

FAQ's

What if I need surgery?

Our patient financial counselor will work with you to provide information to best estimate your costs. We will request a pre-surgical deposit based on your co-insurance amount and/or unmet deductibles. The total cost of your surgery will involve multiple parties which will result in financial responsibilities that will not be inclusive of our services or estimates. These parties may include but are not limited to, hospital/facility services, anesthesiology, labs, durable medical equipment and imaging. A cost estimate which shows you your financial responsibility will be explained to you by the financial counselor and given to you for your records.

What if I've been involved in an accident?

Our office does not participate in third-party billing. If you are insured by a contracted health plan, we will bill your carrier. In the event your carrier denies your claim, you will be responsible for payment to our office. If you are not insured by one of our contracted health plans, you will be considered self-pay. Please refer to our self-pay policies for further information.

What if I accidentally bounce a check?

Returned checks and unpaid balances will be subject to a collection fee of \$20.00. This amount will be added to your statement.

Can I pay my bill on-line?

As a convenience to you, we offer our patients a secure way of viewing your account balance and making payments through our patient portal. You may also use your portal to view past and future appointments, request new appointments, reschedule your appointment and exchange secure messages with your doctor's office. To access this information, please see us at [www.tsaog.com](http://www.tsaog.com).

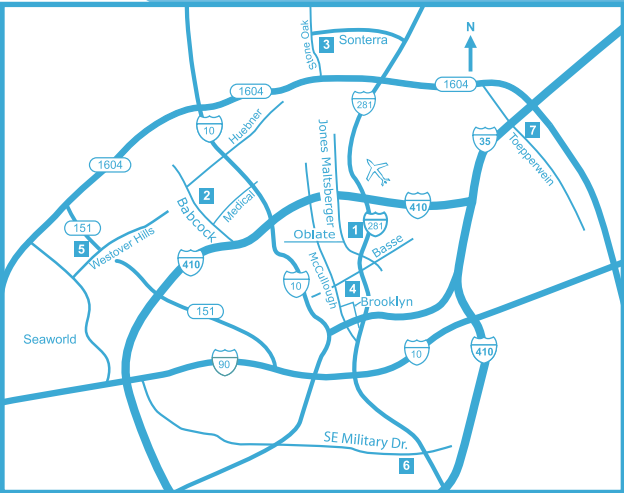
Can I keep a credit card on file to cover my patient responsibility?

Many employers now offer flexible spending accounts and health care savings accounts where a patient can use these special accounts to pay for medical expenses. For these accounts or any other traditional credit card service, you may keep your card securely on file with our office to eliminate the hassle of receiving and handling statements from our office.

You set the maximum amount to be charged to this account and an effective period for authorization to use this card. You will receive a receipt for any charge amount to your card once the transaction has been executed. You may cancel this agreement at any time by contacting our office.



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ORTHOPAEDIC GROUP®  
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- 1 CENTRAL**  
The Orthopaedic Institute  
400 Concord Plaza Dr., Ste. 300  
San Antonio, TX 78216

**2 MEDICAL CENTER**  
CHRISTUS Santa Rosa  
N.W. Tower I  
2829 Babcock Rd., Ste. 700  
San Antonio, TX 78229

**3 NORTH CENTRAL**  
Stoneterra Medical Building  
150 Sonterra Blvd., Ste. 300  
San Antonio, TX 78258

**4 DOWNTOWN**  
Metropolitan Methodist Plaza  
1200 Brooklyn Ave., Ste. 320  
San Antonio, TX 78212

**5 NORTHWEST**  
Westover Hills Medical Plaza I  
11212 State Hwy. 151,  
Ste. 150  
San Antonio, TX 78251

**6 SOUTHEAST**  
Mission Trail Medical Plaza  
3327 Research Plaza, Ste 404  
San Antonio, TX 78235

**7 NORTHEAST**  
Toepperwein Medical Center  
12602 Toepperwein Rd, Ste 210  
San Antonio, TX 78233

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**URGENT Orthopaedic Care**  
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for more information about  
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**[www.tsaog.com](http://www.tsaog.com)**

Understanding  
Our Financial  
Policies



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# FINANCIAL POLICIES

We understand that changing conditions in the economy and health insurance industry have made the cost of healthcare difficult for individuals and families. Our fee schedule has been developed to be consistent with usual and customary charges in the community. The following information is being provided to help you better understand TSAOG's financial policies, your responsibility, and how we can assist you with this process.

## Your Financial Responsibility

Our office will file insurance claims on your behalf. This service does not release you from any responsibility for the charges on your account. Your insurance contract is between you and your insurance company.

Co-payment is expected at the time of your visit. Your payment amount, along with other necessary insurance information is usually found on your insurance card. Please bring your insurance card with you. Payment can be made by cash, credit card or check. We accept all major credit cards.



## Definitions

**Co-Payment:** This is a fixed amount paid by you at the time of service. Your co-payment is usually listed on your insurance card. This amount is never covered by your insurance company. It is the expectation of your insurance company that this amount will be collected by the provider.

**Deductible:** This is a specific amount that you must pay, after your co-payment, before your health insurance will pay any of the amount submitted. There is normally a deductible for each family member insured under your policy, with a maximum family deductible each year.

**Coinurance:** This aspect of your insurance will take effect after the co-payment has been paid and the deductible has been met. Your insurance will split the amount due, usually 80-20, with you. In an 80-20 split, your insurance pays 80% of the bill and you pay 20%. There is usually an out-of-pocket limit for coinsurance. Once you have reached your out-of-pocket maximum, your insurance will cover 100% of the costs thereafter until your new plan year begins.

**Self-pay:** If you do not carry health insurance, you will be responsible for full payment of your bill. A deposit will be required prior to the office visit. See our self pay guidelines for further details.

### Responsible Party (Guarantor)

You will be asked to identify one person who is responsible for the financial communications on your account. This person is known as the responsible party or guarantor. In most cases, the guarantor is the patient and will be identified as such unless the patient is a minor. Please note that a divorce decree or other financial arrangement between two parties does not determine who TSAOG bills for services. We bill the appropriate insurance, but will look to the guarantor for any balances remaining.

## Referrals/Authorizations

Our referral specialists are available to help you with referrals made to and by our providers for specialized services. Please note that the referral process normally takes a minimum of 3-5 business days. When a referral is ordered by one of our providers, our referral specialist will contact your insurance company and request authorization. For emergency referrals, most insurance companies respond within 24 hours.

If we have not received an authorization prior to your scheduled appointment, you may be rescheduled until the authorization has been received. Our referral specialist may be contacted at 210-804-5600.

## Self Pay Guidelines

Patients will receive a 30% discount off their bill if they make full payment at the time of service for office visits, imaging services, therapy services, durable medical equipment and 50% off for surgical procedures.

If you are unable to pay your bill in full at the time of service you will be assigned to a patient financial counselor. This member of our team will assist you in establishing payment arrangements according to our office policy and procedures. We will allow you to pay your bill in monthly interest free installments, which once established, will be documented in your account.

## Financial Hardships/ Charity Care

We recognize there are occasions when the patient is not financially able to pay for his/her medical care and is not eligible for federal or state medical assistance programs. TSAOG has established guidelines in which a patient may apply for charity care assistance in certain circumstances. For additional information, see your patient financial counselor.

## Collection Policies

Our collection policies are fair but firm. We will never deny access to necessary medical services for our patients due to non-payment issues; however, patients may be discharged from the practice due to non-payment for medical services received. If a patient is discharged from the practice for financial reasons (including bankruptcy), we will give 30 days notice and provide emergency care during the notification process. These accounts may be turned over to an outside collection agency.

We understand that financial problems may affect timely payment; we encourage you to communicate any such problems with us, so that we may assist you in keeping your account in good standing. If you have any questions, please call our confidential financial counseling line at 210-396-5369.

**Your health & wellness is our first concern.**

