

Provider-Based Billing at Corewell Health

The Corewell Health clinic at which you are a patient has become owned and operated by the hospital. As a result, the clinic is changing its billing process to meet requirements for provider-based billing.

What is provider-based billing?

Even though a clinic or practice may be located several miles away from a hospital, the facility itself is owned by the hospital and considered part of the hospital operations. It is common in health systems for the hospital to own the space and employ the clinical staff. These hospital-owned clinics are called “provider-based clinics” because of their relationship to the hospital provider.

From a billing standpoint, hospitals must bill for services provided in provider-based clinics like other outpatient hospital services. This is known as provider-based billing. When you receive care in a provider-based clinic, your statement will show two charges:

- one charge for the professional services from your physician/provider
- one charge for the hospital facility, which covers the services provided by support staff, use of the room, medical supplies and equipment.

How does provider-based billing affect the cost of care?

Your out-of-pocket cost will depend on your insurance coverage. Some patients might have a higher cost because the facility services apply to the coinsurance and deductible. Patients with a supplement plan are less likely to see a change in out-of-pocket expenses. Please contact your insurance provider to learn how provider-based billing may impact your cost of care.

What number can you call with billing questions?

Please contact one of our Corewell Health Billing Offices:

- Southeast Michigan (formerly Beaumont Health): 1-800-582-1101
 - Southwest Michigan (formerly Spectrum Health Lakeland): 1-866-814-7275
 - West Michigan (formerly Spectrum Health): 1-833-261-4563
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