



## FINANCIAL ARRANGEMENTS AND INSURANCE

We are committed to providing you with the best possible care. We invite you to discuss any issues regarding our services and policies. If you have insurance, we are anxious to help you receive your maximum allowable benefits. It is important to note that our relationship is with you. YOUR INSURANCE POLICY IS A CONTRACT BETWEEN YOU AND YOUR INSURANCE COMPANY, not between us and your insurance company.

It is our goal to help you to understand the policies and requirements of our office. We participate with many insurance companies, and these companies offer different lines of coverage – PPOs, HMOs and Traditional coverage. We do participate with MEDICARE, but NOT Medicaid. If you have an HMO type plan, you must obtain a referral from your primary care physician (PCP). The referral needs to be faxed to our office prior to your appointment. Please be aware of the expiration of this referral, as you will need to obtain another one from your PCP before your next visit.

We are very happy to submit a claim to your insurance company for your visit to our office. However, many insurance plans have higher out-of-pocket expenses including deductibles and copayments that are the patient's responsibility. We would ask that you pay the balance you may owe us either as soon as you receive a statement from us, or at your next visit to our office – whichever comes first. We accept CHECKS, CASH, VISA, MASTERCARD, AND DISCOVER CREDIT AND DEBIT CARDS. If your insurance claim remains unpaid after 30 days, you may be asked by us to contact them directly regarding the delay in payment.

Please be aware of your own policy benefits. We are aware of general coverages, but if there are specifics to your plan, we will not know unless a claim is submitted for you. If the insurance company does not cover the services for any reason, it is your responsibility to pay us promptly for any services rendered. If a payment to us becomes 30 days past due it is considered delinquent. Delinquent accounts will be charged a monthly statement fee of \$5.

We may sometimes use an OUTSIDE LABORATORY to perform certain tests. Lab tests are not included in the physician's fees. You are responsible for all costs incurred by the lab which are not covered by your insurance, and you will be billed separately by them. Please contact the laboratory directly with any questions you may have.

We understand that temporary financial problems may affect timely payment of your account. If this arises, we encourage you to contact us promptly for assistance in management of your account.

If you have any questions about the above information please do not hesitate to ask. We are here to assist you.

NAME \_\_\_\_\_

DATE \_\_\_\_\_