

TEXAS NEUROLOGY

FINANCIAL POLICY

Thank you for choosing Texas Neurology. We are dedicated to delivering superior, individualized healthcare and value your dedication to upholding this Financial Policy Commitment. Your clear understanding of our Patient Financial Policy is important to our professional relationship. Compliance with this policy is mandatory to receive medical services at our facility. Except as indicated below, payment is required at the time services are provided unless other arrangements have been made in advance. We accept cash, personal in-state checks, Visa, MasterCard, Discover, Care Credit and American Express.

Insurance Coverage Change: All patients must present their insurance card (if applicable) and proof of identification (e.g., Photo ID, Driver's license). Patients who do not provide current proof of insurance may be billed as self-pay patient. If at a later time the patient presents his/her insurance card(s), services already rendered may or may not be retroactively billed depending on the insurance's claim filing requirements. The patient's insurance is a contract between him/her (and/or employer) and the insurance carrier. For this reason, we cannot waive copays or deductibles. If you are insured with an in-network plan but do not have a current insurance card, full payment for each visit is required. It is your responsibility to know your insurance benefits, including co-insurance, deductible, and any items that may not be covered. Please contact the number on your insurance card with any questions regarding your coverage. It is your responsibility to inform Texas Neurology of any changes in policy or coverage prior to receiving services.

Self-Pay: If you are uninsured, you will be responsible for payments for all services rendered prior to your appointment.

Co-payments and deductibles: You are responsible to pay copay, any unmet deductible, and/or coinsurance amounts prior to receiving services. Texas Neurology is a specialist office which may have a higher co-payment, please confirm with your insurance if unsure.

Non-covered services: You are aware that some – and perhaps all – of the services you receive may be non-covered or not considered reasonable or necessary by your insurance. You may be asked to pay for these services in full at the time of visit and/or be responsible for any amounts uncovered by the insurance payor. It is your responsibility to stay updated about your insurance policy coverage, benefits and to notify us of any insurance changes in a timely manner. You must also notify the practice of any other changes to the policy that could potentially affect treatment coverage. Routine in-office procedures, including but not limited to, biopsies, injections, infusions, radiology studies, sleep study, Qutenza, nerve blocks and EMG/EEG's are billed separately from your office visit and will be subject to your deductible, coinsurance or copay.

No Show/Cancellation: You will be responsible to pay a \$50 cancellation/no show fee if you do not cancel a confirmed appointment at least 24 hours in advance, or if you are not present at your appointment. All other services, including diagnostic imaging, infusion, and treatments will be subject to a \$75 fee. Fees arising from lack of notice or cancellations that result in administrative charges are your responsibility and not reimbursable by your insurance. Hence you will bear full responsibility for covering the entirety of the no-show/cancellation fee. You may be discharged from the practice for multiple instances of no show/cancellations.

Electronic/phone communications: Electronic communication may be subject to billing when it involves covered or non-covered services. This service can be a valuable tool for providing medical advice and addressing patient concerns. However, to maintain the quality of care and support the sustainability of healthcare services, there may be instances where patients are billed for such interactions.

Referrals: Patients are responsible to know if a referral is necessary for office visits. (If patient chooses to NOT follow payer policy regarding obtaining a referral from Primary Care Provider, patient can be seen as a Self-Pay and payment in full at time of service will be required.) Failure to do so could result in reschedule of the appointment and you may be subjected to a \$50.00 charge for a missed office visit or a \$75.00 charge for a missed procedure. You would be responsible for balances on visits completed without referrals.

Prior Authorizations: Patients are responsible to check with their insurance carrier to determine if recommended testing is covered under their medical coverage policy. (If patient chooses to have non-covered testing, payment in full at time of service will be required.)

Minors: The parent(s) or guardian(s) is responsible for full payment and will receive the billing statements. A signed release to treat may be required for unaccompanied minors.

Estimates Quotation: Texas Neurology will make every effort to verify the insurance and get estimated patient responsibility prior to your appointment but the amount provided to you is an only an estimate and the amount due from you will be indicated on your statement, once the insurance has processed your claim. For non-covered services, you will be responsible for payment of those services. You reserve the right to deny treatment if you know your insurance will not cover the service offered. You are responsible for authorizing the practice to release all information required to receive reimbursement for the services provided.

Returned Check Fee: Any returned check for the services rendered by the providers at Texas Neurology will result in a \$35.00 fee.

Other Fees: Texas Neurology charges for the following services. Amounts due are payable upon request.

1. FMLA & ADA letter - \$45
2. Disability letter - \$75
3. Other Letters - \$25

Motor Vehicle Accident: If you are a party of litigation or have an open accident case, we will not be able to continue to provide services. Please notify us of any accident or active litigation and check with your insurance as they may provide you with a list of other neurologists in the area.

Non covered insurances: Texas Neurology does not accept Worker's Compensation cases, letter of protection or any 3rd party liability coverage.

Regardless of any personal arrangements that a patient might have outside of our office, if you are over 18 years of age and receiving treatment, you are ultimately responsible for payment of the service. Our office will not bill any other personal party. Our practice is committed to providing the best treatment for our patients. Our prices are representative of the usual and customary charges for our area.