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OFFICE POLICY ON STANDARD INSURANCE AND MANAGED CARE INSURERS

Providing quality medical care for our patients is our primary concern. We are more than willing to provide care within your insurance contract guidelines if you let us know at the time of service what these guidelines are. We highly recommend you read your insurance booklet or contact your insurance company about your individual benefits.

In order to accommodate your needs, Southwest Bariatric Surgeons, PLLC has enrolled in several managed care insurance programs. While we are pleased to be able to provide this service to you, it is very difficult to keep track of all individual requirements. Even within the same insurance company, plans differ depending upon what type of contract your employer has negotiated. Insurance is a contract between you and your insurance company. We will not become involved in disputes between you and your insurance company regarding deductibles, co-payments, covered charges, preexisting conditions, etc. You are responsible for the timely payment of your account.

HMO/PPO/Managed Care Plans (i.e. Humana, United Healthcare, BCBS)

If your doctor is a provider for your plan, Southwest Bariatric Surgeons, PLLC will file your claim for you. You are responsible for any co-payment or deductible. If your plan requires prior authorization to see a specialist, you are responsible for getting the referral to our office before the day of your appointment. You will be billed and are responsible for any non-authorized office visits.

Medicare

The physicians of Southwest Bariatric Surgeons, PLLC accept Medicare assignment. Medicare pays 80% of the allowed charge after your annual deductible is met. The patient is responsible for this annual deductible plus the 20% co-payment. Southwest Bariatric Surgeons, PLLC will file your secondary insurance if you provide us with that information at the time of your visit.

Indemnity Type Insurance

On your first visit, payment is expected at time of service. If you have met your deductible, Southwest Bariatric Surgeons, PLLC is willing to file your insurance and collect your co-insurance percentage.

Uninsured/Self Pay

Payment is expected at time of service. If you are unable to pay in full, please notify the front office prior to seeing the physician in order to make payment arrangements.

I have read and understand the above information.

Patient or Responsible Party Signature _____

Date Signed _____

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