



**Thank you for entrusting the providers of Better Gut Better Health, LLC (BGBH) with your nutritional care.**

Our services are mostly recognized by our current contracted insurance companies which include Anthem NH, Harvard Pilgrim, Aetna, Cigna, Tufts Health Plan, Health Plans Inc. and United Healthcare. With the complexity of health insurance today you may be required to pay for some or all of our services at the time of service based on your insurance policy agreement.

**It is YOUR responsibility to contact your insurance company to verify the following:**

- 1) We are a participating provider under your current medical insurance plan.**
- 2) You have dietitian/nutrition benefits. (Some insurance companies may limit this benefit annually)**
- 3) If choosing our Tele-Health Services please confirm these new services are a covered benefit as well.**
- 4) Purchases of Practice Program packages cannot be billed to your insurance and are non-refundable.**

Better Gut Better Health will bill our *contracted* medical insurance companies for services rendered with the insurance information you provide. Once your claim has been filed to a *contracted* insurance company, most claims are usually paid within thirty (30) days. Our office will make every attempt to collect payment directly from your insurance company but may ask that you provide assistance if we are unable to receive payment in a timely manner. Additionally, many insurance companies require a co-insurance responsibility therefore; we must bill all balances after an insurance payment has been received regardless of your coverage type.

**At the Time of Your Visit:**

If you have health insurance coverage through one of our contracted insurance companies, we are contractually obligated by your insurance company to collect co-payment at the time of service. If you have co-insurance and/or deductible balance obligations, we would appreciate payment at the time of service.

If you do not have health insurance coverage through one of our contracted insurance companies, payment in full is required at each visit. We accept cash, check or credit card. We will provide you with the billing information you need at the end of your visit to send a health claim to your insurance for direct reimbursement.

**If you are paying by check:** Checks returned for insufficient funds are subject to a \$30.00 charge for *each* returned check.

**If you are paying by credit/debit card:** Your card will be kept on file and charged at the end of each visit.

**General Billing:**

Please note that our providers follow accepted national guidelines when determining your charges. They are required to code based upon the services provided and cannot take into account particular health plan benefits.

A valid credit card on file is required for all insurance claims billed by our billing department. Better Gut Better Health's billing department will provide you with:

- One (1) itemized statement for balances due via email or mail once your charge(s) has been processed by your insurance company or companies.
  - If you do not respond within thirty (30) days, we will follow up with a paper statement by mail.
  - If you do not respond within thirty (30) days of your paper statement, we will bill your credit card on file for any outstanding payment(s) due.
  - If your credit card declines, we will mark your account as 'delinquent' and may opt to send you to a collection agency.
- **For contracted insurance companies, your current insurance card must be presented at every visit.** If the insurance company that you designate is incorrect, you will be responsible for payment. If you do not pay within 2 billing cycles, we will charge your credit card on file for payment in full.
- **If you have no insurance,** payment is required at each visit.

**Timely Payments:**

Our billing office is available for your inquiries regarding your billing statements. Please contact them at: **(866) 828-8901** In the event your credit card on file is no longer valid *or* if we do not hear back from you with a mutually satisfactory resolution *or* if we have had no payment on your account for sixty (60) days, your account will be labeled as a 'Delinquent' account and forwarded for further collections efforts to a collection agency. Our providers may then opt to discontinue future care for patients whose accounts have delinquent account status.

**Financial Agreement:**

Please read this agreement carefully. Our providers have a relationship with you and not your insurance company. It is your responsibility or if you are a minor, your parents/guardians to understand their insurance benefits and follow up accordingly with any billing issues or concerns.

*Revised 12/18*