# NEUROSURGICAL CONSULTANTS, INC.

#### www.neurosurgical-consult.com

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## **Patient Financial Responsibility Policy**

Neurosurgical Consultants, Inc. (NCI) is committed to excellence in patient care and surgical treatment. To maintain this commitment, we must work with our patients' insurance carriers and must comply with their requirements. The following policy is provided to help patients understand their financial responsibilities, most of which are <u>required</u> by insurance carriers. If you have any other questions about your responsibilities, please let us know.

#### How may I pay my bill?

NCI accepts cash, checks\*, Visa and MasterCard.

#### **Do I need a Referral?**

Yes -- if you have an HMO or PPO plan with which NCI is contracted, you will need a referral and authorization number from your primary care physician. If the referral and authorization number are not available at the time of your appointment, you will have the option of paying for your visit or rescheduling.

### What is my Financial Responsibility?

Your financial responsibility depends on a variety of issues, summarized below:

If you have	You are Responsible for	We will
a HMO or PPO with which NCI contracts and the services you receive are covered by your plan:	obtaining a referral and authorization number before the service is rendered. You are also responsible for all applicable co-pays and deductibles at the time of your office visit.	file an insurance claim with your insurance carrier on your behalf, if referral and authorization number are provided. give you the option of paying for your visit or rescheduling your visit, if you do not have the required information.
a HMO or PPO with which NCI contracts and the services you receive are <u>not</u> covered by your plan:	payment for the service at the time the service is rendered.	file an insurance claim with your insurance carrier on your behalf. You should <b>not</b> expect reimbursement.
a HMO or PPO with which NCI is not contracted:	obtaining an out of plan referral and an authorization number <u>before</u> the service is rendered.	file an insurance claim with your insurance carrier on your behalf, if referral and authorization number are provided. or give you the option of paying for your visit or rescheduling your visit, if you do not have the required information.

If you have	You are Responsible for	We will
Commercial Insurance, also known as regular insurance, indemnity coverage, and 80 / 20 plans:	the patient's responsibilities as required by your insurance plan. If surgery is planned, you may be asked to pay the patient's responsibilities as required by your insurance plan in advance of the scheduled procedure.	call your insurance carrier to determine your responsibility and file an insurance claim with your insurance carrier on your behalf.
Motor Vehicle Insurance:	your visit fees which must be paid before seeing the physician. Please note: bills are not forwarded to attorneys for payment. You may forward your receipted bill to your attorney for reimbursement.	provide you with a detailed bill regarding your visit.
Motor Vehicle Insurance <b>and</b> Health Insurance:	providing your motor vehicle insurance information and your health care insurance information. If available, you must also provide an "exhausted PIP (Personal Injury Insurance) Letter" from your motor vehicle insurance company. If your health insurance typically requires "referrals" for specialty care, you are also responsible for providing a referral and authorization number from your primary care physician before your visit.	file an insurance claim with your motor vehicle insurance carrier and/or with your health insurance carrier on your behalf, if referral and authorization number are provided. or give you the option of paying for your visit or rescheduling your visit, if you do not have the required information.
Worker's Compensation:	providing a written claim number, date of injury, and written authorization from your worker's compensation insurance carrier indicating that you have a verified claim.	file an insurance claim with your worker's compensation insurance carrier on your behalf, if claim number, date of injury, and written authorization are provided. or give you the option of paying for your visit or rescheduling your visit, if you do not have the required information.
No Insurance:	payment in full for your visit before the service is rendered.	

\*Returned Check Policy: There will be a \$ 25.00 charge for a check that is returned for insufficient funds.