

Ozark Surgical Group

Patient Financial Policy

Thank you for choosing Ozark Surgical Group (OSG) as your health care provider. We are committed to building a successful physician-patient relationship with you and your family. Your clear understanding of our Patient Financial Policy is important to our professional relationship. Please understand that payment for services is a part of that relationship. Please ask if you have any questions about our fees, our policies, or your responsibilities. It is your responsibility to notify our office of any patient information changes (i.e. address, name, insurance information, etc.)

Co-pays

We ask that each patient present an insurance card at every visit. All co-payments and past due balances are due at time of check-in unless previous arrangements have been made with the Financial Coordinator. We accept cash, check or credit cards. Absolutely no post-dated checks will be accepted.

Co-Insurance and Deductibles

Patient's scheduled for surgery will be given an estimate of their financial obligation for the service that has been scheduled. Our Financial Coordinator will verify each surgical patient's benefits and eligibility to provide the most accurate estimate possible. This estimate reflects the co-insurance required by your insurance and the amount of deductible remaining on your plan. All estimates are due prior to the date of service or your procedure may be rescheduled. Should a patient prepayment result in a credit balance once insurance has paid, a check will be written to you if there are no outstanding insurance balances remaining.

All estimates given are for the surgeon's fees only and do not include charges for Baxter Regional Medical Center, laboratory, radiology or pathology. Actual physician charges may be more or less than estimated depending on the procedure.

Insurance Claims

Insurance is a contract between you and your insurance company. We will bill your insurance company as a courtesy to you. In order to properly bill your insurance company we require that you disclose all insurance information including primary and secondary insurance, as well as any change of insurance information. Failure to provide complete insurance information may result in patient responsibility for the entire bill. Although we may estimate what your insurance company may pay, it is the insurance company that makes the final determination of your eligibility and benefits. If your

insurance company is not contracted with us, you agree to pay any portion of the charges not covered by insurance, including but not limited to those charges above the usual and customary allowance. If we are out of network for your insurance company and your insurance pays you directly, you are responsible for payment and agree to forward the payment to us immediately.

Referrals and Preauthorizations

Certain health insurances require that you obtain a referral or prior authorization from your Primary Care Provider (PCP) before visiting a specialist. If your insurance company requires a referral and/or preauthorization, you are responsible for obtaining it. Failure to obtain the referral and/or preauthorization may result in a lower or no payment from the insurance company and the balance will be your responsibility. Alternative payment arrangements or rescheduling of your appointment may be necessary if not obtained.

Self-pay Accounts

Patients without insurance coverage or patients who do not provide us with accurate insurance information, are considered Self-pay. Self-pay patients are required to pay for all services at the time of service. A discount for payment in full is extended. It is never our intention to cause hardship to our patients, only to provide them with the best care possible and the least amount of stress.

Motor Vehicle Accident (MVA)

It is your responsibility to provide both automobile and health insurance information to OSG if you sustained an injury in an MVA no matter who is at fault. We request your health insurance information in case the automobile policy benefits have been exhausted. Remember, our relationship is with you and not the auto owner.

Workers' Compensation

It is the patient's responsibility to provide our office staff with employer authorization/contact information regarding a workers' compensation claim. If the claim is denied by the workers' compensation insurance carrier, it then becomes the patient's responsibility. At your request, we will submit the claim to your primary medical insurance carrier with a copy of the workers' compensation insurance denial. If your primary medical insurance carrier's claim is denied, you will be responsible for payment in full.

Missed Appointments

OSG requests 24-hour notice for appointment cancelations.

Returned Checks

The charge for a returned check is \$35 payable by cash or money order. This will be applied to your account in addition to the insufficient funds amount. You may be placed on a cash only basis following any returned check.

Medical Record Copies

OSG does not charge patients for copies of their medical records.

FMLA and Disability Paperwork

OSG does not charge patients for completion of FMLA and disability paperwork.

Collections

OSG utilizes an outside collection agency for delinquent accounts. We will, however, make every effort to work with each patient to resolve delinquent accounts prior to being sent to collections.

I understand my responsibilities as they pertain to my insurance and fees. Any balance on my account after insurance has paid is my responsibility.

Patient Name

Date

Patient Signature

Date

Office Staff Signature

Date