



General Information concerning your visit to ENT and Allergy Associates, LLP

You may have some questions concerning the services provided at our office. We hope that the information below answers some of these questions. If not, feel free to reach out to our central billing office with any questions or concerns.

First, here are some reasons why you may have a remaining balance:

DEDUCTIBLE:

An out-of-pocket amount a patient must pay each year before the insurance company begins to pay for services rendered. A covered service may hit a patient's deductible depending on the details of the patient's plan.

CO-PAY:

A set amount that is the patient's responsibility due at the time of service. A patient may or may not owe a co-pay, this is dependent on the patient's particular plan.

CO-INSURANCE:

A percentage of the cost that is the patient's responsibility after the insurance has submitted its portion. For example, with a 20% co-insurance for hospitalization, a patient would pay 20% of the cost of the hospitalization and the insurance carrier would pay 80%.

Below is a list of questions and answers that may be applicable to your visit:

Why did my physician perform an endoscopy?

An endoscopy is an important component of patient care, treatment and diagnosis. The endoscope allows for early diagnosis of cancers, or neurological disorders, just to name a few, and can help determine whether antibiotics may or may not be appropriate. You have taken advantage of this technology by coming to ENT for your medical problem. An ENT cannot deliver an appropriate level of care without endoscopy, when needed. This level of care goes beyond that which may be delivered by your primary care physician.

Why an endoscopy is called "surgery" on my explanation of benefits?

Depending on your individual insurance policy and carrier, these procedures may be classified as "surgery" although the code clearly describes some as diagnostic. An in-network deductible or co-insurance may be applied by your insurance company. An endoscopy procedure will be billed separately from your office visit charges. If the deductible or co-insurance apply, the amount allowed by your insurer for the procedure will be due from the patient.

Do all patients undergo endoscopy at ENT?

No. If an endoscopy was performed, then your ENT determined that it was medically necessary given your health complaint(s) and/or concerns.

If my insurance covered the procedure, why am I being billed for it?

If you are billed for your procedure, then this is a requirement of your insurance company and the specifics of your particular policy. Pursuant to your policy, the procedure may apply toward an in-network deductible or co-insurance. We have payment plans available to help you pay your out of pocket expenses. Please reach out to us or provide a phone number that we may contact and a Billing Operations Specialist will call you.

My endoscopy was normal. Did my doctor make an error in performing one?

No. Tests and diagnostic procedures may be required in order to diagnose or rule out certain conditions.

Why did the doctor not inform me of the specific costs involved in the care rendered?

The level of care provided by our physicians is based on the medical indications presented at each visit, rather than the details of the patient's insurance company. The costs for the particular treatment that the physician renders are determined by the insurance company and at the time of the visit, the physician is considering what is in the best interest of the patient.

We hope this information answers any questions that you may have surrounding your care and treatment at our office.