Scott & White Healthcare is a leader in providing information to our patients and consumers. We realize that it is important for you to make informed decisions regarding your healthcare and we are committed to providing tools necessary to help you understand your physician and hospital charges. The following information is being provided to you in an effort to help you understand provider-based billing.

Certain Scott & White Healthcare service locations qualify as “provider-based” in accordance with criteria established by the Center for Medicare and Medicaid Services (CMS). Clinics that are within a 35 miles radius of Scott & White College Station Hospital (the “Hospital”) are eligible to be provider-based if such clinics are operated, monitored and supervised as a hospital outpatient department, and integrate their services such that clinic patients have full access to the services offered by the hospital. Our provider-based clinics in the College Station region are sufficiently integrated with Scott & White Hospital – College Station so as to be considered hospital outpatient departments. These provider-based facilities are therefore permitted to generate separate hospital charges, called “facility charges,” to help cover expenses incurred by the Hospital in operating such facilities. Expenses incurred by the Hospital include but are not limited to the salaries of non-physician support staff, equipment and supplies, expenses associated with the operation/maintenance of the building(s), and the costs of maintaining a fully-integrated medical record that allows Scott & White providers to see a complete history of all inpatient and outpatient services provided to you throughout the Scott & White Healthcare system.

Based on these circumstances, when you receive care at one of the provider-based facilities listed below, you will receive two (2) charges: (1) a professional charge for the services provided to you by the physician or mid-level provider who rendered your care, and (2) a facility charge for the expenses incurred by the Hospital in operating the facility.

Many insurance carriers apply the facility charge toward the patient’s hospital deductible. This may result in higher out of pocket expenses for patients depending on their individual coverage and benefits.

The following College Station regional clinics are provider-based, and a patient or their family member can expect to see a professional bill and an outpatient hospital bill for services received at these locations:
College Station Clinic - Arrington Road
1296 Arrington Road
Suite 100
College Station, TX 77845

Rock Prairie Clinic
800 Scott & White Drive
College Station, TX 77845

College Station Clinic
1600 and 1700 University Drive East
College Station, TX 77840

Boonville Clinic
748 N. Earl Rudder Freeway
Bryan, TX 77802

College Station Cosmetic Surgery Center
1110 Earl Rudder Freeway South
College Station, TX 77840

Frequently Asked Questions:

What is a provider based physician practice?
A physician practice (Scott & White Clinic) that the Hospital (Scott & White Hospital – College Station) operates, maintains and supports as an outpatient department of the Hospital.

What are administrative and facility costs?
They are costs incurred by the Hospital in operating the practice, (i.e. overhead costs such as electricity, phones, heating, cooling, etc., equipment/supplies, and compensation for non-professional staff). These costs are necessary in order for Scott & White to see and treat its patients.

Why are you charging me twice for the same day?
This clinic is a provider-based practice and based on Medicare guidelines, there is split billing for the professional fee and the facility fee. The Hospital incurs significant cost in operating and maintaining the clinic, and the facility charge helps to cover that cost. The professional fee is for the physician or ancillary provider service.

I did not go to the hospital; I went to see my doctor…
The Scott & White clinic location where you were treated is an outpatient department of Scott & White Hospital – College Station. The Hospital is responsible for the cost to operate and maintain the clinic; therefore, based on Medicare regulations, it is an extension of the Hospital.
**If my insurance company is not paying for the charges, why should I?**
We are required to bill you for balances not paid by your insurance company. Your claims were processed based on your benefits for outpatient hospital services and you are responsible for any balance not paid.

**What if I don’t have Medicare?**
Many private insurers recognize and value the integrated care provided to their insureds in provider-based facilities. Such insurers generally follow Medicare’s guidelines in processing provider-based claims.

**Does this mean patients will pay more for services?**
Depending on their particular insurance coverage, it is possible patients may pay more for certain outpatient services and procedures at our provider-based/hospital outpatient locations than at one of our other sites. We recommend patients review their insurance benefits or contact their insurance provider to determine what their policy will pay and what out-of-pocket expenses they may incur.

**Where can patients call with their questions or concerns?**
Patients may contact:

**979-207-4090**

**What can patients do if they are having difficulty paying for healthcare services?**
Scott & White Healthcare offers various payment options. For further details please contact the Revenue Cycle Operations Customer Care Center at the number listed above.