



SURGERY CENTER

FINANCIAL POLICY

Thank you for choosing Truckee Surgery Center as your healthcare provider. The Surgery Center realizes that the cost of healthcare is a concern for our patients. We offer the following information to help you understand our financial policies and aid you in planning for payment. Your clear understanding of our policy is important to our professional relationship. Carefully review the following information and please feel free to ask if you have any questions about our fees, our policies or your responsibility.

SELF PAY POLICY: We do our best to provide the most accurate estimate ahead of time. Occasionally, charges exceed the pre-estimated amount. Payment for services is due IN FULL prior to, or at the time of service. Unless a payment plan has been arranged with the business office. Anything beyond the initial estimate will be billed to you after surgery. Payment is expected in full within 2 weeks of your surgery. We accept cash, check, Visa, MasterCard, Discover, and American Express for your convenience.

PATIENTS WITH WORKER’S COMPENSATION INSURANCE: It is your responsibility to provide our office with the appropriate information so that we can obtain prior authorization for your procedure. If your claim is denied by your work comp carrier, you will be responsible for the balance due.

PATIENTS WITH INSURANCE: It is your responsibility to ensure Truckee Surgery Center is a preferred provider with your insurance carrier as well as understand your policy and benefits. Co-payments are due at the time of service. Deductibles and co-insurance payments may be required at the time of service. As a courtesy, we will bill your insurance for services provided. You are responsible to pay any remaining balances in a timely manner. Unpaid accounts will be turned over to a collection agency after 90 days of no payments.

MEDICARE PATIENTS: Truckee Surgery Center will bill Medicare and secondary carriers on your behalf. You are responsible for payment of deductibles and co-insurance.

MINOR PATIENTS: An adult must accompany minor patients in order for treatment to be rendered. The parent/guardian is responsible for payment of any balance due.

ASSIGNMENT OF BENEFITS

I agree to assign any payment received by me for my insurance company(ies) for my procedure and/or anesthesia fees directly to Truckee Surgery Center or my anesthesiologist within two (2) business days of receipt of payment to me. I agree not to cash any check received by me from my insurance company(ies) for the costs of my procedure and/or anesthesia fees, even if made payable to me. Failure to comply with this agreement may expose me to civil and criminal liability. This assignment will remain in effect until revoked by me in writing. A photocopy of this assignment is to be considered as valid as an original. I understand I am financially responsible for all charges whether or not paid by insurance carrier. I hereby authorize said assignee to release all information necessary to secure payment.

Should my account(s) be referred to any attorney, licensed collection agency or Small Claims Court for collection, I understand that I will be responsible for payment in full of the outstanding amount.

I have read, understand, and agreed to the above Financial Policy Agreement for payment of facility fees and understand the patient or patient’s guardian is ultimately responsible for all professional fees.

Signature of Patient/Guardian

Date

Print Name

Relationship to Patient