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**FINANCIAL POLICY FOR OBSTETRICAL PATIENTS**

CircleHealth OB/GYN charges a global fee for your pregnancy. This is the required method of billing for your insurance company. The American College of Obstetrics and Gynecology guidelines define the global package as follows:

13 routine antepartum (prenatal visits) Initial and subsequent history and physical exams

Weight, blood pressures, fetal heart tones, routine urinalysis

Monthly visits up to 28 weeks of gestation (5-6 visits)

Biweekly visits to 36 weeks of gestation (4 visits)

Weekly visits until delivery (3-4 visits) Vaginal or C-section delivery (C-section requires an

Routine postpartum care assistant)

This fee **DOES NOT** include problem visits that are scheduled in addition to your normal routine prenatal visits. These visits include, but are not limited to, the following problems that may occur during your pregnancy:

Abdominal /pelvic pain Fever

Urinary tract infection Cold, flu, cough, sore throat, sinus infection

Vaginal discharge musculoskeletal discomfort

We will charge an office, hospital outpatient or hospital inpatient charge for these services and your insurance may require a co-payment for these visits.

The global fee **DOES NOT** include ultrasound, non-stress tests, laboratory testing including any genetic tests, i.e. NIPT, Amniocentesis, Tay-Sachs testing. These procedures may be associated with a visit and your insurance may require a co-payment for these charges. Be aware any insurance co-pays or deductibles will also apply to these tests.

Your insurance coverage will be verified. You will be notified of your financial responsibility and a payment plan established. Full payment is required prior to your delivery date.

If you have any questions regarding this policy, please speak with a member of our billing department.

The physicians at CircleHealth OB/GYN

**PATIENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Form: A-12, 10/28/2019