

Allegan Orthopedic and Sports Medicine Center

Financial Policy

Allegan Orthopedic and Sports Medicine Center is dedicated to providing you with the best possible care and service. We consider your understanding of our financial policies as an important part of your treatment here. To assist you, we have the following financial policy. If you have any questions, please feel free to discuss them with our staff.

YOUR INSURANCE INFORMATION:

You, as the responsibly party, must provide our office with up-to-date insurance information. We will copy your insurance card at your visit. Any changes in insurance coverage should be reported upon your arrival to your appointment.

REFERRALS:

We are a specialist practice. If your insurance plan requires a referral for your visit here, you are responsible for obtaining that referral. If you fail to do so, please understand that you may not be able to be seen, or you may be financially obligated for the total charges incurred during your treatment here.

COPAYS & DEDUCTIBLES:

We will collect your copay when you are seen for your appointment. Our office will then file a claim with your insurance carrier. Any additional amounts that you are responsible for once your insurance has paid, will be billed to you. If your insurance has labeled a service as "not covered" you are responsible for the complete charge. Payments are due upon receipt of a statement from our office.

MEDICARE:

Medicare patients are responsible for their annual deductible, co-payments, and charges for non-covered services.

SURGICAL CASES:

We work with many groups of people as well as vendors to help make you as comfortable as possible before, during, and after your surgical procedure. When having surgery you may receive an explanation of benefits from your insurance company and possibly a bill from Allegan Orthopedic and Sports Medicine Center. You may also receive an EOB and corresponding bill from other groups related to your procedure as well. Some of these groups include Allegan General Hospital, Southwest MI Radiology, and Compression Therapy, etc. Our charges are for the professional fees (also known as the surgeon's fees) associated with your care. We cannot negotiate other company's bills, nor can we offer the same generous discounts to you, for their charges. However, it is important that these people are a part of your care, to ensure you are comfortable during your surgical period and obtain the best results possible.

SELF PAY PATIENTS:

We try to offer a variety of options to self-pay patients to make their care here as stress free as possible. For any patient that is referred by another provider or is self-referred, there is a down payment of 20% of the total charges required at the initial time of service.

*If you wish to pay in full at the time of service, you are eligible for a 20% discount for not having insurance. In addition to that, you are also eligible for another 20% discount for paying at the time of service. This equals 40% off of the total charges to clear your balance at the time of service! (Best option!!)

*If you are unable to pay in full at the time of service, you are still required to make the 20% down payment. You are then eligible for the 20% discount for being self-pay. If you resolve your total balance within 10 days

of the initial date of service, we will take another 20% off of your total remaining balance. (A little bit more expensive than above)

*If you are unable to pay in full at the time of service, you are still required to make a 20% down payment at the time of service. We will then set up a monthly arrangement with you, so that you can pay the balance off with a little less pressure. (Most expensive option)

MOTOR VEHICLE ACCIDENTS:

You must have a valid claim number, and all information needed to bill your auto carrier prior to your visit here. We will then bill your auto insurance carrier. Any balances not covered by your auto insurance we can bill to your health insurance (if applicable). If you are without health insurance, these balances are your responsibility.

WORKERS COMPENSATION:

If your injury is due to an accident in your work place, please be sure to contact your employer and inform them of your injury. We need all pertinent information to bill your comp carrier. This information includes the name of the insurance company, the billing address, your claim number, your adjustor's name, and your adjustor's phone number. All injuries requiring testing or surgery require authorization through the comp carrier. These authorizations cannot be obtained without the above information. Failure to report any injury to your employer may result in your claims being denied. These claims will then be your responsibility.

RETURN CHECKS:

There is a fee of \$35.00 that will be added to your account for any check returned by your bank for any reason.

DISABILITY OR INSURANCE FORMS:

There will be a charge of \$25.00 for the completion of medical forms. Payment is due at the time that you request the forms to be completed. Please allow 7-10 business days for the completion of these forms. It is also important that you complete your portion of the form and instruct us on where you want the forms mailed or faxed to upon completion. We will keep a copy of these forms for your review.

FINANCIAL HARDSHIP:

We try very hard to help you financially by offering many different options for payment and we understand financial difficulty. If financial hardship causes you to not be able to make payments on your balance, please contact our office for further help and assistance.

COLLECTION PROCESS:

Accounts that are not paid in a responsible manner will be referred to an outside collection agency and will reflect on your credit rating. In the event that your account is sent to collections, you will be responsible for attorneys' fees, if applicable. Keep in mind that any monthly payment towards your balance will keep you out of the collection process.