Financial Policy

9828 E. Shannon Woods Cir. #100
Wichita, KS 67226
(316) 631-1600
www.aoaortho.com
Billing Dept: (316) 631-1699

Financial Responsibility: Payment is due at time of service. We accept cash, checks, debit cards, and all major credit cards. We accept Blue Cross, Medicare, Work Comp, most HMO's and PPO's and many insurance networks. We do not accept Out-of- State or Federal work comp. Out-of-network insurances may result in higher out-of-pocket costs for you. If you have an unmet high deductible, payment is due at time of service. Please pay any co-pays at time of service. Your bill might include office visits, xrays,surgeon fees, assistant surgeon fees (PA, APRN, etc), orthotics, casting, or other charges. We are willing to make short-term payment arrangements. Accounts should be fully paid within 1 year. Failure to honor your payment arrangement makes your balance immediately due in full. We have the right to file a lien on your account. You are responsible for collection costs including check fees, collection agency fees, attorney fees and court costs. Record copying, legal, and other special services have a separate fee schedule and require prepayment. Form preparation is $35 per form.

Frequently Asked Questions (FAQS):

How May I Pay? We accept cash, checks, bank debit cards, and all major credit cards. You may mail payment, pay at your appointment, put a credit card on file, or pay on-line using the link on our website https://aoaortho.ema.md/ema/pay/onlinepayments#/pm/payfac/pay

What Should I Bring To My Office Visit? Please bring your insurance card and a form of ID to your office visits. You should check your insurance for co-pay, authorization, referral or other requirements. If you were injured at work, you will need prior authorization from your employer for a work comp claim to be filed. Referrals and authorizations may be faxed to (316) 631-1617. We may contact you via email, phone or text message to obtain photo IDs and copies of your insurance card.

Do I Need a Referral? HMO's and some plans require a referral authorization from your primary care physician. If we have not received your referral, please call your primary physician to obtain it. If you are unable to obtain the referral at the time of your visit, please reschedule the appointment or sign a waiver and personally pay for the visit.

What Insurances Do You Accept? We accept Blue Cross, Medicare, Workers Compensation, and many other insurance networks. Please speak with your insurance if you are not sure. If we are not in your insurance network, you may have higher out-of pocket costs.

What about Co-Pays and Deductibles? Co-pays must be paid at time of service or your visit will be rescheduled. If you have a High Deductible Health Plan (HDHP) and you have not met your deductible, payment is due at your visit (estimated at $150 for new patients and $75 for established patients). Payment is a deposit toward services and is not guaranteed to cover the full out of pocket expense. For surgery visits payment is due at the time of scheduling. If we estimate your payment due, any remaining balance will be billed or overpayment refunded.

What is My Financial Responsibility for Services? Your bill might include office visits, x-rays, surgeon fees, assistant surgeon fees (physician assistant), DME, orthotics, casting, or other charges. Your financial responsibility depends on a variety of factors, including what type of insurance you have. We are willing to make payment arrangements. Failure to honor your payment arrangement will make your balance immediately due in full. Returned checks may be subject to additional fees. Payment is due even if you are in a personal litigation claim. Legal and other special services have a separate fee schedule. All forms prepared at your request are $35 per form.

How is My Insurance Filed? We file your insurance based on the information you give us. Please give us full and accurate information. The best way to maximize your insurance benefit is to stay involved. Please call your insurance company if your bill is not paid promptly. By Kansas law, insurance claims should be paid within 30 days (KSA 40-2442). Failure to follow-up or respond to your insurance company requests for additional information will result in the balance becoming your responsibility.

What if My Child Needs to See the Physician? A parent or legal guardian must accompany patients who are minors on the patient's first visit. This accompanying adult is responsible for payment on the account.

What if I Don't Have Any Insurance? Payment is due at time of service. We work with Health Me to accept direct payment for services. When using Health Me, AOA cannot file claims to insurance. You are responsible for payment in full for the package necessary. Packages typically include consultation, care plan and x-rays. https://www.aoaortho.com/direct-pay/

What if I need help understanding my AOA bill? We are here to help! Our billing staff is happy to meet with you at the end of your appointment. You may also call our billing office at 316-631-1699.

MRN: _____

Patient Name: _____

Patient Signature: _____

Parent/Guardian Signature: _____

Current Date: _____

ADVANCED ORTHOPAEDIC ASSOCIATES, P.A.

MAIN - EAST OFFICE
9828 E. SHANNON WOODS, SUITE 100
WICHITA, KANSAS 67226

WEST OFFICE
14700 W. ST. TERESA, SUITE 130
WICHITA, KANSAS 67235

PHONE: (316) 631-1600
FAX: (316) 631-1617

WWW.AOAORTHO.COM

AOA No Show & Late Cancellation Policy

Definition of a No Show:
A "No Show" is defined as missing an appointment without prior notice OR canceling/rescheduling with less than 24 business hours' notice.

- **No Show Fee:** $50 will be charged for missed appointments or cancellations with less than 24 business hours' notice. For an MRI, the fee is $100.
- Surgery canceled with less than 48 hours notice will incur a $200 fee
- This fee will not be billed to insurance and is not reimbursable by insurance.
- Kansas Workers' Compensation and Medicaid patients will not be charged in accordance with payer rules.

Enforcement
Patients with 2 or more No Shows within a 12-month period may be subject to discharge from the practice or required to prepay for future visits, depending on provider discretion.
This policy may vary by provider and will be communicated to the patient as needed.

Exceptions May Be Made For:

- Inclement weather
- Illness or medical emergencies
- Hospitalization
- Other circumstances at the provider's discretion

All exception decisions will be made by the provider and must be documented.

Card on File & Payment Plans

- AOA can accept card on file. Please see a billing specialist here at AOA to set this up on your account.

For billing related questions please contact our billing department at 316-631-1699 or visit us on-line at https://www.aoaortho.com/

X: **Date:** _____

_____
Signature of Patient or Guardian