



FINANCIAL POLICY 2022

Thank you for choosing us as your healthcare provider. Our team of physicians and healthcare professionals are committed to fulfilling our mission to provide a continuum of medical services to our patients. To support this goal, we have created this financial policy to communicate important financial aspects about our practice. Please read this policy thoroughly before your visit and contact our Billing Office should you have questions or concerns. Our Billing Office is available Monday – Thursday from 8:00 am to 5:00 pm, and you may reach them by dialing 843-572-4840. Additionally, any uninsured, underinsured and/or indigent patients who have limited or inadequate resources to pay for health care services rendered at any of our clinic locations may be eligible for financial assistance through payment options and our Financial Assistance Program.

Arriving for Your Visit. To provide exceptional care to every patient, we have adopted guidelines for late arrivals, cancellations, and patients who fail to show for their appointments. We ask new patients to arrive 30 minutes prior to their scheduled appointment. Should you arrive more than 15 minutes late, you will have the option to reschedule your appointment or to see if the provider can see you as a “work in” as the schedule allows. If you do not arrive for your appointment, cancel with less than 48 hours, a \$50 charge can be assessed to your account. We reserve the right to discharge patients who arrive late, cancel last minute, and/or now show for appointments three times in a calendar year.

Referrals and Prior Authorizations. It is your responsibility to obtain necessary referrals from your insurance company. However, we will obtain any of the required prior authorizations for treatments or services provided by our practice. In some instances, we may choose to refer you to GoodRx as necessary to help reduce your out-of-pocket costs in lieu of processing a prior authorization. Please keep in mind, prior authorizations can take several days to several weeks depending on your insurance requirements.

Insurance and Billing. We are pleased to bill your primary and secondary health care plans on your behalf. You are responsible for your co-pay and any co-insurance related to your deductible at check-in for your appointment, as well as any remaining balance after insurance payments. Ancillary services rendered in our clinic, like ultrasound, labs, and/or x-ray, will be billed to you after your visit. We accept most insurance policies, and do our best to verify your information. However, your policy is a contract between you and your insurance company, ultimately it is your responsibility to understand your coverage under your plan. **As a private practice, we do not accept or bill Medicaid.**

Insurance Errors. If you believe your insurance company denied or processed a claim in error, please call us immediately. If your insurance company requests additional information from you, it is important to comply with their requests in a timely manner. If insurance does not pay a claim within 45 days of submission, the outstanding balance is billed to the patient and becomes the patient's responsibility. Should you pay more than what you are responsible, the overpayment will be applied as a credit on the account. You may decide to use the credit at your next visit or opt to receive a refund check.

Paying your bill. For your convenience, we accept multiple forms of payment, including personal check, money order, credit card, Care Credit and cash. Payment is accepted by phone, online, in person, and by mail. If we utilize lab processing through Quest Diagnostics or LabCorp, they will bill you directly for any outstanding or out-of-pocket balances. Please contact Quest Diagnostics 866-697-8378 or LabCorp at 800-764-4344.

Ability to Pay. Account balances should be paid in full by the statement due date. If you have circumstances that limit your ability to pay on your account balance and have exhausted other resources, please contact our Billing Office to discuss the Financial Assistance Program determination process. Patients are notified by mail if their account becomes Past Due. We do not allow patients to schedule appointments with past due balances and a hold may be placed on your account until payment arrangement are made. Please note that specific financial and other pertinent information may be necessary to support a patient's eligibility for assistance. Failed attempts to contact patients about their unpaid balances to establish payment arrangements may lead to collections and/or discharge from the practice.

Accounts in Default. We will attempt to bill and collect from patients who are responsible for all or part of the cost of services provided by our providers. After **90 days**, if you have not made a payment on a bill or established a payment plan, we will initiate pre-collections by sending the patient a pre-collections notice. If we fail to collect or arrange payment from the patient, the patient may receive a final notice to pay. If we decide it is unreasonable to try to collect balances, a certified letter discharging you from our practice will be sent, and the account will be referred to a collection agency.

Printed Name

Date Signed

Signature