

NEUROLOGY - STATEMENT OF FINANCIAL POLICY

Thank you for choosing Sierra Neurosurgery Group. We are dedicated to the best possible care for your health needs. The following information will make dealing with the financial aspects a little easier.

Payment methods: Cash, check, and credit card. Payment plans can also be discussed.

Insurance reimbursements: In the event that you should receive reimbursement from your insurance carrier(s) for services rendered with Sierra Neurosurgery Group Interventional Pain Management, you should immediately forward to our billing department.

Copays and deductibles: Payment of any applicable deductibles, co-payments, or co-insurance amounts are due before services are rendered. This applies to both office visits and procedures.

If you are not enrolled in an insurance plan: Payment in full is required at the time of service.

Returned check fee: \$25.00. This will be added to your account, and you may be asked to submit payment in cash, credit card or cashier's check.

Completing documents: Our office may complete forms for disability, FMLA, medical marijuana or DMV. There is a \$25.00 fee per form. The office can give you a quote. Please allow our staff 7-10 business days to complete your forms.

Prior authorization: If your insurance requires prior authorization or referrals for your office consultation and any visits thereafter, and if this authorization or referral has not been obtained prior to your visit, you will be expected to pay for all charges incurred at the time of your visit. If your insurance subsequently authorizes our services, your payment will be refunded upon receipt of the insurance payment. If your insurance requires prior authorization for treatment such as x-rays, labs, imaging, etc., our office will work with your insurance company to obtain authorization. It is your responsibility to make sure such authorization is ultimately obtained.

Please be advised that some of our physicians together with other local physicians are part owners/investors in Summit Surgery Center and the Surgery Center of Reno. The physician owners do not receive a referral fee for performing your surgery at these surgery centers. If you would prefer to schedule your procedure or surgery at another surgery center or a hospital, please ask and we will make every effort to accommodate your wishes.

SUMMARY NOTICE OF PRIVACY PRACTICES AND ACKNOWLEDGEMENT OF RECEIPT: Under Federal law, Sierra Neurosurgery Group (SNG) is required to protect the privacy of certain parts of your protected health information (PHI) we hold in our files. Upon your request, SNG must give you a notice (referred to as out "Notice of Privacy Practices") of our legal duties and privacy practices concerning the permitted uses and disclosures of your PHI and your rights regarding our use and disclosure of your PHI. You have the legal right to review our Notice of Privacy Practices before you sign the consent, and we encourage you to read it in full. Our Notice of Privacy Practices is subject to change. IF we change our notice, you may obtain a copy of the revised notices by accessing our website (sierraneurosurgery.com). You have the right to restrict how we use and disclose your PHI for the purposes of treatment, payment, or health care operations. We are not required by law to grant your request. However, we do decide to grant your request, we are bound by our agreement with you. You have the right to revoke this consent in writing, except to the extent we already have used or disclosed your PHI for the purposes of treatment, payment, and health care operations. If you have any questions, you may contact the privacy officer.

Naomi Albertson | MD
Jacob L. Blake | MD
Christopher P. Demers | MD, FAANS

Michael Moore | MD, FAANS
Jay K. Morgan | MD, FAANS
Rima S. Rindler | MD

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Christopher Woolley | MD

Andrea Black | APRN
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Main Office: (888) 323-2080
Neurosurgery | Fax: (775) 323-8216
Pain Management | Fax: (775) 683-9404

SIERRA NEUROSURGERY CANCELLATION POLICY: To gain the most benefit from our office and to ensure that other patients receive the highest level of care, it is essential to keep all your scheduled appointments.

If you are more than 10 minutes late for an appointment, you may not be seen that day. For respect for our other patients, we try to be on time and any delays will negatively impact the next appointment.

We understand the need at times to cancel your appointment. If you must cancel your appointment, please give us at least 24 hours advance notice. There are other patients requiring our care and your appointment can be given to someone else with enough notice.

If you cancel three appointments or miss two appointments, you may be discharged from our care.

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