

Understanding Your Financial Responsibility

We realize how confusing the medical billing process can be and are here to help you. Please feel free to call with any billing questions or concerns. We are also able to offer payment arrangements for those who qualify. We want your experience with OAD to be as pleasant and painless as possible.

Thank you!

OAD Billing Team

Office Visits, X-Rays, & Injections

For Patients with Insurance – Our front desk staff will ask you to pay a copay or an estimate of your patient responsibility for your visit. After your visit, we will then bill your charges to your insurance. You will be responsible for any remaining deductible, coinsurance, or co-payment charges.

For Self-Pay/Cash Patients – New patients are expected to pay a \$200.00 deposit (follow up patients, \$100.00) prior to being seen. At the end of the visit, we will apply a 30% discount to your charges. If you owe less than your deposit, you will be refunded the remainder of your deposit. If you owe more than your deposit, you will be notified of the balance. You may pay at check out or make payment arrangements with us to settle your balance.

Durable Medical Equipment (DME)

If you are prescribed a DME product, you will be asked to pay a deposit and sign a waiver acknowledging your financial responsibility. This deposit amount may or may not be your total responsible amount for the product. We will bill your insurance the charges. Patients are responsible for any remaining deductible or co-insurance costs for the product. Products are non-returnable unless there is a material defect.

Post Op Visits

There is a 90 day post-operative period from the date of your surgery. During this period, your post-op visits will be no charge. This does not include additional services your provider may need to perform to follow up on your care after surgery, such as injections, x-rays, DME products, or any other service aside from your post-op visit itself. Please be aware that you may be responsible for any remaining deductible or coinsurance amounts for these services.

If Surgery is Required

If your provider schedules you for surgery, he/she will have you meet with his/her surgery coordinator who will schedule you. The coordinator will get authorization from your insurance and will tell you what to expect on the day of your surgery. The coordinator will then give the procedure codes for your surgery to one of our financial counselors who will then contact you with an estimate of your responsibility based on your insurance plan.

Our financial counselor will then collect a surgery pre-payment from you prior to surgery. This is just an estimate based on the codes your provider gives the counselors. While we do our best to collect your full responsibility please understand that there may be an additional amount to your deductible or coinsurance that is your responsibility after the insurance processes the claim. Our financial counselors can offer payment arrangements for surgery pre-payments if needed.

Our Statement Process

Once your insurance processes your claim, and their payment is posted into our system, any remaining balance to your responsibility will be billed to you. You should receive at least two current statements, a phone call, a past due letter, and a final notice letter. If no response is received, you will then receive a personal phone call to warn you of your balance going to collections, and will have an opportunity to make payment arrangements. If a payment is still not received, your balance will then go to an outside collection agency for recovery.

To ensure you are billed correctly, please make sure that your insurance information, address, and phone numbers are current with our office at the time of your appointment.

To Pay a Bill

In Office

Come to any of our locations and pay in person.

Online

Pay your balance online with your patient account number at **www.healthtexas.com**.

Phone

Pay directly over the phone using your credit or debit card. Simply call our main number and ask for the Billing Department.

Mail

Mail a check with the bottom portion of your statement to the address:

Orthopedic Associates of Dallas P.O. Box 844128 Dallas, TX 75284-4128

Or mail a check with your patient account number directly to our Billing Department:

> Orthopedic Associates of Dallas Attn: Billing Department 3900 Junius St. Suite 500 Dallas, TX 75246

OAD Locations

Baylor University Medical Center

3900 Junius Street Suite 500 Dallas, TX 75246

Medical City

7777 Forest Lane Suite C-106 Dallas, TX 75230

Contact Us

Monday through Friday 8:00 am -5:00 pm

Phone: 469 800 7200 Fax: 469 800 7350

Plano

4716 Alliance Boulevard Pavilion II, Suite 600 Plano, TX 75093

Frisco

5575 Warren Parkway Professional Bldg. 1, Suite 115 Frisco, TX 75034