FREQUENTLY ASKED QUESTIONS

Effective January 1, 2022, Huntsville Hospital Endocrinology and Diabetes Clinic will become a hospital-based outpatient clinic.

What does "hospital-based outpatient clinic" mean?

"Hospital-based outpatient" is a term that Medicare uses to describe services provided in hospital outpatient departments that are integrated clinically and financially into the hospital. This means that services at The Endocrinology and Diabetes Clinic will now be an outpatient department of Huntsville Hospital.

What are the benefits of being cared for at a hospital-based outpatient clinic?

Medicare acknowledges the value of providing care in an integrated and collaborative environment. Hospital-based outpatient clinics are held to nationally recognized service and patient care standards which lead to a higher quality of care for patients. As a hospital outpatient department, The Endocrinology and Diabetes Clinic will now be required to meet hospital accreditation standards established by The Joint Commission, which are greater than those of non-hospital based outpatient clinics. We will also be able to better coordinate your care across our facilities by consolidating your medical record which makes it easier for you when visiting Huntsville Hospital Health System.

How will this change to a hospital-based outpatient clinic affect me as a patient?

Patients may receive two bills for services provided in this hospital-based outpatient clinic: one for the services provided by the physician and one for the services provided by the facility. Depending on your insurance benefits, you may pay more for certain outpatient services or procedures. Please review your insurance benefits or contact your insurance provider to determine what their policy will pay and what out-of-pocket expenses may be incurred based on the location of the services provided.

Does this billing change apply to patients regardless of the insurance type?

All insurance payers, including commercial, Medicare, Medicaid, and Tricare will be billed for professional and facility charges, however, many commercial insurance providers treat the two bills as a single occurrence and in those circumstances, you may not see any difference in your out-of-pocket expenses.

What should I ask my insurance carrier if I have questions about the new billing process and my out-of-pocket expenses?

You should ask your insurance carrier if facility charges are covered in an outpatient hospital clinic. You should also ask about the out-of-pocket patient responsibility associated with these outpatient facility services. Some outpatient facility charges may be applied toward your hospital deductible and/or co-insurance portion of your benefits.

How will I know if a clinic is a hospital-based outpatient or provider-based clinic?

You can ask during scheduling or pre-registration for your appointment. There will also be signage at The Endocrinology and Diabetes Clinic that states they are a department of Huntsville Hospital.

Will there be changes to the check-in process?

The Centers for Medicare and Medicaid Services (CMS) require that we verify whether or not Medicare is your primary insurance. This requires a Medicare Secondary Payer (MSP) questionnaire to be completed at each visit.

What can I do if I am having difficulty paying for my health care services?

Huntsville Hospital has a financial assistance policy for those patients that qualify. Financial assistance policy and application are on the Huntsville Hospital website, can be obtained at any registration desk, or by calling (256) 265-9689 or (256) 801-6280.