



SOUTHERN INDIANA  
SURGERY, INC.

Community focus. Exceptional care.

## Financial Policy

Thank you for choosing Southern Indiana Surgery, Inc. to provide your surgical care. We are committed to providing high quality care to you and your family. The following will outline our financial policy. If you should have questions or concerns regarding our financial policy, please feel free to discuss them with our Practice Manager.

### Payment of Your Bill

- Southern Indiana Surgery, Inc. participates with the following insurance carriers: SIHO, Sagamore, Anthem, Encore, Champus (TriCare), Medicare and Medicaid. This means that we agree to accept your insurance company's allowable charge. We will also comply with state requirements filing for worker's compensation claims.
- Patients referred by Volunteers In Medicine will be responsible for a nominal fee at the time of the office consultation. This fee must be paid in advance of your appointment. You may discuss the fee amount with any of our billing staff.
- We will file with your insurance company for insurance carriers with whom we do not participate; however, you may have some charges that fall "out of network" that may be your responsibility.
- **You** are responsible for your bill. We will expect payment from you regardless of any divorce decree or court orders regarding payment of medical bills.
- **We expect all patients to pay deductibles and co-payments at the time of their office visits.** If you are uncertain as to what your co-payment will be, we will be happy to give you an estimate prior to your visit. You may also contact your insurance company for information.
- A fee of \$20.00 may be charged for any checks returned to us from your bank.
- We will attempt to discuss your surgery charge and what you will be expected to pay after insurance at the time your surgery is scheduled. Please remember this will be only an estimate of your charges. For emergency procedures, we will discuss the estimated amount you may owe at the time of your follow up visit. You may also contact our staff at any time should you want to discuss this earlier. In order to make this possible, you must provide our office with your insurance information.
- **All patient due accounts are expected to be paid within a reasonable period of time. Any account left unpaid or without adequate discussion with our staff, may be subject to referral to a collection agency.**

### Appointments

- **Patients are asked to notify Southern Indiana Surgery, Inc. within 24 hours of their scheduled appointment of their inability to keep an appointment.** Patients who fail to keep their appointments may be subject to a fee of \$25.00 if proper notification is not given. This fee will be expected to be paid by the patient and is not reimbursable by any insurance carrier.

Thank you for your understanding of our Financial Policies. Please let us know if you have any questions or concerns.

\_\_\_\_\_  
Responsible Party Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Acct #

\_\_\_\_\_  
Patient Name

General Surgery  
Comprehensive Breast  
Services  
Vascular Surgery  
Bariatric Surgery  
Colonoscopy Screening



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