

Our Financial Policy

We are dedicated to providing the best possible care and customer service for you.
We want you to completely understand our financial policies. Updated for 2018.

1. **Insurance** It is important that you present your most recent insurance card(s) at your visit. We contract with many insurance plans, however we may not be able to accept every product listed with those plans. Our office verifies eligibility and as a courtesy will tell you about issues that we notice, but some plans limit the information that we can view. To understand your coverage completely, please refer to your plan summary or check with your health plan's member service dept. and ask what your specific (copayment, deductible and coinsurance) amounts that you are responsible for covering. Verify that our doctors are part of your plan's network. If not, you may be responsible for out-of-network fees.
2. **Referrals** If we have informed you that you need a referral, kindly call your PCP's office and request one so you are not billed for the service. Be aware that some plans will back date a referral, but some will not and you may need to reschedule your visit or make payment at the time of visit if the referral was not issued. Please ask if you need our assistance- we are on your side! We can sometimes work out issues the same day. At times an out-of-plan referral may be allowed so always ask your plan if this is an option.
3. **Payments** Your co-payment is due at the time of your visit. We accept cash, check, health care spending, debit and credit cards (in office and by phone). A deposit for 1/3 of the amount of your service estimate is due at the time of service for high deductible plans. If your health plan does not pay the practice within 60 days, we will look to you for assistance with resolution and/or payment. We will do our best to help you resolve claim issues if requested promptly. We are so grateful to our patients who handle their accounts responsibly! Thank you!!
4. **Payment Plans** can be discussed and set up before your appointment for your convenience or arranged at the time of your visit before you leave. Many patients find automatic payments an easier way of dealing with bills. An estimate for services will be provided. Part of your co-insurance or deductible amounts may be deferred until claim processing when setting up payment agreements. Other special arrangements can be made if needed- we know the cost to patients is higher these days and are happy to work with you.
[Credit card and ACH bank information is encrypted and stored securely off-site in keeping with Payment Card Industry Compliance regulations.]
4. **Fees** A billing fee of \$15 per invoice is charged for unpaid copayments and also accounts with no response or payment after 45 days of issue date. A \$40 fee for a returned check or refused credit card transaction will also be charged to you. All collection agency fees are your responsibility. Refusal to pay a patient responsibility, broken payment promises and reversed credit payments may result in prompt collection account activity and dismissal from the practice. Contacting our billing staff immediately if you believe there was an error can help avoid unnecessary fees. We prefer to work with you!
5. **Non-Covered Services** In the event your insurance plan determines a service to be %not covered,+you will be responsible for the complete charge. All procedures are considered covered *unless they lack medical necessity or your health plan excludes allergy services.* We will tell you that a service may not be covered before a service is done. *[Example: allergy testing for curiosity—no medical symptoms.]* If a service is charged to your deductible, it is %covered+and a contract discount will be applied to the service.