

Surgical Specialists, P.A.

4013 N. Ridge Road, Suite 210
Wichita, KS 67205

CREDIT POLICY

We at Surgical Specialists want to insure that our patients' health not be compromised or neglected by a harsh or inflexible credit policy. We strive to have a uniform, fair, and consistent procedure for handling of all patient accounts, which encourages the prompt payment of all medical debts through reasonable and effective procedures and follow-up.

Co-Pays

If your insurance requires a co-payment, you will be required to pay this at the time of your visit.

Payments

We accept cash, checks, debit and credit cards for payment.

Uninsured Patients

Surgical Specialists, P.A. does not deny care to patients who find themselves without insurance. All uninsured patients will be required to sign a Patient Payment Agreement before they leave from their first office visit. Uninsured patients may be eligible for an adjusted rate if payment for services rendered is received before the actual service, or on the date of service.

Insurance Claims

Insurance claims will be filed for patient providing appropriate demographic and insurance information. We will file with as many as three insurance companies on behalf of the patient. Copies of the insurance card(s) will be placed in the chart. If patient is filing under workers compensation, the patient is responsible for providing all information necessary to file for workers compensation.

Monthly Statements

All patients will receive a monthly statement informing them of the patient balance and the balance pending with the insurance company (if insured) unless using payment vouchers. *see below*

Collections

Patients will be allowed 90 days from the date of patient responsibility to pay off the account balance. If the patient determines that it is not possible to pay the entire account balance within 90 days, reasonable monthly payments will be considered. A payment plan can be set up through our accounts department. If payment has not been received within 90 days, we will begin taking steps to send the account to collections.

Payment Vouchers

Payment vouchers will be issued upon signing the patient payment agreement. Current balance will be noted in the vouchers, therefore monthly statements will not be sent unless requested by the patient.

Hardship

If a patient feels that they have extenuating circumstances that prevent them from paying a portion or their entire bill, they may fill out a "Request for Waiver of Payment Due to Economic Hardship" form. This form is to be filled out and brought back to us with the required proof. We will review each request and the patient will be notified as to our decision regarding their situation. **Filling out a request form does not guarantee that part or all of your outstanding balance will be waived.** A new request form and hardship documentation must be obtained and submitted for each occurrence.

Lack of Cooperation

Surgical Specialists, P.A. believes that all patients should be treated with dignity regardless of their ability to pay. Surgical Specialists, P.A. reserves the right to terminate a patient from the practice in those rare cases when a patient may be verbally or physically abusive, refuses to give necessary information, or is non-compliant with medical advice.

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NOTICE OF PRIVACY PRACTICES

(Overview)

We value you as a customer and take your personal privacy seriously. Our practice and its physicians and staff strive to respect the patient's dignity at all times. We work hard to maintain your privacy and are very careful to preserve the private nature of our relationship with you. The only information we provide to outside companies is that which is required to provide services on your behalf and for which you have signed consent. In every case in which information is provided, the companies are obligated by law to use the information as contracted and to keep this information confidential.

To serve you better and manage our practice, it is important that we collect and maintain accurate personal information about you. We will always limit our collection of information to that which we believe is necessary to conduct our business properly and provide optimum service to you.

This privacy policy is provided to you as required by Federal law. It simply documents for you our long-standing privacy practices. If you have any questions regarding this policy, please contact us at 945-7309.

NOTICE OF PATIENT RIGHTS

(Overview)

As a patient of Surgical Specialists, you have the following patient rights in regards to your Personal Health Information (PHI).

The right to authorize the use and disclosure of your PHI.

- you have the right to request the nature in which our practice communicates information with you.

Ex: You may ask that we contact you at home, rather than at work.

The right to receive a copy of the practice's Notice of Privacy Practices.

The right to request restriction on certain uses and disclosures of your PHI.

The right to request restrictions on how the practice communicates PHI to the patient.

The right to request an amendment of your PHI if you feel it is incorrect or incomplete.

The right to inspect and copy your PHI.

The right to an accounting of the disclosures of your PHI.

The right to file a complaint.