

Wound Healing Center

PATIENT BILLING INFORMATION

Our wound healing center at Nary Washington Healthcare serves as a hospital outpatient clinic where doctors and nurses treat people with wounds that they may have had for a long time.

Visits to the Center will result in charges from both the hospital and doctor.

Many times these visits will only result in a charge for a procedure such as a wound debridement, but some times they also include a clinic visit. Sometimes, there may be charges for hyperbaric oxygen therapy, laboratory tests, x-rays, and other services that may be performed in the hospital.

We understand this can be a confusing time and have outlined various ways the payment of the services provided to you can be handled. If you have questions about the process, please feel comfortable discussing this with one of the center staff members.

THE HOSPITAL:

When the hospital bills your insurance company(s) for the services you received at the wound center, the bill contains charges for what is called the **technical component**. This fee includes the use of the center's staff, room, equipment, etc. as well as any supplies, and other additional services if they were provided during that billing period. Some hospitals may bill for these additional services on a separate bill.

THE DOCTOR:

Each doctor that sees and treats you will bill for their services separately. Most of the time, this bill will come from his or her office, but sometimes other companies are hired to bill for the doctor's charges. These charges will be for the **professional component** and includes only the services that the doctor provided.

The wound center doctors are specially trained in providing wound care and the insurance company(s) will know to pay for only one set of services by the codes used on the bill sent to them. They will pay a portion of the service to the hospital and a portion to the doctor. **You will not be billed twice for the same service** even though the description of the services may be the same.

OTHER DOCTORS:

There are different specialists that may be called in on your case, depending on the difficulty of your wounds, and they may submit a bill as well. These may be from the Pathologist for the professional component of the laboratory tests performed, or the Radiologist for the services rendered when x-rays were performed, etc.

These billing practices are consistent within all departments of the hospital as well as within the hospital industry. In addition, these billing procedures are frequently audited by Medicare/Medicaid and accepted as standard practice.

IF YOUR PRIMARY INSURANCE IS MEDICARE OR MEDICAID:

The hospital will bill Medicare/ Medicaid and may send you a courtesy copy of your itemized bill upon request. Medicare/ Medicaid will notify you when they have paid their portion of your hospital bill. If you have a secondary insurance, the hospital will also send them a bill for their portion and that company will contact you to let you know when and what they paid to the hospital. After payments are received by either your primary and/or secondary insurance, *any outstanding balances will be your responsibility.*

IF YOUR PRIMARY INSURANCE IS AN INDIVIDUAL/ GROUP PPO OR HMO:

The hospital will bill your insurance company. You will be responsible for any deductible and/or co-payment amounts. Payment for these items may be expected at the time of service. Insurance verification will help us to identify your appropriate deductible and co-payment amounts.

IF YOU DO NOT HAVE INSURANCE COVERAGE:

If you are unable to pay, we may be able to work with you to determine if you qualify for some type of assistance or determine if you are allowed to set up a payment plan. The center can refer you to the Patient Accounts Department as needed. You cannot be seen in the wound center until these arrangements are completed.

IF YOU HAVE QUESTIONS REGARDING YOUR BILLS/ STATEMENTS:

Please call the hospital Business Office between 8:00 am and 4:30 pm (Monday thru Friday) at (540) 741-3774. If your question is regarding the physician's services, you will need to contact that physician's office directly.

Thank you for allowing our entire team the opportunity to care for you.

Patient Signature: _____ Date: _____

Witness Signature: _____ Date: _____