

NOTICE TO PATIENTS REGARDING SCREENING COLONOSCOPY & PREPAYMENT OF DEDUCTIBLES

Many insurance plans state that coverage is provided for **screening or routine colonoscopies**. Please note that insurance carriers no longer consider a colonoscopy a “screening exam” or “routine exam” if biopsy, polypectomy, or additional medically necessary services are performed. **The necessity for the additional services is determined by your gastroenterologist during your procedure.** The additional services may result in legally required changes in coding, screening exam coverage, reimbursement, and the amounts for which the patient is responsible.

Less than 29% of all completed colonoscopies are billable as screening exams, meaning the pathological finding shows no known or suspected disease or abnormality and no additional services were medically necessary.

It is our policy to collect **estimated** co-insurance and deductibles prior to procedure, including screening colonoscopy, due to the high incidence of change of plan coverage and reimbursement for this procedure. Your insurance company will be billed for the actual procedure performed with all corresponding diagnoses, including the preoperative screening exam notation. Patient refunds will be issued promptly after the insurance payment is received.