



Notification of Office Policies and Procedures

Reading the following policies and procedures annually will keep you informed about our office:

Benefits: Arya Foot & Ankle will reiterate the benefits that were disclosed to us by your insurance plan. We will then collect based on the benefit level all applicable copays, deductibles, coinsurances, and balances that apply at the time of service or at the pre-operative appointment. To improve accuracy, we update patient records annually.

Payment: Arya Foot & Ankle accepts VISA, MasterCard, cash, or checks. All checks are immediately scanned for processing. Our office does not accept temporary checks, and we will contact the bank directly to verify checks over \$500.

Other Liability Claims: These types of claims are to be paid in full by the patient.

Non-Covered Services: Arya Foot & Ankle will not submit claims for non-covered items including but not limited to cosmetic services and over-the-counter convenience items (OTC, e.g., Biofreeze, Coban, Inserts, Mycomist, etc.).

Referrals: Arya Foot & Ankle may refer patients to other providers, facilities, and labs. Arya Foot & Ankle is not responsible for these entities. The patient should contact these non-Arya Foot & Ankle providers, facilities, or labs directly regarding any billing questions. The policyholder is also responsible for all insurance authorizations or managed care referrals necessary for payment to Arya Foot & Ankle. Compliance with providers, facilities, and other treatments impact patient outcomes.

Missed Appointments: A \$50 charge will apply for appointments broken or canceled with less than 24 hours advanced notice.

Delinquent Accounts: Past due accounts are subject to collection proceedings and are reported. All collection fees, attorney fees, and court fees shall become the guarantor's responsibility in addition to the balance due the office.

Returned Checks: A \$50.00 fee will be assessed on all returned checks. Any NSF or Closed Account will result in future services on a pre-pay cash or credit basis. The District Attorney's Office will prosecute unresolved checks.

Returns: Only unworn and non-custom items are returnable within 14 days of receipt, if there are no visible signs of wear, tear, or odor. Custom items are tailored to meet individual needs; custom items are non-returnable, non-refundable.

Medical Records: The cost for copied medical records and completion of disability forms will be charged to the patient and collected prior to replicating.

The undersigned certifies that he/she has read and understands these statements and is either the patient or is duly authorized by the patient as the patient's general agent to execute the above and accepts its terms.

Financial Acknowledgment and Agreement

Self-Pay Patients: If you have no insurance coverage, full payment is expected at the time of service. Please contact an office team member for fees.

Commercial Insurance: Arya Foot & Ankle will file your claim to your insurance company; however, at the time of service you will be responsible for all fees that are not covered by your insurance, including co-pays, co-insurance, deductibles and non-covered services or items received. The co-pay CANNOT be waived by our practice, as it is a requirement placed on us by your insurance carrier. We strive to be as accurate as possible in calculating your responsibility but, with so many variations in policies and fee schedules, we are not always exact. You may receive a statement from our office for any balance due. For your convenience, we accept cash, checks, and most major credit cards.

Knowing and understanding your insurance benefits is your responsibility.

If you have any “Out of Network Benefits” with a plan we are not contracted with, we will bill your insurance as a courtesy. Any patient responsibility will be billed to the guarantor on file. Please contact your insurance company with any questions you may have regarding your coverage. I also authorize the release of any medical records or other information necessary to process a claim. To submit a claim to your insurance carrier, there must be complete patient and insurance information on file. It is your responsibility to notify Arya Foot and Ankle Institute if there is a change to your insurance coverage, residence or phone number.

ASSIGNMENT OF BENEFITS:

I authorize payment of medical benefits to Arya Foot & Ankle. I also authorize the release of any medical or other information necessary to process a claim. To submit a claim to your insurance carrier, there must be complete patient and insurance information on file.

HIPAA Acknowledgment

All new patients are presented with a copy of our Notice of Privacy Practices, a copy of which is being made available to you. If you have additional questions and would like additional information, you may contact us at (602)309-8788. If you believe your privacy has been violated, you can file a complaint with Patient Complaints Department at (800) 574-4196 or with the Officer of Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the Patient Complaints Department of the Office of Civil Rights. Arya Foot & Ankle Notice of Privacy Policies provide information about how we may use and disclose protected health information. You have the right to review our Notice before signing this consent. The terms of our Notice may change, and you may obtain a revised copy by contacting our office. By signing this acknowledgment, I understand and agree the contents of the notice.

Patient or Legal Authorized Representative:

Print Name: _____ Relationship: _____

Signature: _____ Date: _____