



Oceanside Office
3905 Waring Road
Oceanside, CA 92056

Carlsbad Office
6121 Paseo Del Norte, Ste 200
Carlsbad, CA 92011

760-724-9000 / Fax: 760-724-3686 / www.orthonorthcountry.com

STATEMENT OF FINANCIAL POLICIES

It is the intent of Orthopaedic Specialists of North County (OSNC) to provide quality orthopaedic care in a cost effective manner. Therefore the following notice is necessary to ensure that all patients are informed of the financial policies of OSNC.

A financial counselor is available to help with questions concerning billing and statements. Call the Billing Office at 760-724-9000. Services of Orthopaedic Specialists of North County are available to all persons as long as they accept responsibility for payment.

GENERAL PAYMENT POLICIES

- FULL PAYMENT OR ACCURATE INSURANCE INFORMATION IS DUE AT THE TIME OF SERVICE.
- WE ACCEPT CASH, CHECKS OR CREDIT CARDS.
- THERE WILL BE A \$35.00 CHARGE FOR ALL CHECKS RETURNED AS "NSF" (NON-SUFFICIENT FUNDS).
- OSNC WILL BILL CONTRACTED AND MOST NONCONTRACTED INSURANCE COMPANIES.
- CASH PAY PATIENTS MUST PAY IN FULL AT THE TIME OF SERVICE OR PRIOR TO DATE OF PROCEDURE.
- PATIENTS ARE REQUIRED TO PRESENT A CURRENT INSURANCE CARD AND PICTURE ID AT EVERY VISIT; WITHOUT AN INSURANCE CARD YOU WILL BE REQUIRED TO PAY AT THE TIME OF SERVICE.
- CO-PAYMENTS ARE DUE AT THE TIME OF SERVICE. A \$25.00 CHARGE WILL BE ADDED TO ANY STATEMENT SENT TO A PATIENT FOR CO-PAYMENT.
- **A 24 HOUR NOTICE OF CANCELLATION OF APPOINTMENT IS REQUIRED; FAILURE TO PROVIDE THIS NOTICE WILL RESULT IN A CHARGE OF \$50.00.**
- OSNC WILL BILL SECONDARY INSURANCES FOR MEDICARE PATIENTS ONLY.

Payment of bills is expected upon receipt of our statement. Accounts become past due after thirty (30) days unless alternative arrangements have been previously made through the billing office.

Patients with poor credit history must pay for their services on the date of service. Further credit may not be extended to patients until their account is current. Delinquent accounts are subject to collection at any time including at time of service.

A current Medi-Cal card is required for Medi-Cal billing and must be presented at each visit.

Contract Medicine Payment Policies

Patients are expected to pay any required co-payments at time of service. For medical services covered by their contract, no additional payments are required. However, patients will be required to pay for "non-covered" supplies, equipment and services.

Medicare

OSNC does accept Medicare assignment. All patients without a secondary insurance will be responsible to pay the remaining balance after Medicare payment. All patients are responsible to pay "non-covered" services. Patients may be required to sign an ABN.

Insurance Billing Information

Your insurance policy is a contract between you and your insurance company. If your insurance company has not paid your account in full within sixty (60) days the balance may be automatically transferred to your responsibility for payment upon receipt of statement. It is the patient's responsibility to provide current insurance information to the practice.

Usual and Customary Rates

Our practice is committed to providing the best treatment for our patients, and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.

Minor Patients

The adult accompanying a minor and the parents (or guardians of a minor) are responsible for full payment. For unaccompanied minors, non-emergency treatment will be denied unless authorization from guardian is provided in writing.

Signature: _____ Date: _____

Print Name: _____