



Choosing a Women's Health Care Provider

The Everett Clinic
For the whole you.

The Everett Clinic has many physicians who specialize in women's health care. The Clinic also offers uniquely qualified nurse practitioners who work under the direction of these excellent physicians.

■ Family Practice Physicians:

Family Practice physicians coordinate all aspects of your care, providing the broadest range of services in times of sickness and health. Some of our Family Practice physicians specialize in obstetrics. When you are pregnant, your Family Practice physician provides prenatal care, delivers your baby, and cares for you and your family after the birth. They have special training in, and are committed to, family-centered maternity care. If complications arise, they provide optimal care, working as a team with The Everett Clinic Obstetricians.

■ Obstetrics and Gynecology Specialists

Obstetrician/Gynecologist (OB/GYN) physicians are specialists in women's health care. They have extensive training and experience in the areas of pregnancy, childbirth, infertility, and surgery. As specialists, they are highly skilled and knowledgeable regarding obstetrical and gynecological care. The Everett Clinic OB/GYNs work as a team and are committed to offering the highest quality care for expectant mothers. An OB/GYN physician is always available at the Family Maternity Center at the Providence Pavilion, 24 hours a day, seven days a week. They manage any unexpected emergencies that may arise during labor and delivery.

■ Nurse Practitioners

The Everett Clinic's Nurse Practitioners are nurses with advanced training who have devoted their study and practice exclusively to gynecology and obstetrics. They are available to provide routine health screenings, pap smears, breast exams, contraception counseling, infertility counseling, and menopause/estrogen counseling. They also work with physicians to follow normal pregnancies with special focus on education and wellness.



Obstetrical Services Financial Information

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The following information and agreement is provided to you by the Financial Services Department of The Everett Clinic. It is our goal to assist you as much as possible in the billing and payment of your Obstetrical services. While we estimate your costs as accurately as possible, please be aware that your specific needs may require services not anticipated by our office or your physician.

OB Charges:

The current charge for Obstetrical (OB) care is \$3,080.25. The following services are included:

- Routine prenatal visits ("package" of scheduled monthly, biweekly and weekly visits until delivery)
- Uncomplicated vaginal delivery (physicians fee only)
- Post-partum visit

This charge does not include:

- Hospital fees such as:
 - Room charges
 - Nursery, etc.
- Anesthesia
- Laboratory tests
- Ultrasounds
- Complicated deliveries
- Fetal monitoring (NSTS)
- Circumcision
- Extra visits related to high risk prenatal care
- Upper respiratory infection
- Treatment of a sprained ankle
- Removal of a lesion or wart
- Urinary tract infection
- Sinusitis, rhinitis, bronchitis
- X-rays
- Other procedures and services performed during the routine prenatal visit such as:
 - Pre-term labor
 - Cramping
 - Vaginitis
 - Hemorrhoids

In these cases, normal office visit codes will be used to bill your insurance. Any copay or patient responsibility fees will be billed to you separately.

To Our Private Pay Patients:

Patients who do not have medical insurance will be required to make an OB deposit of \$950.00 prior to the first prenatal visit. At this time, a payment agreement will be made on the remaining anticipated charges. The payment amount will be computed by dividing the remaining balance by the number of months before your due date, plus one month. Finance charges will not accrue on your account if you uphold your payment arrangement. It is our policy that OB charges be paid in full within one month of delivery.

To Our Insured Patients:

If you have medical insurance, the insurance company must be contacted for confirmation of your OB benefits. Based on this information, we estimate the amount which will not be covered by insurance

To Our Insured Patients ... continued from front

(patient responsibility). This amount can be paid in one payment or a monthly payment agreement. The balance should be paid in full within one month after your insurance has processed the claims. Specific procedures in the billing of your account may vary depending on the insurance carrier you have. We will inform you of any additional information or changes in procedure. Please refer to the Business Office and Financial Services brochure for more detailed insurance processing information.

Complicated Deliveries:

If you have a complicated delivery, there will be a percentage increase.

Circumcision Fees:

Should you elect to have your baby boy circumcised, there is a \$425.00 physician's fee which is not included in the OB package. If this is not a benefit with your insurance plan, it must be paid prior to the time of service. Patients with DSHS coverage should be aware that this service is not covered by DSHS and payment in full will be required before the procedure is performed. The facility/hospital where the circumcision is performed normally has additional fees. Please check with the facility for more information.

Family Medical Leave Act Form:

If you need a Family Medical Leave Act form filled out, there is a \$25 fee if the form is not filled out at the time of your visit. These forms take a considerable amount of time to prepare, which reduces the physician's time to see scheduled patients. The fee for this form is not covered by insurance and must be paid prior to the time of service. Patients with DSHS coverage should be aware that this service is not covered by DSHS and payment in full will be required if the form is not filled out at the time of your visit.

When Your Baby Is Born:

When your newborn is brought in for their first check-up, a new account will be created. Please bring the appropriate insurance information with you to ensure complete and accurate account information.

Please Notify Us If:

- Your insurance carrier has changed or will change during your OB care
- You are transferring care to another facility due to an insurance requirement
- You are transferring care to another facility because you are moving
- You are unable to make your scheduled prepayment

We look forward to serving you. If you have any additional questions or concerns, or are unsure whether a service is covered under the OB charge, please call our Financial Services representative at 425-258-3916.