



The State of Florida has adopted legislation for mandated price transparency. We at the Center for Surgical Excellence are committed to helping patients understand the cost of their care. We stand ready give patients meaningful information about the cost and quality of their health care.

### BILLING and INVOICING

You will receive a monthly statement of account that shows charges, adjustments and payment. In compliance with Florida price transparency requirements, itemization includes descriptions of each service provided.

We are participating providers with several insurance companies, and we accept Medicare approved rates excluding co-pays. Upon request if additional information is required please contact our billing department at (941) 412-2100 ext 245.

Some examples, for your information:

You may be given an *estimate* of your co-pay, co-insurance or deductible, which will be due at the time of your procedure. This is only an *estimate*, as exact amounts are not available until after the procedure is billed. You may be responsible for any balances not covered by your Insurance Provider.

### FINANCIAL ASSISTANCE

Our financial assistance program offers a variety of ways to reduce a patient's financial responsibility for services rendered by the surgery center. Our program structures a balance between offering the patient a reduced financial liability while still complying with insurance contract obligations and Federal and state regulations. Please contact our facility's business office for further information on our policies as reflected below. Surgeons, anesthesiologists, and other service providers (such as pathologists or laboratories) bill for their services separately from the surgery center and may offer their own financial assistance program— please contact them for further information regarding their services.

## CHARITY CARE

The center maintains a charity discount policy which provides financial relief to patients who receive medically necessary care and who do not qualify for state or Federal assistance and are unable to pay the estimated or remaining financial responsibility in part or in full. A patient must meet the policy's household income qualifications which are based on Federal Poverty Level Guidelines (revised annually). Submission of supporting documentation is required to validate a patient's qualifying status.

## PRICING COMPARISON

The Agency for Health Care Administration (AHCA) has developed a website prospective patient can use to learn more about quality and costs for health care in Florida.

Information on payments made to the facility for defined bundles of services and procedures is available at <http://pricing.floridahealthfinder.gov/>. You will need to provide a description of the medical service you are seeking or the CPT procedure code which can be obtained from your attending or referring physician. You will also need the name of your insurance and the type of insurance, such as PPO, HMO, Medicare, etc.

The service bundle information is a non-personalized estimate of costs that may be incurred by the patient for anticipated services, and actual costs will be based on services actually provided to the patient. Patients and prospective patients have the right to request a personalized estimate from the center.