

WATERSIDE AMBULATORY SURGICAL CENTER, INC.

Our facility will contact you regarding your insurance coverage and expected charges approximately 2 days prior to your procedure. Generally, all insurance carriers, including Medicare reimburse outpatient centers just as they would other health facilities. Standard charges have been established for all procedures performed at Waterside Ambulatory Surgical Center.

Your financial responsibility at the time of service will be any deductible, copay, and/or co-insurance. You will be balance billed for any services and/or charges not covered by your insurance plan. As a courtesy to you, we will bill your insurance.

Not included are fees for your physician, anesthesia services, laboratory, pathology, or other tests which may be ordered by your physician. Those fees are submitted separately.

Charges for procedures not fully covered by insurance must be paid in full at the time of the service. Waterside Ambulatory Surgical Center will assist in filing insurance claims. We will accept personal checks and credit cards, including Visa, MasterCard, and American Express.

Insurances Accepted

<ul style="list-style-type: none">• Aetna U.S. Healthcare• AvMed Health Plan• Beech Street• Blue Cross/Blue Shield• Blue Cross/Blue Shield/Health Options• Champus Tricare• Cigna Healthcare• Coventry• First Health Network• Golden Rule• Great West• HCD• Humana Healthcare Plans(no Medicaid)• Maritime• Medicare Part B Medicare Railroad Travelers• Medicaid• Multiplan	<ul style="list-style-type: none">• Oxford• PHCS• Medicare Railroad Travelers• Medicaid• Multiplan• NHP• Oxford• PHCS• Sunshine State• Tricare Standard• United Healthcare• United Payers• Vista Healthcare and Vista Health plan of South Florida – Group plans only• Most Network PPO's• Most Out of State Insurances that have TRAVELLING BENEFITS
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Out of Network

Patients receiving treatment at our surgical center with insurance which our facility is out of network may be eligible to receive an adjustment to their assigned out of network patient liability, assuming our facility is not prohibited from offering Out of Network adjustments under State/Federal laws or your insurance company's provisions. If not prohibited, the application of any out of network discount is subject to vary based on a patient's benefit coverage. Accounts which become delinquent may have the adjustment disallowed.

FloridaHealthFinder.gov

Patients may access the State of Florida's Agency for Healthcare Administration website at this link for information about this facility: www.floridahealthfinder.gov