Patient Billing Flow

At any point in time (before, during, or after care is received), Baylor Scott & White Health's financial counselors are ready to discuss with the patient any financial obligation related to the patient's care and determine if the patient may qualify for any financial assistance programs.

At the Time of Scheduling

Patient provides Baylor Scott & White Health (BSWH) basic demographic information such as name, address, phone number, and insurance plan data. BSWH advises patient to review his/her insurance benefits and coverage limitations. If patient is uninsured, patient may contact a BSWH financial counselor to discuss available financial options.

BSWH utilizes patient information to verify insurance coverage and receive authorization for the scheduled service. If patient is uninsured, a BSWH financial counselor contacts patient and may screen patient for BSWH's financial assistance program or other funding sources¹.

Before Your Arrival

Patient completes pre-registration online or over the phone with a BSWH representative at least two business days prior to scheduled appointment. This process expedites check-in on the day of the patient's scheduled service. Patient receives information regarding any out-of-pocket expenses² the patient may owe related to the patient's service.

BSWH contacts scheduled patient several days prior to service to complete preregistration and informs patient of any estimated out-of-pocket expenses. BSWH continues to verify patient's benefits and eligibility and strives to resolve any insurance concerns before patient's scheduled appointment.

At the Time of Service

Patient arrives at registration, signs consent forms, provides governmentissued photo identification card and insurance card(s), and makes any payments required at the time of service.

BSWH enters updated registration information and collects any payments required at the time of service.

After a Patient Visit

Patient stays alert for communication (including mailed statements and phone calls for outstanding balances) from BSWH. Patient may expect to receive separate bills for other providers. If patient has any questions about his/her billing statement or requires more information about financial assistance, please contact our customer service team.

financial responsibility and sends billing statement to patient. If patient is insured, on average, this process will take 45-90 days after the discharge date.

BSWH determines portion of patient's

¹Other funding sources include, but not limited to. Medicaid. Crime Victims. County Indigent, etc.

² Out-of-pocket expenses are expenses for medical care that aren't reimbursed by insurance. Out-of-pocket costs include deductibles, coinsurance, and copayments for covered services plus all costs for services that aren't covered.