

ORTHOPEDICS • SPORTS MEDICINE  
ARTHROSCOPIC SURGERY  
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SPORTS MEDICINE • FAMILY MEDICINE  
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## The Patient and Financial Responsibility

OUR MISSION is to provide you, the individual patient, with resources to process your claim efficiently and expediently. Unfortunately, we cannot possibly have all the information regarding your insurance company's policies, which differ significantly between insurance companies and group policies.

YOUR RESPONSIBILITY, in order for our office to receive appropriate payment, is to contact your insurance company for the correct and complete requirements such as coverage parameters, pre-certification and pre-authorization policies, deductibles, copayments, group number and a correct billing address.

YOUR FINANCIAL RESPONSIBILITY is clear. Once you have received any type of medical treatment or service, you are responsible for any and all sums due for those services. Creekside Corporate Center (CCC) bills the insurance company as a courtesy to the patient. However, insurance was designed to be used as reimbursement for payment, not a substitute. The patient is therefore always ultimately responsible for payment. Claims will be filed by Creekside Corporate Center staff and we anticipate payment within sixty (60) days of service to the patient.

FAILURE TO REMIT PAYMENT for which you are deemed responsible, in a timely manner, can have many negative implications for the patient. These include but are not limited to referral to a collections agency and to Creekside Corporate Center's attorney for possible litigation. If such action is necessary, the patient will be responsible for all costs associated with collection of fees whether through an agency or through legal means, including but not limited to attorney's fees, court costs and costs for collection agencies. Any account sent to the collection agency will be charged an additional 35% fee of the balance due.

Obviously, Creekside Corporate Center desires only to provide you with the best treatment possible and to maintain a long relationship with every patient that enters its doors. Creekside Corporate Center appreciates your business and your cooperation.

This document is merely information for the patient. First and foremost, it is the patient's acceptance of medical services that creates the obligation to Creekside Corporate Center.

I understand the procedures and responsibility to ensure my claim is processed promptly and accurately for payment within sixty (60) days. I also understand that I am responsible for any denials, copayments or deductibles.

**FAILED APPOINTMENTS** Failed appointments (less than 24 hours notice) are a significant contributor to rising health care costs. Individuals who fail to show for a confirmed appointment may be assessed a fee based on the length of the missed appointment.

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Patient/responsible party signature and date

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