

The physicians and staff here at **Piedmont Colorectal Associates** want to assure you that we will do our best to provide you with the utmost in health care while you are being treated at our facility. You have been referred to our specialty for assistance that cannot be provided by your family physician. **Our practice is a surgical practice, and often the services provided in this office can be considered “surgery” by your insurance company.** This may even include the necessary examination to determine the exact nature and extent of your healthcare issue.

The classification of services is out of our hands and is solely determined by your insurance company. We can assure you that we will not bill nor upgrade any services that you receive for improved reimbursement. In fact, there are limited codes that can be used for this specialty and we provide our services with your well being as the crux of our practice and not higher reimbursement. For the majority of you, this will not be an issue with your insurance. Under current economic pressures, we have seen more insurances shift payment responsibilities to the patient. Remember, their bottom line is their investors. Our prime directive remains patient care. Our office is also willing to work out payment plans for patients who find this necessary.

Some of the more common services rendered that may or may not be classified as surgery by your insurance are:

- 46600 anoscopic examination 45300 proctosigmoidoscopic examination
- 46930 infra-red coagulation for the treatment of hemorrhoids
- 46945, 46221, and 46946 rubberband ligation for the treatment of hemorrhoids
- 46917 infra-red coagulation for the treatment of warts
- 46900 chemical treatment of warts 46920 excision of warts
- 46940 chemical treatment for anal fissures

You should check with your insurance if you are uncertain as to how your insurance company will process these procedures and advise the physician should you not wish to receive these services. Please be advised, some of the services are necessary for an accurate diagnosis and treatment but the choice will be yours.

Terminating Services

All the providers and staff at Piedmont Colorectal Assoc. value a meaningful and productive relationship with our patients. Unfortunately, there are occasions when this is no longer feasible. Please be advised that the Practice reserves the right to terminate the provider/patient relationship for the following reasons:

- _____ Multiple cancellations or missed appointments
- _____ Medical Non-Compliance, including violation of Therapeutic Drug Agreement
- _____ Rude, abusive behavior, use of obscene language, mistreatment of staff in person or on The Phone
- _____ Failure to pay a debt/account or honor a payment plan

In such cases where the practice terminates the relationship, you will be notified in writing. Your provider will provide emergency medical care for 30 days following the date of the written notice, and will send medical records to your new provider with a written release.

I have read and understand the billing policies and the reasons that Piedmont Colorectal and my Provider may terminate the patient/provider relationship.

Patient Name and Date _____