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Patient Credit and Collection Policy

It is the policy of Neurology Indiana, LLC, to provide the finest quality of medical care available. In an effort to make our services available to as many patients as possible on an affordable basis, Neurology Indian, employs a firm payment policy. This enables us to provide the highest level of care, and be sensitive to cost containment. In an effort to be fair to all patients, Neurology Indiana has adopted the collection policy outlined below. Please read the policy to learn how the services from Neurology Indiana will be provided to you in an affordable way.

NEW PATIENTS

New patients should arrive one-half hour before their scheduled appointment time to complete the patient information sheet, if you have not already done so. Please bring insurance coverage information including insurance card and type of coverage. New patients with insurance coverage are expected to pay deductibles, coinsurance or co-payments or any balance not covered by insurance at the time service is rendered. For your convenience, Neurology Indiana also accepts Mastercard, VISA and Discover cards.

ESTABLISHED PATIENTS

Please bring insurance coverage information with you each visit. New and established patients are always welcome to pay for services performed or to charge services to their Mastercard, VISA or Discover card.

Patients who have large bills from Neurology Indiana as a result of extended care of hospitalization and who are unable to make full payment as a result of financial difficulties should contact our patient account representatives. It is the policy of this office to help work out payment terms to patients in financial need, but we can only do so if the patient account representatives are contacted to make payment arrangements, and financial need is proven.

INSURANCE

The Neurology Indiana physicians participate in a variety of insurance plans. It is the patient's responsibility to know the terms or their own plan. Neurology Indiana will abide by signed insurance contracts as a participating provider. Patients covered under "participating" plans will be responsible for deductible and co-payments in accordance with their specific contracts. For non-participating insurance plans, we will complete necessary insurance forms and mail as a courtesy to you. Please call your insurance company if you have questions about your coverage.

It is also very important to advise us of your insurances carrier's pre-authorization requirements regarding hospital admission, diagnostic, laboratory or other outpatient testing. We need to be aware of any specific requirements regarding where procedures can be performed according to your insurance carrier's plan. You are responsible for insuring that proper authorization is obtained prior to services being rendered on either an inpatient or outpatient basis.

We understand that questions may arise regarding your account and these should be discussed with our patient accountant representatives. We will be happy to help you receive maximum benefits, however the arrangement of the insurance company to pay for medical care is between you and the insurance company.

COLLECTIONS

Should it be necessary to turn your account over for collection, you will be held responsible for any additional collection fees up to 30% and court costs up to \$250.00, or attorney fees.

LITIGATION

Our services are provided in good faith. Our bill is between you and your doctor. For circumstances where you are required to hire an attorney for compensation, we do not accept "letters of protection" from your attorney. We would expect payment in full for services or you would need to contact our account representatives to work out payment terms. WE WILL FILE YOUR HEALTH INSURANCE FORMS AS A COURTESY. WE IN NO WAY BECOME INVOLVED IN THIRD PARTY LIABILITY.

CHARGES FOR FORMS

Neurology Indiana charges as follows for the completion of disability forms, (except employment related forms), and duplicating medical records for patients. Our charges for these services will be payable when the request is made, payment is required before the forms will be returned. The charges for these services will be as follows: Disability Form - \$10.00, Copies of medical records - \$15.00 retrieval fee plus 25 cents for every page in excess of ten pages.

MISSED APPOINTMENTS

We reserve the right to charge patients and discharge them from the practice if missed appointments are not canceled 24 hours before the scheduled visit. These charges will be your responsibility and billed directly to you. Please help us to serve you better by keeping your regularly scheduled appointment.

SUMMARY

If you have any questions regarding our collection policies, please contact our patient account representatives to discuss them. Our representatives are familiar with most of the major insurance carriers and may be able to answer questions regarding your coverage or direct you to people who can do so. Things don't always go as planned. If a problem comes up that you don't anticipate and you are unable to pay your bill, please contact our office. This will let us know that you are receiving your bill and are not making efforts to avoid payment. Thank you for being cooperative in our collection policy and thank you for selecting Neurology Indiana as your provider of health care services.

Signature of patient or responsible party

Date