



# Mid-America Orthopedics

Kansas City

## Patient Credit Policy (Effective March 2011)

As a patient in our office you should know that you are responsible for the payment of all medical treatment and related services provided by Mid-America Orthopedics KC.

### Patients with insurance coverage:

- **It is your responsibility to check with your insurance company prior to your first visit to determine if the Mid-America Orthopedics KC' physician or provider you're seeing is participating with your insurance plan.**
- HMO's such as Coventry, Aetna and some Medicaid policies and others require a referral. If your insurance plan requires you to have a referral from your primary physician, you are responsible for obtaining the referral. If you do not have an authorized referral, you will be required to sign a Waiver of Referral which documents that you understand that we will bill you for the services for which there is no referral.
- **If your insurance plan requires a co-pay for the office visit you will be expected to pay the co-pay amount at the time the services are provided.**
- If you are covered by health insurance, as a service, and out of consideration to you, this office will file insurance claims for all covered services. As appropriate, based on our contractual provision with your insurer, this office will accept your insurance company's maximum allowable reimbursement.
- You will be responsible for any deductible or co-insurance payment amount and for any non-covered services incurred at the time of service. Payment in full is due 30 days after payment from your insurance company is received.
- If you are unable to make payment in full, it is your responsibility to contact our billing office to set up arrangements for payment.

### Self-Pay Patients:

- As a self-pay patient you are required to make a payment before you see a medical provider. Understand that the payment made is a deposit only based upon the anticipated services to be provided. Understand that any charges not covered by the deposit are your responsibility to pay.
- If you are unable to make payment in full, the amount owed to Mid-America Orthopedics KC must be set up on a payment plan. **It is your responsibility to contact our billing office to set up arrangements for payment.**

### All Patients:

- **We may collect a No-Show charge of \$25 for any appointment scheduled that is not canceled or re-scheduled at least 12 hours prior to the time of the appointment. This charge is the responsibility of the patient. It must be paid prior to the patient receiving additional services**

You will receive statements and letters that notify you of the amount you owe, and indicate to you the need to communicate with our billing office. If at any time you have questions related to your account, call our billing office at 913-499-7532.

\_\_\_\_\_  
Patient/Guarantor Signature

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Date