

# **Founders Surgery Center**

## **Financial Policy**

Founders Surgery Center collects any copayments, unmet deductibles, and co-insurance amounts the day of the procedure. If you cannot pay for services, then you may be referred back to your primary care physician or surgeon's office so they may reschedule your procedure for a later date with us when you are able to pay OR schedule you at an alternative facility.

**PAYMENTS:** The balance on your statement is due and payable when the statement is issued, and is considered past due if not paid within 30 days of receipt.

**AUTOMATIC CONTRACTS:** We shall have the right to cancel your privilege to utilize our automatic payment through a contract at any time. Future visits would then need to be paid in full at the time of service.

**COLLECTIONS:** If your delinquent account is sent to collections you may be charged a 15% collection fee. Failure to communicate with your insurance company could result in these charges being added to your account despite an insurance payment. If your account is sent to collections, you cannot be seen until your account is paid off.

**CONTRACTED INSURANCE:** If we are contracted with your insurance company, we must follow our contract and their requirements. If you have a copay or deductible, you must pay that at the time of service. It is the insurance company that makes the final determination of your eligibility. If your insurance company requires a referral and/or preauthorization, you are responsible for obtaining it. Failure to obtain the referral and/or preauthorization may result in a lower payment from the insurance company..

**NON-CONTRACTED INSURANCE:** Insurance is a contract between you and your insurance company. We are NOT a party to this contract, in most cases. We will bill your primary insurance company as a courtesy to you. Although we may estimate what your insurance may pay, it is the insurance company that makes the final determination of your eligibility. You agree to pay any portion of the charges not covered by insurance. If your insurance company requires a referral and/or preauthorization, you are responsible for obtaining it. Failure to obtain the referral and/or preauthorization may result in a lower payment from the insurance company..

**WORKMANS COMP:** We require written approval/authorization by your employer and/or worker's compensation carrier PRIOR to your initial visit. If your claim is denied, you will be responsible for payment in full..

Please note that insurance amounts collected are an estimate; your total financial obligation will be determined by your insurance company and will appear on the explanation of benefits. If our estimated amount is less we will bill you the difference. If our estimated amount is more, we will refund you the difference.

We encourage you to also contact your surgeon, anesthesia group and your insurance company if you have any questions about your financial obligations. In addition, please make sure your authorization/pre-certification for your surgery is on file prior to the surgery.

If you do not have insurance, you are responsible for the surgeon, facility, and anesthesia fees. You will need to arrange payment with each entity separately. The Surgery Center cannot accept payment on behalf of another entity..

It is your responsibility to find out if we are a provider for your insurance company. We will file your insurance claim form for you as a courtesy. If a problem occurs with your claim you will be asked to contact your insurance company to help resolve the problem. You will also be expected to make monthly payments until the problem is resolved.

You may receive a bill from the following entities:

- Founders Surgery Center
- Anesthesia
- Pathology and Lab
- Physician/Surgeon's office



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