

Patient Financial Policy

Provided via mail to all new patients and is available at check in / check out

Thank you for taking the time to familiarize yourself with our financial policy. Please feel free to discuss any questions or concerns with our Patient Financial Representatives at 232-3210.

- All patients must provide current information at every visit before seeing the provider.
- We ask that all patients take responsibility for understanding their insurance coverage and any associated co-payments or deductibles.
- Our practice is committed to providing the best treatment for our patients and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.
- We participate with numerous insurance plans. We request that all co-insurance and unmet deductible payments are paid at the time of service.
- We participate with numerous insurance plans. **ALL CO-PAYMENTS MUST BE PAID AT THE TIME OF SERVICE AS REQUIRED BY YOUR INSURANCE CONTRACT.** A \$15.00 service charge will be added to your statement if payment is not received on the day of service.
- Any patient who is on a cash pay basis is required to make full payment at the time of the visit unless other arrangements have been made **PRIOR** to your appointment.
- When providing care to minors, the parent or guardian who is accompanying the minor is required to make full payment at the time of the visit. If the minor will not be accompanied to the appointment, please make arrangements to assure payment will be made at the time of the visit.
- If there is a balance due from a visit, a bill will be sent out. If that balance is not paid in full within 30 days, a 1.5% service charge will be added to your account based on the outstanding balance.
- **We kindly ask for 24 hour notice if you are unable to keep an appointment.** Please help us serve you and our other patients better by keeping scheduled appointments.
- We accept cash, check, debit cards, Visa and MasterCard, American Express and Discover.
- Returned checks are subject to a \$25.00 charge and may terminate your privilege to pay using a check in the future.