



Patient Financial Policy (updated 2022.12)

Thank you for choosing Kansas City Urology Care, PA as your urology and radiation oncology healthcare provider. We are committed to providing you with the highest quality medical care, in a supportive, empathetic, and respectful manner. If you have special needs, we are here to work with you.

The following information is provided to avoid any misunderstanding or disagreement concerning payment for professional services. Your clear understanding of our "Patient Financial Policy" is important to our professional relationship. Carefully review the following information. Please ask if you have any questions about our fees, our policies, or your responsibilities.

Insurance

It is the patient's responsibility to provide the clinic with current insurance information since our Practice participates with a variety of insurance plans. **Your insurance policy is a contract between you and your insurance company.** We consider an insurance card similar to a credit card because you are asking us to bill another party (your insurance) for charges for the services you have been provided.

As a courtesy, we will file your claims for you. However, we will not become involved in disputes between you and your insurance carrier. This includes, but is not limited to, deductibles, co-payments, non-covered charges and "usual and customary" charges. We will supply information as necessary. **You are ultimately responsible for the timely payment of your account.**

If we DO participate with your insurance company, all services performed in our office will be submitted to them, unless we have received prior notification of non-covered services. Non-covered services are the patient's responsibility. All copays and deductibles are the patient's responsibility. Copays are due at the time of service.

If we DO NOT participate with your insurance company, we will file the insurance claim and accept the payment, but we will not accept the contractual adjustment unless we are required to by law. Any remaining balance will become the patient's responsibility, including any non-covered amounts. If you have a question as to whether we accept your insurance plan, please contact our billing department at (913-341-7985) prior to your appointment.

Not all services are a covered benefit in all contracts. Some insurance companies arbitrarily select certain services they will not cover. It is your responsibility to know if a certain procedure is not covered, please check your insurance handbook or contact your insurance company for clarification.

It is your responsibility to bring any required referrals for treatment at, or prior to the visit. If you do not have the referral, your visit may be rescheduled, or you may be financially responsible for the visit.

Copays

Your insurance company requires us to collect copayments at the time of service. Waiver of copayments may constitute fraud under state and federal law. Please help us in upholding the law by paying your copayment at each visit. For your convenience we accept cash, check, or credit card (MasterCard, VISA, AMEX or DISC). If you do not bring proper payment to your visit, you may be asked to reschedule your appointment except in the case of a medical emergency.

Patients with NO Medical Insurance

If you do not have group or individual medical insurance, payment for professional services is expected at the time of service. As a courtesy, the Practice offers a 30% discount of billed charges to anyone with no insurance if paid at the time of service. This discount is available **ONLY ON** the actual date of service. If you have questions, we recommend that you contact our billing department (913-341-7985) prior to your appointment.

Waiver of Patient Responsibility

It is the policy of the Practice to treat all patients in an equitable fashion related to account balances. The Practice will not waive, fail to make reasonable collection efforts, or discount copayments, coinsurance, deductibles, or other patient financial responsibility unless such action would be in accordance with state and federal law, as well as participating agreements with payers. Full or partial financial responsibility may only be waived in accordance with the Kansas City Urology Care, PA Charity Care Policy.

Un-Paid Balances & Payment Arrangements

If your insurance company has not paid the balance in full or you are unable to pay the balance in full, you will receive a statement notifying you of the amount due, you may call our billing office at (913)341-7985 to set up payment arrangements if necessary. If you fail to make payment in full, within 120 days, for the services that are rendered to you, your outstanding balance may be considered for further collection activity.

Late Arrivals

A late arrival, not considered to be the responsibility of Kansas City Urology Care, PA, will be registered and worked into the schedule as soon as possible. If the patient is more than 30 minutes late, the appointment may be rescheduled.

No-Shows

Kansas City Urology Care, PA may charge a \$50 “no-show” fee for an office visit or \$100 “no-show” fee for an in-office procedure in the event that you do not show for your appointment and in which you do not cancel or reschedule with 24 hours’ notice. This will be applied to your account.

Returned Checks

The charge for a returned check is \$30 payable by cash or money order. This will be applied to your account in addition to the insufficient funds amount. You may be placed on a “Cash Only” basis following any returned check.

Minors

Our Practice does not treat minors without the presence of a parent(s) or guardian(s). If the patient is a minor (under 18 years of age), the parent(s) or guardian(s) is responsible for full payment and will receive the billing statements.

Divorce Decrees

Kansas City Urology Care, PA is not party to any divorce decrees, so any outstanding balance is still the responsibility of the patient or the legal guarantor of the patient, in the case of a minor.

Special Form Fees

If you require any special forms to be completed (for example, FMLA, Work Comp or Disability) by a physician, the patient/guarantor will be responsible for any fees related to the service.

Medical Record Copies

Your medical record is the property of Kansas City Urology Care, PA. If you would like to request a copy of your medical records, for yourself or to be mailed to another provider, please contact your physician’s office to obtain the proper Medical Records Request form. Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) a reasonable cost-based fee pursuant to 45 CFR 164.524 may be charged to provide copies of your medical records. There are several ways that you can request access to your medical records. You may request them directly from Kansas City Urology Care, PA. We also utilize an outside vendor called MediCopy to provide access to medical records and you can make a request directly to MediCopy through its website at <https://medicopy.net/>.

Card-on-File

Effective no sooner than February 20, 2023, Kansas City Urology Care, PA will begin requiring that patients keep an active credit/debit card on file which may be used to pay any balance that becomes due after your insurance processes our claim(s). If your insurance policy requires that you pay a copay or that you have an annual deductible/out-of-pocket amount, then you are required to add a card-on-file. This applies to Medicare without a Medigap secondary policy, Medicare Advantage and commercial/private insurance patients. Active Medicaid, Tricare and Workers Compensation patients are exempt. A copy of the Card-on-File policy is available upon request or can be located at www.kcuc.com.

Kansas City Urology Care, PA must emphasize that as healthcare providers, our relationship is with you, not your insurance company. While filing the insurance claims is a courtesy we extend to our patients, all charges are strictly your responsibility from the time services are rendered. Therefore, it is often necessary for you to inquire and explore your benefits with your insurance carrier. We do realize that temporary financial problems may affect timely payment, but if such problems do arise, we encourage you to contact us promptly for assistance in the management of your account at 913-341-7985.

Kansas City Urology Care, PA believes that a good patient-to-physician relationship is based upon understanding and good communication. Thank you for understanding our “Patient Financial Policy”. We appreciate the opportunity to provide you with your urology and radiation oncology care. Your assistance and cooperation will be most appreciated.