

## FINANCIAL POLICIES

This outlines your financial responsibilities for treatments by Central Coast Orthopedic Medical Group.  
**All patients are ultimately responsible for payment for all services rendered, whether insured or uninsured.**

### Insured Patients



**Please bring a current State or Federal identification card with picture and current valid insurance card to provide proof of insurance.** Failure to provide us a copy of your identification and insurance cards may result in your being responsible for any charges incurred to be paid at the time of service. Please **bring your insurance card(s)** with you to **every appointment**. If your

insurance plan has changed since your last visit, please tell us. **If you are unable to provide** valid insurance information at the time of your visit, you will be expected to **reschedule or pay in full** at the time of service.

We participate in most **major and regional health plans** in our area, as well as **Medicare, Medi-Cal and Cen-Cal**, and will file claims with your insurance carrier(s). If you have secondary insurance, we will file a claim with them as soon as the primary carrier has paid.

**Prior Authorization –vs- Self-Referral: Cen-Cal, Medi-Cal, HMO, EPO** and some other insurance plans require **prior authorization** through your Primary Care Doctor before we can see you. Most other insurance plans allow you to self-refer, but you need to be aware of your own policy's requirements.

**Co-Pay:** If your insurance coverage indicates that a co-pay is due for your office visit (see your card), **you must pay it at the time that we treat you**. Our contracts with insurance carriers give us no choice in this.

**Your Portion of the Charges:** You will be responsible for your share of charges as defined by your policy **plus** any charges for treatments that your insurance carrier will not pay for. If we have not received payment from your insurance company within **90 days** of the date of service, you will be expected to pay the balance yourself.

**If Your Insurance Company Requests Information from You:** You must respond to any information requests from your insurance carrier or your claim(s) could be denied and you would be responsible for payment yourself.



**We accept Blue Shield's Covered California non-HMO plans.** We may treat all Blue Shield non-HMO patients, including their Covered California network patients. If you're one of their patients, **WELCOME!**

### Uninsured Patients / Out of Network Patients



If you **have no insurance**, or if **we are not in your insurance plan's network of doctors**, we can still treat you, but you will have to **pay at time of service**.

1. **Self-Pay patient.** *You'll pay the entire bill, with no involvement by an insurance company.* We have a discounted fee structure for this.
2. **Out of Network.** *You will pay the entire amount of your treatment on the day of service, then your insurance company will reimburse you directly.* If you choose this option, we will treat you as a Self-Pay patient.

### Workers Compensation

If you are **injured at work**, you must **contact your employer** and notify them of the injury **before we are allowed to treat you**. We can only schedule an appointment for your work injury **after we have authorization** from your

employer's insurance. We then bill their Worker's Compensation insurance carrier for your treatment, not yours. Warning: **if your employer later concludes** that the injury was **not work-related, you** (or your private insurance) will be **responsible** for paying the bill.

### Surgery: Pre-Pay Your Portion of Costs



**When you ask us to schedule you for elective surgery, we will talk to your surgeon to estimate** your portion of the planned surgery costs so you can **pay them prior to surgery**. The amount will be determined by your insurance plan terms and how much of your deductible you have already met.

*If you are unable to pay your portion prior to elective surgery, we will ask you to delay surgery until you can do so.*

### Paying Your Bill



After your insurance carrier(s) have paid their portion(s) we will send you a statement for your balance due. **Payment in full** is expected when you receive your statement.

If you are **unable to make payment in full**, please talk with our **Patient Financial Counselor** at **(805) 473-4949, extension 338**, to discuss options. In some cases, we can set up a **monthly payment plan** for you.

### Methods of Payment



You can pay **using cash, check, Visa, MasterCard, or Discover**. Payments can be made at the reception desk, by mailing a check, or over the phone at **(866) 616-2401**. If you are enrolled in a **monthly payment plan**, your credit or debit card will be automatically charged on the date you arranged with our patient financial counselor.

### Unpaid Balance



If you have not paid your balance or talked with us to set up an acceptable payment plan within **120 days**, we will transfer your account to an **outside collection agency**. In such a case we would ask you to find a different orthopedic surgeon for any future orthopedic problems.

### Refunds

If there is an overpayment on your account, we send you a **refund** check **within 2 weeks**.

### Other Facilities and Provider Fees

If you are having surgery, please be aware that your Central Coast Orthopedic Medical Group bill will cover only the Orthopedic Surgeon's charges. The **Hospital / Surgery Center** and **Anesthesiologist** will be sending you separate bills for their portions of your surgery.

**MORE QUESTIONS?** Talk with the Practice Manager at the office where you receive treatment.