THE CANCER & HEMATOLOGY CENTERS

FINANCIAL POLICY

An integral component of The Cancer & Hematology Centers (CHC)/START Midwest commitment to excellent patient care includes a team dedicated to assisting with financial arrangements. It is our desire to contain medical costs. As a service to the patient, we provide registration, verification and filing of insurance; assist with payment arrangements and work extensively with insurance companies to have claims paid at their maximum benefit, thereby alleviating most of the financial burden and responsibility from the patient.

REGISTRATION

Prior to the first appointment at CHC, the New Patient Referral Specialist will ask for insurance information. Then at the first appointment, the Front Desk team member will ask for an insurance card and additional information. This information is vital for correct billing and payment. We will need to make copies of your insurance cards. Please remember to bring all of your active insurance cards, including separate cards for medication coverage, to the office at each visit. Insurance information and cards will be verified and updated annually.

VERIFICATION

After you provide insurance information, we will contact your insurance company to verify your benefit coverage. Depending on information supplied by the carrier, it may be necessary for a team member to discuss coverage issues with you either at the time of your appointment or by telephone.

Please note that Patient Registration and Insurance Verification occurs regularly to assure your coverage is active and to help contain your medical costs. We ask for your cooperation and assistance with this special service.

REFERRALS

Many managed care plans require that you obtain a referral from your primary care provider (PCP) prior to your visit with a specialist. Therefore, based upon your insurance specifications, it is our policy that you must have the proper referrals prior to your appointment. The New Patient Referral Specialist maintains files on these referrals and will assist with proper referral procedures from your insurance carrier and PCP if needed.

OFFICE CO-PAYMENTS

It is the policy of this office to collect co-payments at the time services are rendered. These shall be paid as you check in for your appointment. Usually, co-payment amounts are indicated on the insurance card, however, our registration team member will be obtaining this information as your insurance benefits are verified and we will ask you for this amount at each visit.

INSURANCE FILING

All primary and secondary insurance policies are filed on the patient's behalf for services rendered. Insurance is a method for you to receive reimbursement for fees you should pay to the provider. Assignment of benefits allows payment to come directly to our office from the insurance company. Having insurance is not a substitute for payment. Many insurance companies have fixed allowances or percentages based on contracts with them, not with our office. It is your responsibility to pay any deductibles, co-insurance, and any other balances not paid by your responsible party for the bill. Patient Statements are mailed monthly outlining insurance filed as well as patient balances due. Patient balances are due and payable within 30 days unless special payment arrangements have been coordinated with the Patient Finance Authorization Coordinator.

REIMBURSEMENT TEAM

We have a team that works exclusively on collection efforts of patient account balances due, and claims denied or paid inaccurately by the insurance company. Each team member is assigned specific provider accounts to work. If you have questions concerning your monthly statement or need assistance with your insurance filing or financial arrangements, please do not hesitate to contact our office.

ADDITIONAL ASSISTANCE AT CHC

At CHC we have Patient Financial Authorization Coordinators and Social Workers who provide additional services to assist with financial arrangements. Patient Financial Authorization Coordinators assist with explaining charges and the billing process, helping calculate estimated personal cost, and understanding insurance coverage. Social Workers assist with informing of programs that provide grant and financial assistance, recommending supplemental insurance to keep personal costs down, and helping you navigate through these programs. Patient Financial Authorization Coordinators and Social Workers are available to answer questions and assist with concerns. They can be contacted by calling our office or informing any team member when in our office.

DRUG ASSISTANCE PROGRAMS

Enrollment in a third-party foundation or manufacture drug assistance program does not guarantee assistance will be obtained. Assistance is subject to approval under the program guidelines. The third-party foundations and manufacturers reserve the right to change or terminate the program without prior notice. In the event a drug or date of service is not covered by program assistance, you will be fully responsible for the cost.

4/24/2023