Napa Valley Orthopaedic Medical Group Financial Policy

In today's financial climate, we understand that patients must be efficient with their money and that you, as a patient and consumer, have options in Napa's healthcare community. In order to keep your costs down, we are making a concerted effort to run as financially efficient of an office as we possibly can. In order to do this, we strictly abide by the following guidelines: ____1. Copayments are due at the time services are rendered. Residual balances after insurance processing must be paid in full prior to your next office visits or statement date, whichever is sooner. Once billed, any further statement activity will include a rebilling fee of \$10.00 per statement cycle. We highly recommend that you review your insurance booklet or request a benefit description for a specialist's office from your insurance company. This will provide you some basic information prior to your visit. If the patient is unable to pay at the time of service, the appointment may be rescheduled or the patient may opt to bring payment before the end of the business day. If this is not paid by that time, a \$40.00 billing charge will be applied. 2. FEES - Return Check Fees - \$35.00 Form Fees - \$25 each Missed Appointment - \$25.00 Medical Records - \$25.00 Additional Statements (after 1) - \$10.00 each X-ray Copy Fee - \$5.00 3. Should you default on your balance, NVOMG has the right to discharge you as a patient, not accept new diagnosis or collect \$125.00 collection fee prior to re-establishing you as a patient. 4. You will be responsible for promptly responding to your insurance company to provide any additional information they may request regarding your treatment, pre-existing conditions, accidents or prior medical coverage. Failure to respond in a timely manner may result in your account becoming due and payable, in full, immediately. ____5. SURGERY/FRACTURE CARE – We understand that surgeries and fractures are not usually calculated in a patient's regular budget; unfortunately, we are bound to our insurance contracts to collect copays, deductibles, and coinsurances. This is expected prior to surgery and our surgery scheduler will contact you to give you the estimated total. Again, this is only an estimate as to what your insurance will pay and what you will owe. Fractures may be considered surgery by your insurance company. They are technically closed treatments of broken bone instead of the traditional view of surgery, an open treatment of a fracture. To avoid confusion, "breaks" "fractures" and "cracks" are all classified as fractures and are coded the same by your physician and insurance company. 6. THIRD PARTY PAYORS/LETTERS OF PROTECTION – NVOMG does not take third party insurance or operate under letters of protection or liens. If you should still desire care at our facilities, we are able to classify this as a self-pay account and payment is due at the time of service in full. 7. WORKERS' COMPENSATION – Prior to scheduling your appointment we must have all medical records, claim number, authorization, adjustor name and contact information. Your medical records will be reviewed to determine if we are the appropriate physician group for your care. If you are unsure as to whether this is a work injury or not, please discuss this with your employer prior to scheduling an appointment. There is a \$50.00 transfer fee for each visit filed with insurance that needs to be converted to worker's compensation. _8. MINORS – Individuals under 18 will be rescheduled should they not have a parent's permission form signed and payment for that date of service. 9. MED/LEGAL – Separate policies and fees apply to med-legal consultations, trial testimony, depositions, etc. This policy is available upon request and must be reviewed in these circumstances. Signature: _____ Date: _____