

Perry Kalis M.D., Inc.
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Internal Medicine

Fellow American College of Physicians

FINANCIAL POLICY

Dear Patient:

Welcome to the medical practice of Perry Kalis, M.D. The following is a narrative of our financial policy. Although, the responsibility for payment of bills rests with you, the patient, we are anxious to work with you to clarify any question or concerns that might arise, and to make payment arrangements which are agreeable to both of us.

1. Because statements and billing costs have become so expensive, and because we do our best to keep medical costs down, we ask that you pay your co-pay or deductible for office visits and treatments at the time of service. If payment in full is not possible please request to speak to a billing clerk who will set up a monthly payment plan for you.
2. Our practice accepts Visa, and MasterCard.
3. Dr. Kalis participates with Medicare. Our practice electronically transmits claims to Medicare and payment is made directly to your physician. You will receive an explanation of benefits (EOMB) from Medicare which explains your portion of the charges. Some Medicare claims cross over automatically to your secondary insurance company. Prior arrangement by the patient may be required to activate this automatic crossover. This will depend on which secondary carrier you contract with.
4. We accept Medicaid and Worker's Compensation cases by referral only. We are responsible for submitting claims to these agencies.
5. **We do not accept Cigna HMO, Cigna Open Access, Aetna HMO, Humana choice care .**
6. Dr. Kalis' Office transmits electronic claims to several insurance carriers. If yours is a company which we cannot submit electronic claims to, we mail the primary insurer form (HCFA 1500) directly to your insurance company if proper billing information is available. If you have not provided us with appropriate billing information then you will receive the HCFA 1500 form and will be responsible for making certain that it is forwarded to your insurance company. Insurance companies take as long 60-90 days to process claims. We require monthly payments on any unpaid balances. If an insurance payment is made directly to you, it is your responsibility to immediately forward this money to your physician unless there is a zero balance on the date of service being paid for. If you have a secondary insurance, we will bill it for you as a courtesy.

In the event of an overpayment, a refund will be made to you by our bookkeeping staff. Date of Payment from insurance company may be a processing date, not the date on which payment was made. Please allow 10-14 days for payment to take place after receiving notice that your claim has been processed. If you feel that you have a refund due, and have not received it in a reasonable amount of time, please contact our bookkeeper.

7. Many times an insurance carrier pays 80 % of certain types of treatment, and patient responsibility is the remains 20 %. You should be aware that this is not 80 % of the total charge, but rather 80% of what you insurance company determines a usual and customary charge. Exactly how insurance carriers determine such fixed fees often times has nothing to do with the fees being commonly charged in our medical community. The reimbursement amount varies according to insurance carrier. Please check with your carrier to determine if they pay 80 % of our fee or 80 % of a value that have been assigned. By being aware of this fact you will be better prepared to handle any balance due. Many insurance companies offer a wellness or preventative visit once a year. Some insurance carriers have a set limit amount they will cover or pay. If your insurance carrier offers this, please advise the doctor at the time of your visit and the billing staff so this may be coded properly.
8. Please be prepared to present your insurance cards to the receptionist when making a first time visit to Perry Kalis, M.D. Periodically, thereafter, you will be asked by the receptionist or cashier to copy your insurance cards. This procedure is followed in order that we may maintain current billing information. **IT IS VERY IMPORTANT THAT YOU NOTIFY US OF ANY CHANGES IN YOUR INSURANCE COVERAGE.** It is always best to educate your self on any test or procedures that may need prior authorized to better help our staff in setting up future appointments.
9. When calling the office for prescription refills please have a list of the medications you need refilled as well as the name and phone number of your pharmacy. It is very helpful it you coordinate your prescription refill requests with your office visits. If that is not possible, please kindly give our staff at least 48 hours notice to phone your refills in.

CONCERNING CHECKS:

1. We cannot cash two-party checks.
2. There is a \$20.00 charge for first time checks returned due to insufficient funds. The second time a check is returned to us due to insufficient funds, future payments must be made in cash or money orders.

PLEASE REMEMBER:

IF YOU HAVE QUESTIONS OR CONCERNS FEEL FREE TO ASK FOR ASSISTANCE FROM THE OFFICE STAFF.

Sincerely,

Perry Kalis, M.D.