Poplar Medical Complex 301 W. Poplar St. Ste. 50 Walla Walla, WA 99362

Dear Patient.



	,
An ap	opointment is reserved for you with:
On: _	at
Please desk.	e note X-Rays are completed on a walk-in basis at the hospital. Please check in at the hospital admitting
0	Check in at:
0	To be completed at:
0	No X-rays needed at this time.

Welcome! And thank you for choosing the Providence St. Mary Neuroscience Institute to partner with you in your care.

Before your scheduled visit with us, we ask that you please take the time to read the following information thoroughly. We appreciate 24 hours' notice if you are unable to keep this appointment.

Although our physicians make every effort to meet with patients at the appointed time, emergencies do happen that might make it necessary for us to reschedule your appointment. We will make every effort to notify you if this is necessary but often, we have only a brief notice of the arrival of an accident victim and we may not be able to contact you in advance. We thank you for your understanding.

Part of your appointment will include registering you for MyChart. MyChart is a web application that allows you to communicate with your doctor and view portions of your medical record online. Here are the different ways you can sign up for MyChart:

- The first way is to get online at: <a href="www.providence.org/mychart">www.providence.org/mychart</a> and sign up directly through the website prior to your appointment with us. You can call (1-833-395-2035) if you have any questions or need assistance.
- The second way is through the MyChart app which can be accessed with any smart phone. Just go to your app store and look up Providence MyChart.
- The third way is to do it while you wait in the room for the doctor at your appointment. The nurse is available if you have any questions or need assistance.

Arrival after your appointed time will result in your appointment being rescheduled. Cancellations and no-show appointments are documented and reported to the referring provider so that they know the status of their referral. Since we set aside a significant amount of time for the initial examination, a no show of less than 24-hour cancellation may result in an inability to schedule a follow up appointment. Out of courtesy to other patients waiting to see the provider, please arrive on time. We realize there are emergencies and extenuating circumstances so if any of the above occur, please contact our office as soon as possible.

**Payment options:** We are only able to accept debit and credit cards in our office. Please bring your photo identification and insurance cards with you. If you do not have insurance, a \$75 down payment is requested. A self-pay waiver will be filled out at your visit.

**Financial Assistance:** If you have concerns regarding your ability to pay please contact Financial Services at 855-229-6466.

**Surgeries/Procedures:** Your initial appointment is a consult. If a decision to have surgery is made, we will initiate the surgery authorization request with your insurance company. Insurance authorization will be needed prior to scheduling your surgery. Depending on your insurance plan benefits, you may be asked to make a deposit prior to elective surgeries.

Medicare: We will bill Medicare and we accept Medicare assignment.

**Labor and Industry/Worker's Compensation Claims:** Please notify our office in advance if your visit is related to an on-the-job injury. Authorization from the carrier is often needed. If you have a valid and open claim please bring in your Social Security number, date of injury, employer at the time of the injury, claim number, labor and industry carrier and address.

Washington and Oregon Medicaid: Your co-payment will be due at the time of each visit. We do not accept Washington and Oregon Medicaid as payment for medical services rendered unless the services have been authorized in advance. You will be responsible for your bill if the State does not pay for your services.

**Important reminder:** Your health insurance policy is a contract between you and your health insurance carrier, rather than between your doctor and the insurance company. Co-pays are due at the time of your visit. Balance on services rendered is due after your insurance processes the claim.

## Miscellaneous:

- You are responsible for contacting your insurance company to determine whether the provider is in network for your health plan and what services require pre-authorization.
- At your initial appointment we may provide you with shorts or a gown to change into for your physical examination.
- A fee is charged for completion of reports, completion of forms, and for telephone consultations with the physician.

**THANK YOU** for taking the time to read this information thoroughly. This letter is only a guideline and the information is subject to change and not intended to cover all circumstances. Please don't hesitate to call us if you have any questions concerning your visit or our fee schedule and payment arrangements. We look forward to seeing you at your upcoming visit!

Sincerely,

Providence St. Mary Neuroscience Institute

## Neurosurgery Suite 50

Tel: 509-897-8969 Fax: 509-897-5156 Office Hours: Monday-Thursday 8 am – 12 pm, 1 pm - 4:30 pm Friday 8 am-12 pm