



BILLING AND PAYMENTS

For questions about your bill or our financial policies, please call Advanced Health Associates Patient Accounts Department at **(888) 293-6465**. Also, feel free to come by our business office located at 1370 East Venice Avenue, Suite 102, Venice, Florida 34285, to discuss your account with a patient account representative.

At Advanced Health Associates, we accept Medicare and most major insurance plans. Please contact your insurance company or you may call our administrative office at **(941) 412-0026** to find out if we accept your insurance plan.

BILLING AND COLLECTION POLICY

It is the policy of Advanced Health Associates to collect payment for professional services from the patient at the time the service is rendered. We will gladly file your insurance claim for you; however, we do require that you pay your share at the time of service: co-pay, co-insurance, and/or deductible (including any prior balances that are your responsibility). For your convenience we accept cash, checks, Visa, MasterCard, and Discover.

At the time your appointment is scheduled, you will be informed that payment for both co-pays and previous balances are required at the time of service. We will also ask you to bring your current insurance card and photo ID to the appointment. You will be reminded of this again when we call to confirm your appointment a day or two before you are scheduled to visit.

INSURANCE

We accept most insurance plans and will file your claim for you. At the office, our check-in staff will review your insurance ID card and update your insurance

information. Please bring your cards with you for every visit.

Medicare co-insurance payments are payable at the time of service unless you have secondary insurance. Your insurance deductible will be due at the time of the visit, if appropriate. We accept assignment of all secondary insurances.

Co-pays, co-insurance, and deductible payments are all your responsibility and are collected at the time of service.

PATIENTS' FINANCIAL RESPONSIBILITY

You will be informed of any outstanding balance that is your responsibility when you call for an appointment.

- If your account is past due, you will be required to pay any patient balance owed in full prior to any new appointment being made. Failure to pay past due balances could result in dismissal from the practice.
- Procedure and surgical charges are analyzed prior to the procedure to evaluate your share of the charge. Partial payment is required prior to the procedure being performed.

FAQS

Did you bill my insurance?

Advanced Health Associates' policy is that all claims are filed to your insurance as long as we have the correct information on file. It is your responsibility to provide us with your current insurance information.

I have an HSA account. Do I have to pay at the time of service?

Yes. Many people have HSA accounts, but each HSA account can be different. Because of this, we cannot make exceptions to our policy requiring collecting at the time of service.

Why didn't my insurance pay for my tests?

Your physician will order tests, treatments, vaccines, etc. that he/she believes are needed and/or recommended. It is impossible for your physician to know what your particular insurance will cover.

Some insurance contracts will pay for everything while others will only pay for a test a limited number of times. Others may not cover the test or treatment at all.

It is your responsibility to determine if your insurance will cover these services. Services not covered by your insurance are billed to you.

Is there a difference between a physical exam and an annual wellness visit?

Yes. A Medicare wellness visit must follow the guidelines established by Medicare. It is designed so that your physician can gather specific information about your health status via interview and questionnaires. It does not include an actual examination by your physician.

A physical exam is more thorough and includes a physician examination. Neither the wellness visit nor the physical exam includes "treatment" by the physician.

Medicare pays 100% of the cost of a wellness visit each year, provided it has been at least one year since any prior wellness visit. Medicare does not pay for a physical exam.

On my recent wellness visit, my physician also billed for an office visit. Is this a mistake?

No. The wellness visit, as defined by Medicare, includes an interview and questionnaires. If it is necessary for the physician to treat you for a medical condition at the time of the wellness visit or, if you request that the physician treat you for a medical condition at the time of the wellness visit, the treatment portion of the visit is considered a separate visit as it is outside of the scope of the wellness visit.