

## ***Shannon DeShazo, M.D.***

Diplomate, American Board of Family Medicine

5236 W. University Dr. #3200

McKinney, TX 75071

Office: 972-548-1717

Fax: 972-548-9190

### **Billing Practices**

This is a professional office that renders quality care to patients. Our duty is to preserve the dignity and confidentiality of our patients while receiving appropriate payment for the medical care we have provided. The following details this practice's policies and procedures regarding patient billing. For additional information on claims filing, see *Insurance Filing and Follow-Up* policy and procedure. This policy is intended to comply with the provisions of Texas Occupations Code Chapter 101.

### **Policies**

#### **Office Visit**

- Payment is expected at the time of service unless arrangements have been made prior to treatment.
- The office will file insurance claims for services rendered, but patients are not relieved of responsibility for payment because they have insurance unless a contract prohibits billing the patient, such as a contract between this practice and a HMO.
- Patients must pay copays or deductibles before surgical procedures are performed and at the time that office services are rendered, absent an insurance carrier contract provision to the contrary.
- Most HMO and PPO patients have copayments, deductibles, or coinsurance. Our practice is obligated to provide medically necessary services to patients as required by the standard of care set by the profession and contracts with insurance carriers. We also must be mindful that in many cases, we cannot bill the patient for amounts left unpaid by carriers when we have a contract with the patient's insurance carrier. This practice keeps its agreements and will not bill or charge patients when our contracts do not permit it.
- Complaints related to billed charges shall be directed to the billing compliance officer for resolution.

#### **When Patients Are Billed**

- This office will honor any request a patient makes to use an alternative billing address, but any patient making such a request must provide a suitable alternative for billing purposes. See *Accommodating Reasonable Requests for Confidential Communications* policy and procedure.

- After we receive payment from the insurance company, this office will reconcile the explanation of payment, then bill the patient for the unpaid amount unless a contract with an insurance carrier prohibits it.
- Any claim denied due to patient ineligibility will be billed directly to the patient.
- Patients will be billed (when an insurance carrier contract does not prevent billing) when a claim is denied due to benefit limits, services are not covered, or when there is still a patient responsibility balance on the account.

### **Mailing Statements**

- Statements will be mailed every 30 days and should be:
  - Consistent
  - Without abbreviations,
  - Professional in appearance,
  - An accurate reflection of all charges and payments, and
- Send patients a statement of their bill no more than 30 days after the date of service.
- Send the second statement 60 days after the date of service.

### **Past Due Accounts**

- If the patient has not settled his or her account by the 75th day following the date of service, call the patient to request payment. Document patient comments for the practice's billing records.
- The third statement should go out 90 days after the date of service.
- If a patient does not make payment by the 110th day, send a letter to the patient stating that unless payment is received in 10 days, the practice will turn the account over to an outside collection agency. Consult the treating physician prior to this statement.
- At 120 days, initiate termination of the patient relationship.
- This practice DOES NOT charge interest for amounts past due and left unpaid by a third-party payor.
- The medical profession has a code of ethics. The ethics of Texas Medical Association require that if the practice chooses to charge interest, patients must be notified in advance of the interest by such means as posting a notice in the waiting room, the distribution of leaflets or a notation on the billing statement. This practice shall adhere to those ethics.
- A notice informing patients that the policies on billing practices and charity care (See *Charity Care*) are available shall be posted in the waiting area and in any registration, admission, or business office in which patients are reasonably expected to seek service.