

Dr. Michael J. Szalach

OFFICE FINANCIAL POLICY

It is the policy of Dr. Michael J. Szalach to provide the finest quality of foot and ankle care available. In an effort to make our services available to as many patients as possible on an affordable basis, we employ financially sound practice management. This enables us to provide the highest level of care and at the same time be sensitive to cost containment. In an effort to be fair to all of our patients, we have adopted the collection policy outlined below. Please read the policy to learn how our services will be provided to you in an affordable way.

Insurance Coverage and Third Parties

To help reduce paperwork and relieve patients of financial burdens, our office has entered into a contractual arrangement with several insurance companies and third parties. Patients covered under these programs will be responsible only for the services not covered, deductibles, co-payments, co-insurance, and participation in accordance with their specific contracts. Our office will bill the insurance carrier third party directly for that portion of the bill for which it is responsible. If you have coverage under one of these plans and are uncertain as to what items are covered, or what you are responsible for, please discuss this with us prior to receiving services. It is our policy to work with patients when confusion arises over these issues to eliminate any possible future problems or misunderstandings.

As a service to our patients, we will bill other third parties directly only when the patients assign benefits directly to Dr. Michael J. Szalach. In those cases, the insurance company will generally pay us directly and the patients need pay only deductibles, co-payments, co-insurance amounts, and non-covered services. If a problem with the third party occurs, we will provide the patient with information on services performed so that the patient may receive all benefits under a plan. When this occurs, however, remember that the patient is ultimately responsible for the bill and that our office has no control or authority over the patient's insurance company. Please remember that insurance is considered a method of reimbursing the patient for fees paid to the doctor and is not a substitute for payment.

If your insurance company is a managed care (HMO or PPO) plan, we must keep within their guidelines and protocol. As an enrollee of a managed care plan (HMO or PPO) that we are contracted with, you are required to pay the co-payment each time you are seen. Your insurance company deducts this from our reimbursement. If you are not prepared to pay the co-payment, a service charge (1.5%) will be added after ten days in order to keep billing expenses down. If you are enrolled in an HMO that requires a referral from your Primary Care Physician (PCP), you must have the referral with you in order to be seen by Dr. Szalach. If you arrive with no referral, you have two options: (1) You can reschedule. (2) You will have to sign a waiver from your insurance company stating that you understand there is no referral on file. If the referral is not received, you will be responsible for full payment of services.

For any balances due to this office, it is our policy to bill every 30 days. Generally, any patients receiving a balance due are expected to make payment in full within 30 days of receiving their statement. A service charge of 1.5% per month (18% annual) will be added to all unpaid balances. Overdue accounts will be turned over to our collection service. If any account requires collection or legal proceedings, 33% of the balance due can be added to cover our costs. A \$25.00 service charge will be added for all returned checks indicating insufficient funds. Patients who have large balances as a result of surgery, extended care or hospitalization, and who are unable to make full payment of their bill as a result of financial difficulties, should contact the office as soon as possible. If a problem comes up that you didn't anticipate and you are unable to pay your bill, contact us as soon as possible. This will let us know you are receiving your statement and are not simply avoiding payment. It is the policy of this office to help work out payment terms for patients in financial need, but we can do so only if we are contacted to make the necessary arrangements.

Orthotic Policy

Orthotic devices are custom fabricated shoe inserts that are made on an individual basis from the cast of the patient's feet. Once the devices are fabricated, they may not be returned. These devices can be adjusted if needed. These devices are not necessarily for everyone, however, if it is determined that you require such a device to treat your condition, the following will apply: (1) If the orthotic device is a non-covered benefit, as determined by your insurance company, a 50% deposit will be required at the time of casting. (2) You may ask to be placed on a payment schedule according to your financial ability to pay. Otherwise, payment in full is expected at the time of dispensing the device.

Summary

If you have any questions regarding our policies, please contact the office to discuss them. Things don't always go as planned. If a problem comes up that you did not anticipate please contact us. We want to provide you with the best and highest quality of care possible. That requires our commitment as well as your cooperation. We would especially like to thank you for choosing Dr. Szalach for all of you foot and ankle health needs.

I HAVE READ ALL OF THE ABOVE AND UNDERSTAND THE TERMS, CONDITIONS AND PENALTIES.

Signature _____ **Date** _____

(Patient, Parent or Guardian)