



ADAM I. HARRIS, M.D.
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*Board Certified Orthopaedic Surgeons
Adult Reconstruction and Joint Replacement*

AGREEMENT RELATED TO PAYMENT FOR NON-COVERED PROCEDURES

Dr. Adam Harris and Dr. Amanda Marshall and this medical practice have developed unique tissue-sparing techniques used in our hip and knee replacement surgeries. These procedures are intended to produce less post-operative pain, require shorter rehabilitation times, provide quicker returns to normal activities, and incur shorter hospital stays than are associated with traditional surgical techniques.

Some of the instruments required to perform the surgeries have been developed by Dr. Harris and some by Dr. Marshall. The procedures and instruments used by Drs. Harris and Marshall require a greater degree of surgical skill – and take more time to perform – than the traditional techniques. Other surgeons may choose to approach hip and knee replacement with more of an assembly line mentality. Drs. Harris and Marshall refuse to do the same. That is not the manner that they'd want their family treated, and they want no less for their patients than they want for their own family.

As our patient, you benefit from our use of these surgical techniques. Even though our surgical techniques are a bit more expensive than those used by other surgeons, your insurance carrier also benefits, because less time in the hospital and less time undergoing rehabilitation means a lower total cost to them. Because patients of this practice have a lower complication rate, insurance companies frequently recommend this office to their staff and their insureds. We estimate that our procedures result in a savings of between \$10,000 and \$20,000 off the total cost of treatment when the surgical procedures are performed by Drs. Harris or Marshall instead of by other surgeons using traditional techniques.

Despite these advantages, insurance companies have sometimes refused to allow for payment of the additional expense involved using our surgical techniques, even though our techniques result in an overall savings to them. The government (i.e., Medicaid and Medicare) and private insurance companies frequently attempt to treat the “assembly line physician” and Drs. Harris and Marshall as though they were interchangeable – neither worth a penny more than the other.

Every procedure performed by physicians must ultimately be reduced to a number called a “CPT code”. Each CPT code is associated with a fixed dollar value, and there is no adjustment permitted for the physician – or for that matter, the patient. In fact, it does require an Act of Congress in order to create a new CPT code. Presently, there is no “official” CPT code for the tissue-sparing techniques which have been developed by Drs. Harris and Marshall.

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After your surgery, your statement will include one of two additional CPT codes (27299 for hip or 27599 for knee), both of which are called “unlisted procedures”. These two codes are “catch-all” codes for doctors to use to reflect procedures *for which there is no “official” CPT code*. We believe that your insurance company should still pay for these “unlisted procedures”, but often they refuse to do so. We have attempted (and will continue to attempt) to convince the insurance companies to pay these additional costs, but often our attempts to get them to pay for these unique procedures simply fall on deaf ears. Each procedure is viewed by them as an “expense” which they wish to minimize. If you call your insurance company and discuss the benefits that you’ve realized as a result of our use of our unique procedures, the insurance companies are more likely to listen to you and then pay for the “unlisted procedures” portion of the bill. We can provide you with additional information about our procedures that you can use in your negotiations with your insurance carrier.

Even though your insurance carrier may be reluctant to pay for our use of our specialized procedures, you, as our patient, will still benefit from our use of them. Accordingly, we should still be paid for our use of these unique procedures. While we would prefer that they be paid by your insurance carrier (and are fairly certain that it would be our patients’ preference for their insurance providers to pay those charges, as well), we require your agreement that even if your insurance carrier refuses to pay for those additional, unique procedures, you will pay for those “non-covered” portions of your bill.

In consideration of the foregoing, I _____ (Patient Name – please print) understand that the bill submitted to my insurance company for my hip or knee replacement will include both the code for the traditional procedure (either 27130 or 27447) as well as a code to cover the added preparation, skill requirements, and surgical time required to perform the tissue sparing techniques pioneered by Drs. Harris and Marshall (27299 or 27599). **The fee for the “unlisted procedure” is \$1,250.** I agree to be fully responsible for payment of this fee for this additional service. If my insurance company pays any portion of this fee, I understand that I will be entitled to receive a rebate for whatever portion of the “unlisted procedures” is paid by my insurance company, not to exceed the amount of my contribution. I also understand that I waive any rules set forth by my insurance carrier for these “unlisted procedures” in my contract and/or in my physician’s contract.

Patient Signature

Date

Surgical Contract

Scheduling a surgical procedure requires the coordination of many different resources. Included in this list are the surgeon, the assistant, the hospital (Operating room time, OR and other staff, and that a bed is available after surgery), and an anesthesiologist. There is a shared responsibility of the provider(s), the facilities and the patient. This takes time to handle properly so that the patient will enjoy a quality experience.

Pre-Op Patient Obligations:

- To attend all pre-op visits as scheduled and/or required.
- That you understand all information and/or consents you sign. If you do not understand, please ask as it is your responsibility.
- To answer all questions truthfully and to the best of your knowledge.
- To provide complete and accurate information to the best of your ability.
- To follow any pre-operative written or oral instructions provided to you.
- To report immediately any changes in your condition or circumstances surrounding your condition.
- To arrange a responsible person to transport you to your surgery.

Post-Op Patient Obligations:

- Attending all post-op visits as scheduled.
- To ensure that a responsible person is available to assist you after your surgery.
- To follow all of your provider's instructions and take your medications as directed
- To rest so as to give your body a chance to recover properly.
- To drink plenty of water.
- To take your temperature regularly, and report elevations per instructions provided.
- To arrange for a responsible person to transport you home after your surgery.

Financial Obligations:

Patient portion of surgeries are usually paid in full prior to the surgical procedure here at SAOS. If you cancel a surgery for non-medical reasons, you may be subject to a cancellation fee of up to \$500.

By signing below, you fully understand and acknowledge your responsibility under this policy.

Patient Signature: _____

Date: _____

Printed Patient Name: _____