

WELCOME TO  
**Washington Hand Surgery**  
A division of  
Proliance Surgeons, Inc.  
In Partnership With  
Evergreen Orthopedic Surgery Center  
Eastside MRI, Evergreen Orthopedic PT  
Overlake Surgery Center

We hope you will understand that our credit and collection policies are necessary to retain financial resources and maintain **EXCELLENCE** in health care for our patients and community.

**Financial Policy**

We are pleased to offer our patients billing services, however, please know that it is your responsibility to contact your insurance company to determine what your actual benefits will be if seen by one of our providers.

For billing purposes we need you to provide **ALL** information necessary to do so at your initial visit. This includes: **Guarantor's name, date of birth, social security number, group number, and complete name and billing address of your insurance company.** Any Co-Pays are due prior to each visit. Many Insurance companies are now **requiring referrals** from your primary care physician to specialists in order for you to receive benefits. We must have referrals in our office on or prior to your initial visit. Without complete insurance information and/or the necessary referrals, payment in full is due at the time of your visit. Any deductible or balances owed from you are due within 30 days of your insurance company receiving the claim. After a balance is carried for 30 days there is a monthly late fee of \$10.25 that is applied.

All NSF checks will be subject to a \$40 processing fee.

At times, despite our efforts, insurance companies refuse to pay claims. **In the event of an insurance claim rejection or denial, the responsibility for payment of fees is the direct obligation of the patient. Third party claim and those involving attorneys negotiating settlements will be expected to pay at the time of service.**

**SIGNATURE** \_\_\_\_\_ **Date** \_\_\_\_\_