

Baylor Medical Pavilion I 4708 Alliance Boulevard Suite 210 Plano, Texas 75093 469.800.6021 Phone 469.800.6022 Fax

Ownership Interest

I acknowledge that one or more of the physicians providing treatment at Baylor Scott & White Ambulatory Endoscopy Center may have an ownership interest in this facility. I understand that my treating physician's ownership interest plays no part in my overall care. I understand that I have the right to choose the provider of my health care services and have chosen Baylor Scott & White Ambulatory Center.

Print Patient Name:

Date:

Signature of Patient or Legal Representative:



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Complaint/Concern Notification

Baylor Scott & White Ambulatory Endoscopy Center Patient:

If you should have a complaint/concern regarding any services rendered at our Endoscopy Center, please direct your complaint/concern to:

Linda Zahn Baylor Scott & White Ambulatory Endoscopy Center 4708 Alliance Boulevard, Suite 210 Plano, Texas 75093 469-800-6021

Texas Department of State Health Services

Health Care Quality Section Health Facility Compliance

PO Box 149347 MC 1979

Austin, Texas 78714

1-888-973-0022

Print Patient Name

Date

Signature of Patient or Legal Representative



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About your Bill

The scheduled colonoscopy and/or endoscopy will be performed at our outpatient facility Baylor Scott & White Ambulatory Endoscopy Center (BSWAEC). You should expect to be billed by both the facility and physician. The anesthesiologist that performs sedation will bill directly from their company. A separate letter will be given to you. If biopsies are obtained, there will also be additional billing from pathology (Pathologist Bio Medical Laboratories)

We will submit the BSWAEC charges to your insurance company at the time of service. You will be responsible for all Deductible/ Co-Insurance/ Co-Pay and non-covered procedures that incur from the procedure you are scheduled.

The BSWAEC has verified your benefits for the **FACILITY ONLY**. Any monies collected on the day of your procedure are estimated. We cannot guarantee payment by your insurance company. Additional monies could be owed once the insurance company processes the claims.

Please be advised that benefits quoted at 100% coverage are for screening colonoscopies **ONLY**. If tissue biopsies are performed, the deductible and co-insurance may apply once claims are processed by the insurance company.

Print Patient Name

Date

Patient Signature or Legal Representative