20; 70/30; 90/10). Because we contract with many insurance carriers, we can many times determine the patient's coinsurance in advance based on the information received by your physician's office at the time of scheduling.

Billing Information

Because there are several healthcare practitioners who are providing a service to you, there will be separate bills generated from each of these providers; therefore, you can plan to expect bills from multiple providers for one procedure at our Surgery Center.

- Our bill is from Surgery Center of Santa Monica, which is the facility fee.
- You will also receive a bill from your physician and from your anesthesia provider.
- If pathology is necessary you will also receive a separate bill from the pathologist.
- Surgery Center of Santa Monica will bill your procedure to your insurance company for their portion, and to a second insurance provider, if you have one.
- Ultimately, you are responsible for the charges associated with your procedure.
- If after the surgery, we discover that you have overpaid us, we will issue you a refund.