

Patient Financial Policy Agreement

We appreciate your business and make every effort to make your visits here financially unproblematic and affordable. We hope these guidelines help to clear up any misunderstandings and answer any questions you may have regarding our billing policy. Unfortunately, we are unable to change a billing code or visit type after the visit is over, so if your insurance only pays for a specific type of visit you must let your provider know beforehand so they can conduct the visit accordingly and appropriately for proper billing.

Copays

It is patient responsibility to present insurance card(s) at each visit. All copayments and past balances are due and must be received at the time of service. We will then bill the insurance company. If the deductible has not been met, we require payment in full at time of service.

*****If you pay your bill in full at time of service, you are eligible for a 20% discount*****

Insurance Plans

Once payment is received from the insurance company, the patient will then be billed for the remaining balance on the account. Payment of this balance must be made within **30 business days** of the notification. If **NO** payment is made or received within **90 business days**, the account will go to a collections agency and you will be discharged from the practice.

Self-Pay Accounts

Self-Pay accounts are patients who do not have insurance. Payment in full is required at the time of service for all services including procedures.

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Extended Payment Arrangements

Patients that have a balance owed that they are unable to pay in full may contact our billing department and make arrangements for scheduled payments. Once a patient commits to making payments on a scheduled plan, if the patient defaults on those payments they will be sent to a collection agency and will be terminated from our practice.

Patient Refunds

All patient refunds will be kept as a credit on the account to go towards their next visit unless a refund is requested or initiated by the patient. The following criteria must be met prior to issuing a patient refund:

- The patient has not been seen in the office for 90 days.
- There is no outstanding insurance claims on the account
- There are no outstanding patient balances on the account.

Divorce Cases

In cases of divorce, the individual who received the care is responsible for payment of copays and coinsurance balances at the time of service. We will not bill a divorced spouse for the patients' insurance.

Child Custody Cases

The parent with primary custody is usually the parent with whom the child lives with, and who usually brings the child to the clinic for care. The custodial parent is responsible for payment at the time of service whether the account is considered self-pay or insurance. If the noncustodial parent carries the insurance on the child, the clinic will bill that insurance company. The clinic does not get involved with divorce specifics. It is the parents obligation to work out an agreement themselves or through the court system.

This financial policy helps the clinic to provide quality care to our valued patients. If you have any questions or need clarification on any of the above policies, please feel free to contact us.

Patient Signature

Date