



PATIENT BILL OF RIGHTS

1. Receive appropriate services, as prescribed, in a professional manner without discrimination relative to age, sex, race, religion, ethnic origin, sexual orientation, physical or mental handicap, or source of payment.
2. Receive considerate and respectful care by each individual representing TILLGES.
3. Be fully informed as to our company policies and procedures regarding billing and collection of accounts.
4. Participate in decisions regarding treatment, including establishment of goals and expected outcomes.
5. Expect reasonable responses to requests and concerns.
6. Be assured of confidential treatment of personal and medical records, and the right to review and receive copies of these records.
7. Prompt service if an orthotic or prosthetic product needs immediate repair or replacement. Such situations receive the highest priority, and every effort is made to resolve the situation in the shortest period of time possible. **Patients may call our office at any time with such needs. A practitioner is always on call after normal business hours.**
8. Be fully informed of Medicare supplier standards that apply to our business. These are posted in waiting area and individual copies are available on our website at www.teamtillges.com

WARRANTY - OUR PLEDGE TO YOU

TILLGES pledges to provide its patients with product and devices of the highest quality, free of defects and according to the patient's prescription.

TILLGES will warranty *custom* orthoses and prostheses for a period of 90 days. Any adjustments during that period not due to physical changes of the patient, abuse or undue rough wear, will be made free of charge. Custom fabricated devices cannot be returned for credit on your account.

Pre-fabricated items cannot be returned for hygienic reasons. In the unlikely event of an off the shelf item having a defect, *only the manufacturer's warranty applies*. We will contact the manufacturer on your behalf during the initial 90-day warranty period after delivery of your product.

It is in your best interest to communicate with your practitioner on a timely basis and to allow us to resolve any problems you are experiencing as efficiently and quickly as possible. Failure to contact the treating practitioner or infrequent or non-use of a device during the warranty period does not extend the warranty nor does it absolve the patient from the responsibility for payment.

It is our goal to provide you with the best care possible, and we will make every attempt to meet your need. Please contact us if there is a question or concern. We stand by our work.

BILLING AND COLLECTION POLICY

1. There is no charge for an initial evaluation appointment with a practitioner. Upon completion of the initial evaluation appointment, each patient meets with our office personnel to go over the following:
 - a. Charge of the item being provided.
 - b. Deductible and Coinsurance estimates, as determined per our contact with patient's insurance company and their applicable benefits.
 - c. The deductible/coinsurance or any other amount not covered by insurance becomes the patient's responsibility at the time of the delivery appointment.
 - d. Payment plans are available if patient is unable to pay full amount due at delivery. Staff will discuss the parameters that include down payment and month terms.
 - e. Unless the product/service order is cancelled within 24 hours of the evaluation, the patient is responsible for the payment for the work performed regardless of whether or not the patient picks up the product/device or schedules a fitting. Patients are called a minimum of 3 times to inform them that their product/device is available.
 - f. The insurance companies, with whom the patient is a member of, will be billed by TILLGES. Note: product is provided to the patient, not to an insurance company, thus the insurance company is responsible to the patient and the patient is ultimately responsible to see that the insurance company pays on their claims. We will help by filing the claim on the patient's behalf and answering insurance questions. but ask that the patient follow up with the insurance company if they do not pay the claim within 90 days.
2. Initial invoices are sent to patients after billing/payment of insurance
 - a. On day 29 Letter 1 "Past Due" is sent to patient
 - b. On day 45 Letter 2 "Late Fee" is sent to patient (at this time a \$25 late fee is added to balance)
 - c. On day 61 Letter 3 "Seriously Past Due" is sent to patient
 - d. On day 77 Letter 4 "Final Demand" is sent to patient
 - e. On day 93 Drops to Billing Cycle Complete Status in Brightree Collections
 - f. Accounts staff will call patient, no less than twice, to request payment in full or set-up a payment plan
 - g. After internal steps have been taken and if no payment plan has been set-up and/or no payments have been received, the account is turned over to a collection agency.

WHAT GOES INTO THE COST OF MY ORTHOSIS/PROSTHESIS?

- The appropriate design and precise fitting of your orthosis or prosthesis requires the skills of a highly trained practitioner. Orthotists and Prosthetists have completed a minimum of six years of higher education, and a one-year residency for each discipline. In addition, all our Practitioners are certified by the American Board of Certification in Orthotics & Prosthetics (ABC) or are pursuing certification. They are also licensed by the State of MN Podiatry Board to practice in Minnesota.
- Continuing Education for Practitioners and Technicians, and membership in various professional organizations keep our staff current on the latest technology in our field. Robert Tillges, CPO, FAAOP, is a Fellow in the American Academy of Orthotists and Prosthetists, the highest achievement in continuing education in our industry.
- As a clinic and a fabrication lab, our costs include specialized machinery, materials and supplies for fabrication, as well as ordinary office overhead. There is also a growing cost associated with compliance with a variety of federal and state regulations.