

UROLOGY SURGEONS FINANCIAL POLICY

Thank you for choosing our practice. We value the opportunity to help you through your urologic problem and look forward to engaging you as we make diagnostic and treatment decisions together. We hope that you will recognize that our financial policy is a necessary part of assuring the resources required to maintain this health care service for our patients and for the community.

Charges for medical services are due and payable at the time services are rendered. Charges for medical care provided by this medical practice will be billed through our office and should not be confused with charges for medical care provided by the hospital. We accept Visa, MasterCard, Discover and American Express as well as personal checks, money orders, debit cards and cash. There is a \$2.75 convenience fee for credit card payments made online or over the phone. **Broken Appointments:** A specific amount of time is reserved especially for you and we strongly encourage all patients to keep their appointments. **If you must change your appointment, we kindly ask for at least 24-hour notice to avoid a \$50.00 fee.**

We bill your insurance company for your health care costs. It is extremely important that we obtain complete information about your primary and supplemental insurance companies, including phone numbers, addresses and a copy of your insurance card(s).

Preauthorization for second surgical opinions are becoming a requirement for many insurance companies. We insist that when a surgery or procedure (MRI scans, CT scans, outpatient surgery) is scheduled, that you contact your insurance company immediately to determine what, if any, preauthorization requirements the insurance company deems necessary before the surgery or procedure. You will need to initiate the communication between you and the insurance company. We cannot stress enough how important it is for you to be aware of your insurance company's requirements on office visits, procedures, hospitalization, and surgery. Your insurance company can deny payment or drastically reduce payment for services that are provided if their requirements are not met.

If you have health insurance, this is an agreement between you and your insurance company. Your doctor's bill, on the other hand, is an agreement between you and your doctor. You are responsible for the payment of your doctor's bill regardless of the status of your insurance claim. If unusual circumstances should make it impossible for you to meet our payment terms, we invite you to call or personally discuss the matter with our billing specialist. This will avoid misunderstandings and enable you to keep your account in good standing. Accounts 60 days past due may be referred to a collection agency. Your account with us is then considered terminated.

Insurance Participation: We participate with most insurance companies and will submit charges directly to the insurance company for payment of services provided. You can call our office to see if we participate with your insurance company. You will be asked to pay any co-pays at the time of service. Some services may be deemed non-covered or medically unnecessary by your insurance company. If so, you are directly responsible for the charges incurred. Any balance remaining after the insurance payment is made is due to our office within 30 days.

Non-Participation with Insurance: Patients, who have policies with insurance companies we do not contract with, will be responsible for payment of all office visits at the time service is rendered. Some non-contracted insurance companies will pay an out of network benefit to our office for services. However, you will be responsible for the remaining balance. If you are scheduled to undergo surgery by one of our physicians, you can ask our billing specialist for a surgery estimate. This estimate can be used to contact your insurance company to determine their level of reimbursement and to initiate the preauthorization process. We can make payment arrangements over a six-month period on patient balances. however, we accept Visa, MasterCard, Discover and American Express.

Cash Patients: Payment will be expected at the time of service. A minimum of \$250 for the initial consultation is expected at the time of service. Due to the nature of the visit, there may be additional charges.

Patient Responsibility: Any unpaid balances over 60 days may be referred to a collection agency. Your account with us is then considered terminated. All returned checks will be subject to a \$35.00 fee and applied to the account balance. If you have any questions regarding your bill at any time, you may contact our billing specialist at (616) 949-4340.

Signature

Date