Will my insurance process my claim like other outpatient services?

Yes, provider-based payors, like Medicare, will process claims like other hospital outpatient services. Patients may receive two explanations of benefits for the patient encounter, one for the physician bill and one for the facility bill.

As a participating Medicare provider, Sanford is required to ask our patients Medicare Secondary Payer (MSP) questions at every visit made to the facility. These questions help determine if any other insurance provider should pay before Medicare.

For More Information

If you have questions or concerns about billing please call a patient account representative at Sanford (605) 328-6585 or 1-877-629-2999.

PO Box 5074 Sioux Falls, SD 57117-5074 (605) 328-6585 1-877-629-2999

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Provider-based billing





What does "provider-based" designation mean?

Provider-based is a payment designation that allows facilities to bill as a hospital outpatient department. Medicare, Medicaid and some commercial payors recognize this designation. Centers for Medicare and Medicaid Services (CMS) has determined that Sanford has met the requirements, and the clinic is an outpatient department of the hospital.

What changes will a patient see?

Patients who receive services at a providerbased clinic or outpatient hospital department will receive billing statements, but the fees will be separated into two categories:

- 1. A professional fee for physician services from Sanford.
- 2. A facility fee for the costs of operating the clinic from Sanford.
- * Because of provider-based billing, you may pay more coinsurance for certain outpatient services.

Estimate of Coinsurance

Because the clinic is a department of the hospital, you may have hospital coinsurance responsibility that you would not have if the services were provided in a clinic that was not provider-based.

An estimate of a typical coinsurance responsibility for hospital services is estimated to be in the following range:

Office Visit: \$20 – \$60

Minor Procedure: \$5 - \$160

*The actual amount of your hospital coinsurance responsibility may be different from the estimate based on services received.

^{*}If you have Medicare supplemental insurance, it will typically cover the additional coinsurance amounts.