

OBGYN Associates Billing FAQs

Infinite Health Collaborative ("i-Health")

Infinite Health Collaborative ("i-Health") is a group of independent physician practices who have joined together to offer a solution for your healthcare needs. Our goal is to provide a network of physicians that are closely aligned to deliver value-based care. OBGYN Associates is proud to partner with other independent physician groups in Minnesota and western Wisconsin. The Women's Health division of i-Health will continue to operate under the OBGYN Associates name, however all of your billing and insurance explanation of benefits (EOB) will display the legal business name of "Infinite Health Collaborative."

OBGYN Associates is the parent name of five Women's Health practices. They include Associates in Women's Health, Diamond Women's Center, Haugen OBYGN, OBGYN & Infertility (OGI) and OBGYN Specialists.

Pay Bills Online

OBGYN Associates/i-Health makes it easy and convenient to pay your bill. From the main page of our website, navigate to the "Pay My Bill" link. You can pay online by eCheck, VISA, American Express, MasterCard, Discover or CareCredit. Be sure to have your statement and payment method readily available when making your payment. If you have any questions regarding your billing statement, please call our Customer Service Team at 952-512-5625.

Insurance, Hospitals & Billing

OBGYN Associates/i-Health accepts a wide range of health plans. We are participating providers in BCBS, HealthPartners, Medica, Preferred One, United HealthCare (UHC), HealthEZ/America's PPO, Aetna, Cigna, Medicare, Medical Assistance and U-Care. For any questions regarding your provider's in-network status, please contact our Customer Service Department at 952-512-5625.

Insurance benefits have become very complex in the last several years. Your benefit plan may only limit you to treat with a subset of contracted providers. In addition, for patients that may require surgery, OBGYN Associates/i-Health may be in-network with your insurance plan but the surgical facility may be out-of-network. Due to the complexity of insurance benefits, OBGYN Associates/i-Health requests that all of our patients contact your insurance if you have any questions regarding in-network providers offered by your insurance plan. If OBGYN Associates is contracted with your plan, but the surgical facility or hospital is not in-network, we may recommend transferring your care to another OBGYN Associates physician.



Hospitals & Same Day Surgery Centers

Our physicians provide maternity and delivery services and perform surgeries at several hospitals located throughout the Twin Cities metro area. In addition to hospitals, they also perform surgeries at many same-day surgery centers. While OBGYN Associates physicians are on staff at many hospitals and same-day surgery centers, not all physicians are on staff at all hospitals and all surgery centers. It is important to inquire which facilities your insurance plan will allow for delivery of your baby and/or perform surgeries. In addition, it will be important for you to confirm that the facility location is also in-network with your insurance.

Billing/Financial FAQ

As a patient of OBGYN Associates, you may have questions regarding your bill. We have listed some common questions and answers for you that will help explain and provide additional information about your bill.

Q. I received services at OBGYN Associates. Why does my explanation of benefits (EOB) and statement indicate services were provided by Infinite Health Collaborative?

A. OBGYN Associates is one of multiple physician practices that operate under the legal business name of Infinite Health Collaborative ("i-Health"). Although our legal business name has changed, we will continue to offer the comprehensive solution for your Obstetric and Gynecology care. OBGYN Associates will continue to be operate under the name OBGYN Associates even though our legal business name has changed.

Q. When will I receive my first statement?

A. OBGYN Associates /i-Health will submit a claim on your behalf to your insurance carrier. After your insurance provider processes your claim, OBGYN Associates /i-Health will send you a statement outlining any out-of-pocket costs you may have. Your statement will include any deductibles and/or co-insurance amounts you may owe. You will receive a statement approximately 30 days after you receive services. Co-payments are due at the time of service.

Q. Should I bring my insurance card with me?

A. Yes, OBGYN Associates will need the information on your insurance card to correctly file a claim with your insurance company. You will be asked to present your insurance card at each visit.

Q. Do I need a referral?

A. The need for a referral differs by insurance plan. Please contact your insurance company directly prior to scheduling an appointment to inquire whether OBGYN Associates is in-network for your health plan. Obtaining a referral is the responsibility of the patient.



Q. Do I need a prior authorization?

A. The need for a prior authorization differs by insurance plan and the type of procedure or service being provided. OBGYN Associates will initiate the prior authorization request from your insurance company for you; however, it is your responsibility to make sure that you have prior authorization before receiving certain health care procedures and/or services.

Q. Why didn't my insurance company cover my entire bill?

A. Out-of-pocket expenses are determined by your insurance plan during claim processing. These amounts may include co-payments, deductibles, and/or co-insurance. If you have questions or don't agree or understand the amounts you owe, please contact your insurance company directly as they determine patient responsibility amounts for any services provided to you based on your insurance plan contract.

Q. When do I become responsible for my bill?

A. You are responsible for your bill at the time you receive services from OBGYN Associates. We will work with you and your insurance company to get all eligible benefits processed in a timely manner. We will send you a statement approximately 30 days after you receive services for any patient responsibility amounts you may owe.

Q. I have received my first statement and I am not able to pay my entire balance. Does OBGYN Associates /i-Health allow flexibility in payment terms?

A. While OBGYN Associates encourages patients to pay in full after your first statement, we understand that some may need flexible payment options. OBGYN Associates does offer some limited payment plans based on your balance. Length of time allowed is also based on your balance. If you need greater flexibility than what OBGYN Associates can offer, we do have a relationship with Care Credit. More information on Care Credit can be found on our website.

Q. What is the difference between diagnostic care and preventative care?

A. Preventative care includes annual physicals, immunizations, screening lab tests and other services intended to prevent illness or detect problems before you may notice any symptoms.

Diagnostic care involves treating or diagnosing a problem you're having by monitoring existing problems, checking out new symptoms or following up on abnormal test results. Examples of diagnostic care are STD testing to diagnosis a vaginal infection and diagnostic mammogram and/or ultrasound to follow up on a breast lump or pain.

Your insurance coverage may differ depending on which type of services you receive. Many preventative services are covered at 100% with no out-of-pocket costs, while diagnostic services can have co-insurance or amounts applied to your deductible which results in out-of-pocket costs.



Q. What is included in Obstetrical Global Package?

A. Pregnancy/Maternity services are billed as a package to your insurance company. This means that several services are included in a package and not billed separately. However, there are some services that are billed outside of this package.

The global package includes:

- Routine OB Visits
- Recording of weight, blood pressures, fetal heart tones, routine chemical urinalysis
- Delivery services including admission to the hospital, management of uncomplicated labor and vaginal or cesarean delivery
- Postpartum care

Services billed separately outside of the global package*:

- Initial physician office visit
- Laboratory services
- Medical complications of pregnancy (e.g., diabetes, hypertension, preterm labor)
- Ultrasounds
- Genetic testing
- Non-stress test (NST)

^{*} There may be other services billed outside of the global package that are not listed here. Please check with our business office for any specific billing questions.