

# OFFICE AND BILLING POLICIES

## CLIENT AGREEMENT

Dear new Safeguard Radiology client:

Welcome to the SAFEGUARD RADIOLOGY family of clients! We are glad you are here and appreciate your trust in us! We look forward to becoming your partner in diagnostic confidence! Please review the policies below and sign and date this form. You may email it back to us at [info@safeguardradiology.com](mailto:info@safeguardradiology.com) or fax to **502-427-7797** prior to submitting images for interpretation.

### PROCEDURE POLICIES

- 1- The referring office is required to submit **(1) LARARAD report request for each patient** whose images are being sent for interpretation. Safeguard will not read images without a report request submitted on LARARAD.
- 2- **All images sent to SAFEGUARD will be read** unless instructed otherwise. Fill out the COMMENTS SECTION in the LARARAD patient report request with notes or specific instructions to us regarding the reading of that patients' images.
- 3- Hard film x-rays mailed to us are not received daily. Reports on hard films may take up to 10 days to be generated and received on LARARAD. Call our office for STAT submission of hard film x-rays.
- 4- Images of considerably subpar quality may not be able to be interpreted. The return postage of subpar hard films will be billed to the referring physician.

### BILLING POLICIES

- 1- **SAFEGUARD RADIOLOGY does not bill patient health insurance or patients directly.** Call our office to receive our **CASH FEE SCALE**. We will bill the referring doctor monthly on or near the first of each month for the previous month's services unless instructed otherwise. Invoices are sent from our office using QuickBooks online and will be emailed to the email on file.
- 2- **Invoices are due upon receipt. Invoices may be paid by credit card or ACH bank withdrawal through the invoice link emailed to you. You may also choose the AUTOPAY option if you have a credit card authorization on file. We also accept check payments mailed to our office.** Please make checks to: SAFEGUARD RADIOLOGY INTERPRETATION SERVICES and mail to: SAFEGUARD RADIOLOGY, 9462 Brownsboro Rd., #268, Louisville, KY 40241.
- 3- **MRI OR CT INTERPRETATION requires prepayment of services.** We require a credit card authorization to be on file for payment prior to this service. We can bill MRI/CT interpretation for personal injury cases.
- 4- **For personal injury cases, SAFEGUARD can bill the patient's Auto/Med pay or PIP or attorney for primary and secondary interpretations.** Primary PI interpretation requests require the referring office to bill CPT codes with -TC modifier for all studies sent for interpretation. We can accept an attorney's lien and await payment. The claim(s) information must be complete and accurate. A credit card authorization and AUTOPAY agreement is required to be on file. Any personal injury interpretations not paid by Auto/Med pay/PIP or attorney within 4 months of our claim submission will be AUTOPAY charged to the referring doctor's card on file at \$75 per patient.
- 5- **Billing of second opinion interpretations for personal injury patients requires medical necessity** to be met. The SECOND OPINION FORM must be completed and submitted for second opinion interpretation requests.

By Signing below, I acknowledge and agree to the office and billing policies noted above.

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Printed Name and Signature of Referring Physician/Responsible Party

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Date Signed