

Visit the Patient Portal at sosbones.com to
Message Your Provider, Request an Appointment, Pay Your Bill,
Access Your Health Information, and Sign up for Text Message Reminders.

INSURANCE & PAYMENT INFORMATION It is the patient's responsibility to find out if SOS participates with your insurance company. Each insurance company has many plans that can vary even within one employer. We have a list of participating insurance carriers on our website at sosbones.com. Whatever is not covered by your insurance plan(s) is your responsibility. You may be advised of your estimated patient responsibility for services rendered. You must present your insurance card(s) at each visit. Your co-pay is due at the time of service. We accept cash, checks, money orders, Master Card, Visa and American Express. We understand that unexpected situations can come up and we want to do what we can to help our patients. When our patients refuse to work with us and refuse to pay their bills, we will need to discontinue services. Please confirm your address, phone and insurance are up to date. An estimated amount for services billed is available upon request. There is a \$25 fee for returned checks.

KEEPING YOUR APPOINTMENTS We offer reminders about appointments via text, phone call or email. We realize that life is not always predictable and understand there are times when you must miss an appointment due to emergencies or obligations for work or family. If you cannot make your appointment, **we ask that you contact us at least 24 hours ahead of time to cancel or reschedule your appointment or you will be considered a "no show."** Methods to contact us include responding timely to a phone call or text confirmation, calling our office during regular business hours (800a-430p weekdays) or contacting us through our website.

NO SHOW FEES Patients who continuously fail to show up for their appointments and cancel or reschedule less than 24 hours in advance will be charged a \$30 fee that is not covered by insurance. Multiple missed appointments or last minute cancellations or reschedules may lead to dismissal from the practice due to noncompliance. Always update us on any changes to your phone numbers, email or mailing address. Our doctors know your time is valuable. We make every effort to stay on time with scheduled appointments but delays or reschedules may occur due to unforeseen circumstances. We will try to keep our patients aware of any excessive wait time when in the office and give as much time as we can to reschedule any upcoming appointments due to a change in the doctor's schedule. We thank you for your understanding and patience.

MINOR PATIENTS (UNDER AGE 18) The parent(s), guardian(s), or adult accompanying a minor is responsible for providing current insurance information for the minor and /or payment of co-pay due at the time of service. The legal guardian will be responsible for providing their license at the first visit. SOS will not get involved in any child custody and /or divorce decrees. We expect to be provided any legal paperwork that the parents are aware of so we may appropriately communicate about the minor's medical care.

REFERRALS If the patient's primary care doctor (PCP) refers them to SOS and their insurance plan requires a referral, it is the patient's responsibility to be sure their PCP has called the referral in to the insurance carrier. SOS is responsible for obtaining referrals for continued care services that your SOS provider may request with your treatment plan (MRI, CT scan, etc.).

SELF-PAY PATIENTS Self-Pay patients are required to pay a down payment of \$200 at their first appointment. The patient is required to sign a payment plan for any balance over \$200. We have standard payment guidelines that will be reviewed with you if you have no insurance or a balance due after your insurance pays.

WORKER'S COMPENSATION It is the patient's responsibility to file an injury report with their employer. SOS requires the compensation insurance carrier, their address, date of accident and carrier claim number. The patient is responsible for payment of services until SOS receives this information. Bring your job description from your employer. Your Doctor has to follow New York State Workers Compensation Medical Treatment Guidelines for all patients that are treating for injuries to these 4 body parts: NECK, MID-LOW BACK, SHOULDER & KNEE as well as diagnoses of CARPAL TUNNEL SYNDROME and NON-

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ACUTE PAIN. In regard to your disability status/work ability, our physicians will continue to provide an accurate degree of disability and work restrictions for you. **Please do not leave your appointment without a work note.**

For all Federal employees, a scheduled loss of use per the AMA 6th Edition Guidelines cannot be given by your doctor, please contact your claims examiner.

STATEMENTS You will receive a statement for any balance due after your insurance carrier pays. We will gladly set up a payment schedule for you, however if 2 payments are missed, your account will be reviewed for collection.

NYS NO-FAULT SOS requires the no fault insurance carrier, their address, date of the accident, all claim numbers and the claim adjuster's name and phone number. You will be asked to sign an NF-3 application for no-fault benefits at your first appointment. We will bill no fault as a courtesy to you. If we have not received payment in a timely manner, you will receive a statement in which time it is the patient's responsibility to contact the insurance carrier.

MEDICARE ADVANTAGE PLANS Please notify Medicare that you have chosen an Advantage Plan. The Advantage Plan card you receive will be used for billing purposes. Your Medicare card will not be used for billing while you are on an Advantage Plan. Be prepared with your Advantage Plan card and your Medicare card at the time of your appointment. If you terminate your Advantage Plan, your Medicare card may become your primary insurance carrier again. It is your responsibility to understand your Advantage Plan policy and what it covers. Co-pays are due at time of service.

DISABILITY FORMS SOS will process insurance, disability forms as a service to our patients. We ask that you please clarify with your SOS provider what their medical opinion is about your disability status is at every visit and what your restrictions are at home or work. Please complete your portion of the form first and give it to a receptionist or mail it to us with a \$15.00 payment as soon as you receive it. Credit card payments or checks are accepted for payment. Please allow up to 10 business days for completion of the form, not including holidays.

MEDICAL RECORDS REQUESTS. Your records are confidential so your written authorization is required to obtain them. Processing time for record requests may take up to 10 business days. Fees include a CD of medical records for \$5.00, or paper copies of .75 per page (capped at \$6.50). SOS works with a partner company called CIOX for release of information. This reputable company processes our patient records requests and will invoice the requestor for processing fees.

X-RAY/MRI COPY REQUESTS There is no charge for a paper copy of x-ray images. There will be a \$5.00 fee for any CD of images requested by a patient.

MEDICAL HISTORY QUESTIONNAIRE for NEW PATIENT APPOINTMENTS If we were provided a valid email address, we will email a link to our secure patient portal where you can complete this questionnaire online prior to your visit. You may also go to our website at sosbones.com and click on "Patient Portal" in the upper right hand corner of the home page. You may access your clinical summary, past and upcoming appointments and message your provider through the portal.

PATIENT NONDISCRIMINATION AND ACCESSIBILITY: SOS complies with applicable Federal civil rights laws and does not discriminate or treat people differently on the basis of race, color, national origin, age, disability or sex. SOS provides free aids and services to people with disabilities to communicate effectively with us such as qualified sign language interpreters, written information in other formats, free language services to people whose primary language is not English such as qualified interpreters and information written in other languages. If you need these services, please contact a Supervisor at an SOS offices or Pamela Hilliar at 315-251-3185.

PATIENT BEHAVIOR In order to provide a safe, respectful, and pleasant experience for all of our patients and guests, there may be times where we need to discharge a patient from our practice. Some reasons we may be forced to do so are due to threatening, rude or loud behavior, no showing for a surgery, failure to pay your bill on time, persistent failure to keep scheduled appointments, failure to follow physician recommendations, or fraud or forgery.

THANK YOU FOR CHOOSING SOS!