



Joseph Cipriano, M.D. FACOG
Rebecca Cipriano, M.D. FACOG
Susan Pacana, M.D. FACOG
Gabrielle Pinzon, M.D.
Helen Simigiannis, M.D.
Neeti Misra, M.D.

www.healthywomanusa.com

Robert Baron, MBA
Executive Director

Stephanie Serrentino
Office Manager

Colts Neck
24 Highway 34
Suite D-2
Colts Neck, NJ 07722
Ph: (732) 431 - 1616
Fax: (732) 866 - 7962



Freehold
901 West Main Street
Suite 105
Freehold, NJ 07728
Ph: (732) 303 - 0888
Fax: (732) 303 - 0304



East Windsor
300A Princeton Hightstown Rd
Suite 202
East Windsor, NJ 08520
Ph: (609) 448 - 2886
Fax: (732) 866 - 7962

Pre Natal Insurance Information

Dear Patient,

Congratulations on your Pregnancy! We at Healthy Woman are devoted to making this a pleasurable experience for you during the next few months. In an effort to ensure your financial responsibilities are covered, I recommend that you call your Insurance Company so you are aware of your benefits.

Your routine prenatal visits should be covered by only 1 co-pay. **However**, for Ultrasounds, Non-Stress tests and Delivery, Pap smears and cultures, you may be responsible for one or more of the following: co-payments, co-insurance, or plan deductibles. If we send you for any testing outside our office, I will verify and obtain precertification from your Insurance Company.

Please make sure that you let me know when you are going for testing in advance so the proper steps are taken to obtain any pre-certification needed. If your insurance co requires a referral please inform our office within 48 business hours. **Failure** to do so could result in a denial of claims that you will be responsible to pay.

Please Note: Your visits to maternal fetal medicine physicians will be with perinatologists. These physicians are not members of Healthy Woman. You may receive additional bills from the perinatology group or facility where scans are performed. These bills are not generated from our office; therefore, any billing issues or questions that arise in conjunction with these bills must be addressed to the entity sending the bill.

Please call me if you have any questions or concerns regarding your insurance needs.

Thank you,

Cyndi Kiefer
Benefits Coordinator
732-431-1616



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Understanding Your Insurance Coverage

This information sheet is designed to give you an understanding of the billing process as it works at Healthy Woman. This is just general information not specific to any insurance carrier. It is strongly suggested that you contact your insurance carrier at the 800# on the back of your ID card to discuss your plan's specific benefits.

Global Billing - Most of your prenatal care is billed out in one package upon delivery. This package includes all normal prenatal visits, your uncomplicated delivery in the hospital and your normal post-partum care. Services that will be billed additionally are any prenatal visits prior to 6 weeks of pregnancy, your initial prenatal visit, ultrasounds, non-stress tests and visits unrelated to pregnancy e.g. urinary tract infections, yeast infections, breast lumps, etc. Therefore, for each of these services you need to check with your insurance carrier to be sure that they can be performed in our office by one of our physicians. Any applicable co-payments and coinsurances will be required for these services.

Co-payments - If your insurance requires that you pay a co-payment when you visit your physician you will most likely NOT be responsible to pay at each visit. Most insurance carriers only require you to pay one co-payment at your initial prenatal visit. Typically for additional services such as Non-Stress Tests, ultrasounds and visits unrelated to pregnancy, you will also be required to pay a co-payment.

Ultrasounds - Typically you will have an ultrasound at your initial (6-8 week) prenatal visit and another at your 2nd prenatal visit. These ultrasounds are done to check that the pregnancy is progressing normally. Some insurance carriers will not allow you to have ultrasounds performed in our office because they require that you go to a Radiology site that they are contracted with. In this unfortunate case, we can give you a script to have the ultrasound performed at one of these facilities or you can have the ultrasound done in our office for an additional fee that you will be responsible for. Please check with your insurance and inform your physician of your decision.

If there are no complications during your pregnancy, you most likely will not have another ultrasound until you are **around** 18 weeks pregnant. This anatomy ultrasound typically will be done by a **perinatologist** who is unaffiliated with Healthy Woman. Please check with your insurance to make sure they participate and if any pre-certifications or referrals will be required. Perinatologists will bill additionally for all services they provide.

Upon Delivery - It is necessary that you notify your insurance carrier of your delivery. You can either do this from the hospital or have another family member or the baby's fathers take care of this. When you place this important call you will also need to notify your insurance carrier that you will be adding the baby onto your policy. Otherwise, you will receive bills from the hospital because your insurance company will deny all claims associated with the delivery.

Insurance Changes - If your insurance changes it is imperative that you contact the office immediately. You will need to inform the billing department as well as our medical assistants so the pregnancy can be pre-certified with your new insurance carrier. This will change the billing procedures explained above because the visits performed under the first insurance carrier will need to be billed to that insurance carrier and all other visits, delivery and post-partum care will be billed to your new insurance company. The global package will be broken down in this case.

Questions to ask your insurance carrier:

- Does the hospital where I will deliver my baby participate with my insurance plan?
- Will I be required to pay a co-payment at each visit if my physician bills globally?
- Will I be required to pay a co-payment for ultrasounds and non-stress tests?
- Can I have ultrasounds performed in my Ob/Gyn's office by one of the physicians in the group or will I have to go to a participating radiology site?
- Does the perinatologist / perinatology group participate with my insurance plan?
- Do I need any special pre-certifications or referrals for a perinatologist to perform my 18-week ultrasound?
- What lab do I need to have my blood work done at?
- Will all blood work ordered by my Ob/Gyn be covered?