



Practice Policies

Appointments: By appointment only. Appointments can be made during normal business hours.

No Show Appointments: Please notify our office at least 24 hours in advance if you cannot make your appointment. We reserve the right to discharge you from our practice if you have three (3) no-shows or short-notice cancellations for scheduled appointments.

After Hours and Emergency Care: If you are experiencing an emergency, call 911 or head to the nearest emergency room. You can page the on-call ENT physician by calling the Unity Point Operator at (712) 279-3500.

Prescription Renewals: Prescriptions are renewed only during normal office hours. In some instances, especially when insurance authorization is necessary, this may take up to 2 weeks. Depending on how long it has been since we have seen the patient in a clinical setting, we may require that the patient be seen in our office prior to medication renewal.

FMLA Paperwork: Forms which are required to be filled out by the physician or the nursing staff must be presented in a timely manner so to allow time for completion. There will be a \$25.00 fee which should be paid prior to the forms being completed. This is in respect to the specialist as it takes considerable time to review your chart and to complete most forms, such as FMLA.

Financial & Insurance Policies

Insurance Benefits: Please be aware that when a patient requires a visit to a specialist, there are diagnostic procedures required to diagnose and evaluate for treatment that cannot be done by a family physician. These procedures may be done during the normal course of the exam by the specialist. Depending on your insurance policy provisions, these procedures and others may fall under a separate benefit other than your office copay, such as deductible or co-insurance.

Your insurance is a contract between you and your insurance carrier; payment for services is ultimately your responsibility. It is extremely important for you to know your coverage.

If you are not sure whether or not your ENT provider is in network, it is your responsibility to contact your insurance company.

Financial: Co-Pays, as well as outstanding balances, are due at the time of service. We accept cash, check, VISA, MASTERCARD, AMERICAN EXPRESS, DISCOVER AND CARE CREDIT. Payment plans may be arranged on an individual basis with the billing office. If you have any questions, please review the financial form as included in your registration packet or contact our billing department at (712) 234-8787.

Self-Pay Patients: Our office requires patients without insurance to pay 80% of the charged fees at the time of service with a minimum payment of \$250. If you have any questions or concerns, please contact our office.

Referrals: If you have an HMO or similar plan, you will need a referral from your primary physician to see a specialist. If we have not received this referral prior to your arrival at our office, your appointment will be rescheduled. It is your responsibility to know if a referral is required and to obtain one. If one is not obtained, you will, unfortunately, be responsible for your entire bill.

Medical Records: Any request for medical or billing records must be accompanied by a signed request and authorization for release of information. We will make every effort to provide these copies within 2 weeks, so please make your request well in advance of other physician appointments, etc.

Patients requesting release of their records to themselves or their insurance company will accrue a charge up to \$35.00 based upon the size of the record unless the record is needed for their insurance claim or an insurance appeal. There is no fee for a physician to physician release. In the case that our office is referring a patient on, our staff will forward your records on at no additional cost.

Surgical Patients: Prior to your surgery, we will verify insurance coverage and complete any pre-certification requirements of your policy. However, per your insurance carrier this verification process is no guarantee of payment.

We advise you to contact your insurance company and also check if any additional requirements need to be met prior to surgery. If during the insurance verification process, it is noted that your policy has a deductible and/or co-insurance percentage, our office requires this to be paid in part or in full prior to surgery. Pre-pay arrangements can be made with our billing office and must be paid within 2 business day prior to the scheduled surgery. This amount does not include any services rendered by the Hospital, Laboratory, or Anesthesia. If the pre-paid amount and the actual processing of the claim results in overpayment on your account balance, you will receive a refund from our office; otherwise, if your prepayment is lower than the actual processed amount on the claim, you will conversely be billed the remaining amount.

If you have further questions regarding this policy please refer to the [Financial Policy](#) or contact our billing department at (712) 234-8787.