Dear Patient,

Thank you for allowing Nature Coast Anesthesia Providers, P.A. to provide the highest level of comprehensive anesthesia services for you. This letter is intended to inform you of our billing practices for the services you will be receiving. There are multiple billing components, such as the professional services of the surgeon, the professional services of the anesthetist, professional services of the pathologist, and the use of the facility and equipment.

As a courtesy, we will bill your primary and/or secondary insurance company for the anesthesia services and make every effort to collect all charges from your insurance company. However, if your insurance company deems the anesthesia charge or the services of the anesthetist as non-covered, you will be billed at our current self-pay rate.

* If we are **in-network** with your insurance company, we will receive the payment and explanation of benefits (EOB) directly from the insurance company. You will be responsible for paying any co-pays and/or deductibles in accordance with your insurance carrier contract.
* If we are **out-of-network** with your insurance carrier, the payment and EOB for our services might be sent to you. You will need to endorse the insurance payment check and mail it, along with the EOB to the address listed below. You will receive a mailing from our billing company with specific instructions. As a non-participating provider, we are unable to determine the payment your carrier will make, thus we are unable to accurately determine what, if any, you will be responsible for.
* Patients with **no insurance** **coverage** will be billed at the current self-pay rate of $350.00. If you wish to pay for services and not submit a claim to your insurance carrier, please contact our office to discuss payment. Generally, you will be responsible for the amount the carrier would have paid if the claim had been filed. If you are determined indigent by your State Authority, please provide a copy of the letter to our office.

If you have any questions regarding your bill, please contact our office at (386) 697-1364.

Please mail payments, EOBs, correspondence, etc to:

Nature Coast Anesthesia Providers, P.A.
421 SE Alfred Markham St.
Lake City, FL 32025