

Patient Information - Payment Policies

Private Insurance

Office Visits

If our physicians are participating providers for your insurance company, we will file office visit charges. **You are required to pay your co-pay when you check in for your appointment. Self pay patients are required to pay full fee at the time of service.**

Hospital Services

As a service to our patients, we will file all of our physicians' charges for your surgery. Our Patient Account Representatives will review with you your estimated surgical charges. She will calculate what we expect your insurance company to pay and what your financial obligation to our office will be. Prior to your surgery, you are required to pay a portion of the charges not covered by your insurer. The balance will be due within 30 days of your discharge from the hospital, unless other arrangements have been made with our Billing Supervisor.

We will send you a monthly statement that will indicate if your insurance company has paid. If you receive two statements and your insurance company has not paid, it is your responsibility to contact your insurance company to see if there is a problem. If your insurance company has still not paid after three months, it then becomes your responsibility to pay the bill and wait for reimbursement from your insurer.

Usual and customary is the term that insurance companies use to indicate what they allow for procedures. Different insurance companies have completely different usual and customary allowances for procedures. This office does not base its fees on any usual and customary schedule.

Auto or Work Injuries

If you are seeing us due to an injury you had at work or due to an auto accident, please call one of our Patient Account Representatives as your appointment must be pre-authorized by your Worker's Compensation Representative or Automobile Insurance Claims Adjuster. If your appointment is not pre-approved, your appointment may be rescheduled.

Medicare

Our physician is a Medicare Participating Provider which means that Medicare will tell us the amount to charge for our services. Of the amount Medicare allows us to charge, Medicare will pay 80% and you (or your supplemental insurance) will pay 20%. In addition, Medicare has a yearly deductible that you will need to pay before Medicare pays. **Your co-pay (which is 20% of Medicare's allowed amount) is due at the time of your appointment unless you have a supplemental insurance policy.**

If you have a supplemental insurance policy, we will file with that secondary insurer after we receive a response from Medicare. You will receive a bill from us the month following Medicare's response. We allow 60 days from the date Medicare responds for your supplemental policy to pay. After 60 days, the balance becomes your responsibility.

Please bring your Medicare card with you so that we can copy it for our records. If your spouse is employed and has insurance covering you, or if you have other insurance that is primary over Medicare, please bring those insurance cards with you also.

Attorney Referrals/Letter of Protection

Our physician does accept Attorney Referrals for patients in litigation due to accidents and injuries. We will request that you provide your health insurance and automobile information due to future authorization purposes. If no other insurance is available, we do accept a Letter of Protection, which is **the lawyer's written promise to a third party, such as the physician, to protect our interest or fees.** This letter must be presented at the time of the first visit or the patient will be responsible for the full fee until received. This letter must be signed by the patient upon presentation.

Although our office does accept Letter of Protections, the hospitals do not accept them and require that the patient work out a financial plan prior to admissions or surgical procedures. Therefore, be aware if surgery is recommended, you will need to work out a financial plan with the hospital prior to undergoing the procedure.