



Dear Patient,

Compliance with La. R.S. 22:1880 requires the following Balance Billing Disclosure notice to be provided to you at registration:

“Professional services rendered by independent healthcare professionals are not part of the Ambulatory Surgery Center bill. These services will be billed to the patient separately. Please understand that physicians or other healthcare professionals may be called upon to provide care or services to you on your behalf, but you may not actually see, or be examined by, all physicians or healthcare professionals participating in your care; for example, you may not see physicians providing radiology, pathology, and EKG interpretation. In many instances, there will be a separate charge for professional services rendered by physicians to you or on your behalf, and you will receive a bill for these professional services that is separate from the bill for Ambulatory Surgery Center services. These independent healthcare professionals may not participate in your health plan and you may be responsible for payment of all or part of the fees for the services provided by these physicians who have provided out-of-network services, in addition to applicable amounts due for copayments, coinsurance, deductibles, and non-covered services.”

“We encourage you to contact your health plan to determine whether the independent healthcare professionals are participating with your health plan. In order to obtain the most accurate and up-to-date information about in-network and out-of-network independent healthcare professionals, please contact the customer service number of your health plan or visit its website. Your health plan is the primary source of information on its provider network and benefits. To help you determine whether the independent healthcare professionals who provide services at this facility are participating with your health plan, this healthcare facility has provided you with a complete list of the names and contact information for each individual or group.”

If you have any questions regarding this notice please let us know.

Thank you and we appreciate your business,

West Bank Surgery Center

---

Signature

---

Date

**3704 Lapalco Blvd  
Harvey, LA 70058  
Phone# 504-207-5320  
Fax# 504-207-5328**