

Patient and Billing Policy

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We are committed to providing you with the best possible care. If you have medical insurance, we are anxious to help you receive your maximum allowable benefits. In order to do this, we need your assistance and your understanding of our payment and billing policy.

Insurance Billing

Co-payments are due at the time of the office visit. A \$10.00 billing fee may be applied to your account if arrangements have not been made ahead of time.

We will be happy to submit claims to your insurance company if you have provided us with the necessary insurance information. We require a copy of your insurance card that lists the name of the insurance company, address, telephone number, and policy/group numbers. It is YOUR responsibility to bring a current referral from your primary care physician or a completed claim form for each visit if this is required by your insurance company.

While the filing of insurance claims is a courtesy we extend to our patients, all charges are your responsibility, regardless of what your insurance company pays, your account is **due in full within 90 days.** Balances over 60 days are subject to a monthly billing fee. It is important that you bring your current Medicaid card to every office visit.

Private Pay

Signature

Payment is due in full at the time of the office visit.

Non-emergency/Cosmetic procedures require full payment 10 business days prior to surgery. Deposits for surgery are non refundable.

account.	If such problems	s arise, we enco	urage you to c	ontact us pron	nptly for
assistanc	e in the manage	ment of your acc	count.		

Date

We realize that temporary financial problems may affect timely payment on your