

Financial Policy

Thank you for choosing **Texas Hip & Knee Center LLP** as your health care provider. We are committed to providing you the best possible care and are pleased to discuss our professional fees with you. Your clear understanding of our Financial Policy is important to our professional relationship. Please ask if you have any questions at all.

PATIENTS MUST BRING THEIR INSURANCE CARD ON EACH VISIT TO OUR CLINIC AND NEW PATIENTS MUST FILL OUT PATIENT INFORMATION FORMS PRIOR TO SEEING THE DOCTOR. WE WILL MAKE A COPY OF YOUR INSURANCE CARD AS WELL AS YOUR DRIVERS LICENSE OR OTHER FORM OF IDENTIFICATION WITH A PHOTO ID (For Identification Purposes).

****TO ASSURE YOUR INFORMATION IS ALWAYS CURRENT AND ACCURATE, PLEASE REPORT ANY CHANGES IN PERSONAL INFORMATION OR INSURANCE CHANGES.**

Forms of Payment: We accept Cash, Checks, Mastercard and Visa.

Self Pay Patients: All self pay patients **and** patients who present without proof of insurance are required to pay for services in full prior to seeing the Doctor. Prompt Pay discount available to self pay patients if balance paid within 7 days of service.

Co-payments: Your insurance REQUIRES that we collect your designated co-pay at the time of service. Please be prepared to pay the co-pay at each visit. **Without it, you may be required to reschedule.** Some insurance plans require the patient to pay a co-pay **and** a percentage of other services (Xrays, DME, injections, etc).

Referrals: If your plan requires a referral from your primary care physician it is **YOUR** responsibility to obtain the referral prior to your appointment. If we do not have your referral at the time of your appointment, **you may have to reschedule your appointment.**

Medicare: We accept Medicare assignment. We will submit your claim to Medicare but you will be responsible for any deductible, co-insurance or any charges not covered by Medicare. We will be happy to bill your secondary insurance if you provide us with the insurance information (copy of card). Any remaining balance will be billed to you.

HMO/PPO/Commercial: All co-payments are due at the time of service, we are members of most, but not all plans. You are responsible for verifying what your insurance plan will cover **and** that we are providers on your plan.

Non-Participating Insurance Plans or “Out of Network”: As a service to our patients, we will bill your claim as a non-participating provider. **All outstanding balances however are the responsibility of the patient. We cannot guarantee that your claim will be paid out of network.** It is the patient’s responsibility to determine if you **have** “out of network” benefits and it is the patient’s responsibility to determine the amount of the “out of network” benefits, if any.

Workers Compensation: We do not accept Work Related Injuries

Third Party Billing: We do not do third party billing. If your injury is the result of an auto accident you will be responsible for payment in full. We will bill your health plan if requested but if payment is denied or delayed due to your accident, you will be responsible for payment in full of your account in a timely manner.

Extended Payment Plans: Patients are expected to pay outstanding balances in full. However, payment plans may be accepted under certain circumstances with approval of our Business Office. Please contact our Billing Office to discuss this option if you cannot pay your balance in full.

Form Completion/Medical Record requests (Disability, FMLA, etc): There is a \$15.00 charge for completing each form that is not directly related to reimbursement of medical services. For compliance purposes, the patient information portion of the form must be completed and signed prior to acceptance, along with payment. Payment must be received prior to completion of forms.

****If you have any questions or need clarification of these policies, please call our Business Office at 817-877-3432**