

Know What You Will Owe – Insurance Coverage and Benefits

INSURANCE COVERAGE:

Endoscopy procedures are generally “covered” by insurance when recommended to investigate symptoms or for routine colon cancer screening. Even if a service or procedure is “covered”, you may have a share of cost. It is your responsibility to verify your insurance coverage and benefits. Marin Gastroenterology is not responsible for your insurance coverage or benefits. We recommend that you call your insurance company and ask if your procedure is a “covered benefit”, and what your share of cost, or “out of pocket expense”, may be. For your convenience, the following is information about billing for your procedure, and a form to use when calling your insurance company to verify your coverage and benefits.

FEES: You will be billed by two to four different entities associated with your procedure:

1. **“PROFESSIONAL FEE”** from Marin Gastroenterology, Tax ID# 20-1209575 (business office 415-925-6910). This is the fee from the physician who will perform your procedure.
2. **“FACILITY FEE”** (Depending on where you were scheduled to have your procedure): The Endoscopy Center of Marin (ECM), Tax ID# 68-0407706 (business office 415-464-0606) OR from Marin General Hospital (MGH), Tax ID# 94-2833538 (business office 415-925-7500). This fee for the use of endoscopy equipment, medications and nursing staff at the facility (location) where your endoscopy will be performed.
3. **“LABORATORY FEE”** from Marin Medical Lab, Tax ID# 94-1196033 (business office 877-239-6536) **This fee applies only when biopsies are taken or polyps are removed.**
4. **“ANESTHESIA FEE”** at MGH from Anesthesia Consultants of Marin, Tax ID# 68-0265621 (business office 415-460-9924).
“ANESTHESIA FEE” at ECM from Amsurg Marin Anesthesia, Tax ID# 46-5053637 (866-809-1220).

INSURANCE PLAN NETWORK PARTICIPATION:

Marin Gastroenterology, Marin Medical Labs, and Anesthesia Consultants of Marin participate in most health plan networks. However, it is your responsibility to check if they are members of your insurance plan’s network.

The Endoscopy Center of Marin and Amsurg Marin Anesthesia participates in Medicare and most health plan networks. If the ECM is not part of a health plan’s network, out of pocket expenses are usually the same or less than at MGH, even if MGH participates in that plan’s network. If the ECM anticipates that your out of pocket expenses will be lower at MGH, Marin Gastroenterology will schedule your procedure at MGH.

VERIFY YOUR OWN COVERAGE AND BENEFITS:

To find out what your coverage, benefits, and out of pocket expense will be; call your insurance company and ask the following questions: (You will need to give the insurance representative the CPT (procedure code) and Diagnosis code(s) listed on your scheduling form on the other side of this page.)

1. Is this procedure covered under my policy? Yes No
2. A) Will the diagnosis code be processed as preventative, surveillance, or diagnostic, and what are my benefits for that service?
B) What are my benefits for the associated services such as Facility Fees, Laboratory Fees, and Anesthesia?

If Diagnostic/Medical Necessity-Benefits:

Deductible: _____ Coinsurance: _____

Is the Facility in-network? Yes No Deductible: _____ Coinsurance: _____

Is the Laboratory in-network? Yes No Deductible: _____ Coinsurance: _____

If Preventive/Routine Colonoscopy-Benefits:

Deductible: _____ Coinsurance: _____

Is the Facility in-network? Yes No Deductible: _____ Coinsurance: _____

Is the Laboratory in-network? Yes No Deductible: _____ Coinsurance: _____

Are there age and/or frequency limits for my screening colonoscopy? _____

IMPORTANT: Write down the following information before ending your call with your insurance company:

Insurance Company Representative Name: _____ ID # _____

Date & Time of Call: _____ Call Reference Number: _____