



## Insurance and Payment Services for Weigh Smart® Information Sheet

**Thank you for booking an appointment with our Weigh Smart® program!** As a reminder, at your child's initial evaluation appointment, our team will work with you to determine which of our programs would be the best starting point for your child.

### If our intensive group track is recommended:

- Your child will need a MWPB physical therapy evaluation to ensure he/she meets the physical requirements for the group program and can exercise safely in our gym.
- You will receive a separate document with a financial worksheet and the billing codes used for our group program.

### If our self paced track is recommended:

- This option includes ongoing sessions with our dietitian, physical therapist, and/or psychologist.

### Before your appointment, please contact your health insurance company to verify your coverage.

- Call the member services number listed on your health insurance card and use the evaluation appointment and additional codes listed below to determine your coverage. Be sure to tell your insurance company that services are charged as regulated hospital services.

	Service/Charge	CPT Code	Revenue Code
<b>Evaluation Appointment:</b>			
Gastroenterologist (Dr. A. Scheimann)* or Pediatric Nurse Practitioner (V.Rogers)*	<u>Comprehensive Visit (1)</u>	<u>99205,99204,99203</u>	<u>N/A</u>
		<u>99202, 99201</u>	
Dietitian (first visit)	<u>Nutrition counseling (1)</u>	<u>97802</u>	<u>510</u>
<b>Additional visits that may be billed:</b>			
Physical Therapy**	<u>PT Evaluation (1)</u>	<u>97161,97162,97163</u>	<u>420</u>
Dietitian (individual follow-up visit)	<u>Nutrition follow up</u>	<u>97803</u>	<u>510</u>

*\*only one of these codes will be used depending on how much time was spent with your child and what his/her medical issues are*

*\*\*may be out of network depending on your insurance carrier, you may need to ask about of out-of-network benefits.*

### Important Reminders:

- It is your responsibility to understand your benefits and your financial responsibility.
- If you have secondary insurance coverage, it is your responsibility to let us know or you may be responsible for uncovered charges.
- Co pays and/or past due balances are expected at the time of service.
- Financial assistance is available to those who qualify, please ask if needed.



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### Common Health Insurance Terms and their Definitions

**Carve-Out:** Services that aren't covered by your insurance at a specific place, even if the place is in-network. *For example, your policy may cover services at MWPH but require you to go somewhere else for psychology, rehabilitation, etc. In this case, those services are not covered at MWPH.*

**Co-pay:** A fee you pay each time you receive healthcare. Typically, co-pays don't count towards deductibles or out of pocket maximums. *For example an insurance plan that charges \$15 each time you visit the doctor.*

**Co-insurance:** Some plans require you to pay a portion of your costs even if a deductible has been met and your co-pay has been paid. Co-insurance is usually a percentage of the total bill. Once you've hit your out-of-pocket maximum, co-insurance doesn't apply anymore. *For example, if your co-insurance is 20%, your insurance will pay 80% of the bill.*

**Deductible:** The amount you pay, before your insurance starts paying. *For example, if your deductible is \$2,000, you will pay for your medical care until you have spent \$2,000.*

**EOB (Explanation of Benefits):** A document from your insurance company that shows what you were charged, what your insurance paid, and what amount is your responsibility.

**In-Network:** Your insurance company's approved list of doctors/providers. Your costs are typically lower if you use an in-network provider.

**Out-of-Network:** Doctors/providers that aren't on your insurance company's approved list. Your costs are typically higher if you use an out-of-network provider.

**Out-of-Pocket Maximum:** The most you'll pay for your healthcare in a given year. *For example, if your insurance has an out-of-pocket maximum of \$5,000, once you've paid \$5,000, the insurance company will pay for most of the costs for the remainder of that year (some exceptions may apply).*

**Outpatient Hospital Visit Fees:** At MWPH you will be charged two different fees each time you come to see a doctor or a nurse practitioner.

The **professional fee** covers the services you receive from the provider who sees your child.

The **facility fee** covers the costs of the nurses or other staff who help during your visit. It also covers overhead expenses (heat, electricity, etc.). The state of Maryland requires MWPH to charge these facility fees in addition to the professional fee.

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