



Orthopaedic
Sports Medicine
at Cypress

Duane A. Murphy, M.D.
Emeritus

Tarun Bhargava, M.D.
*MIS Anterior Hip
Reconstruction, Hip
Resurfacing, Total and
Partial Knee Reconstruction*

Bradley W. Bruner, M.D.
*Arthroscopic Knee
Surgery and
Sports Medicine*

Phillip F. Hagan, M.D.
*Arthroscopic Knee Surgery,
Shoulder Surgery,
and Sports Medicine*

James Joseph Jr., M.D.
*Total Joint
Reconstruction
of Knees and Hips*

Michael Easter, PA-C

Greg Knoblauch, PA-C

Peter Vang, PA

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888.397.7362
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BILLING POLICY

It is our office policy to bill you and/or your insurance company for treatment provided, at the completion of each appointment.

REGARDING HMO'S, PPO'S and MANAGED CARE PROGRAMS:

We do not participate in some of these programs. Please check with your insurance company to see if we are providers of your plan. **It is your responsibility to obtain initial referral forms, etc.** required by your particular insurance company, this also includes follow-up visits and visits to other physicians in our group. Please be aware that if you are seen out of network, you are liable for the difference in coverage benefits. Also, some HMO/PPO/Managed Care Primary Care Physicians require all x-rays be taken at their office only, check with your physician before your appointment.

COPAYS:

You will be expected to pay your copay prior to seeing your physician. If you are unable to pay, you will be required to reschedule your appointment.

REGARDING PATIENTS WITH NO INSURANCE:

Payment is due at time of service.

REGARDING MEDICARE:

Dr. Bruner, Dr. Hagan, Dr. Joseph, and Dr. Murphy are all participating physicians with Medicare. We will file all charges (including x-rays, braces, and etc.) with your Medicare and your supplemental insurance, if applicable. If you do not have a supplemental insurance, you will only be billed for the 20% not paid by Medicare or any deductible that has not been met.

COMPLETION OF FORMS (Disability, FLMA, Physician Statements, Etc.) :

A charge will be assessed per form. Prepayment is required before the form(s) will be completed.

REGARDING WORKMEN'S COMPENSATION/AUTO/LIABILITY:

Our office requires authorization prior to initial visit. If authorization is not received, our office will call on the initial visit and try to obtain it. If we cannot obtain authorization, we will ask for your health insurance information. Also, you will be responsible for all fees until the case has been settled. **WE DO NOT BILL ATTORNEYS IN WORK COMP, AUTO, AND/OR LIABILITY CASES.**

MINOR PATIENTS

If you are a minor **your parents and/or guardian need to accompany you** to our office before treatment can be rendered. You need to make arrangements prior to being seen with your parent and/or guardian for payment to be made at the time of treatment.

XRAY

For your convenience we do have x-ray facilities in the building. If x-rays are indicated in your treatment, charges are handled in the same manner as the physician charges. If you have had x-rays taken somewhere else, please bring them with you to your appointment.

LAB

In the event we need to have a lab drawn, our office uses an outside laboratory services. You will receive a separate bill for the lab services.

It is always your responsibility to see that your account is paid, regardless of insurance or any other circumstances (such as litigation). Patient is responsible for costs associated with collecting said owed balances including but not limited to, collection agency fees, attorney fees, and court costs.

IF YOU HAVE ANY QUESTION CONCERNING OUR BILLING POLICIES OR WE CAN ASSIST YOU IN ANY WAY, PLEASE FEEL FREE TO CALL ON OUR OFFICE STAFF.

Signature: _____ Date: _____