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<b>Subject</b>	Estimates for Medical Care - Patient Requests, External Website
<b>Index Number</b>	RevCycl-4410
<b>Section</b>	Revenue Cycle
<b>Subsection</b>	General
<b>Category</b>	Departmental
<b>Contact</b>	Shannon Carey
<b>Last Revised</b>	1/8/2019

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### **References**

N/A

### **Applicable To**

For all departments within Gundersen Health System.

### **Detail**

To provide information on how a patient can obtain a cost estimate for medical care.

1. For limited services, patients can access their MyCare account and produce their own estimate.
2. Patients can contact the Revenue Cycle Customer Financial Services line at 58660 or 775-8660 or 1-800-362-9567, ext. 58660.
3. Patients can email [revenuecycle-billing-inbox@gundersenhealth.org](mailto:revenuecycle-billing-inbox@gundersenhealth.org)

### **Implementation**

The following disclaimer and terms and conditions apply to all estimates.

The estimate for Gundersen Health System La Crosse or Onalaska campus represents an approximation of the anticipated charges that Gundersen Health System would bill to insurance for the services and an estimate of your out-of-pocket responsibility based on the information provided to us at the time of the request. Please be aware that any additional charges (labs, office visits, etc.) ordered by the physician may not be included in this estimate. These charges may vary, and this estimate is not a guarantee of the final billed amount. Additionally, Gundersen Health System cannot guarantee coverage or payment by applicable insurance providers. This estimate does not include any unforeseen changes to your insurance coverage or benefits such as deductible, co-insurance, etc. Please contact your insurance provider directly for more information about your out-of-pocket obligations and to determine if this is a covered service under your benefit plan. If you have any questions regarding the estimate, please contact Gundersen Health System - Estimation Line at 1-800-362-9567 ext. 51067 or 1-608-775-1067. If you are uninsured or have questions regarding the different programs we offer to assist with payments, please contact Customer Financial Services at 1-800-362-9567 ext. 58660 or 1-608-775-8660.

The following conditions may occur prior to a service being performed which can change the out-of-pocket amount that is quoted. All estimates are based on services without complications.

1. Inaccurate CPT code
2. Incorrect insurance provided by patient
3. Correct insurance provided but benefits changed between time of estimate and time of service

4. Estimate is past expiration date
5. Inaccurate benefit information from patient
6. Additional or different procedure or testing needs to be performed on date of service.
7. Annual fee changes.