



Financial Policy



Arthritis and Rheumatology of Georgia
A Division of Articularis Healthcare Group, Inc.

We 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 8:00am – 5:00pm, 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 around late arrivals, cancellations, and patients who fail to show for their appointments. We ask that every new patient arrive 15 minutes before their scheduled appointment time. Should you arrive more than 15 minutes late to your appointment, you will have the option to reschedule your appointment or have your physician see you as a “work in” appointment that day as the schedule allows. If you do not arrive for your appointment or if you cancel within 48 hours of your appointment, a \$50 charge may be applied to your account. We reserve the right to discharge patients who arrive late, cancel within of 48 hours of their visit, and/or no show for their appointments three times within a 12-month period.

Referrals and Prior Authorizations. It is your responsibility to obtain referrals for the services provided within our practice. However, we will obtain any of the required prior authorizations for treatments or services provided within our practice.

Insurance and Billing. We are pleased to bill your primary and secondary health care plans on your behalf. You are ultimately 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, lab, and/or x-ray, will be billed to you after your visit. Please contact your insurance company to verify we are an in-network provider. As the owner of the insurance policy, you are solely responsible for coverage policies under the plan and the accuracy of information on file.

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.

Insurance Errors continued. 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, and cash. Payment is accepted by phone, online, in person, and by mail. We also accept Care Credit, a third-party healthcare financing option, but balances must be paid at check-in and a zero-balance maintained. If we utilize lab processing through Quest Diagnostics, they will bill you directly for any outstanding out-of-pocket balances. Please contact Quest Diagnostics directly to discuss your bill at 866-MYQUEST (866-697-8378).

Credit Cards on File. Should you carry a balance after 30 days or are eligible for a payment plan, you must keep an active HSA and/or credit card on file. We do not have access to patients' credit/debit/HSA/bank information. Private financial information is stored and encrypted by a certified company that is compliant with all federal privacy laws, as well as the Payment Card Industry Data Security Standards (PCI DSS).

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 a member of the Billing Office to begin the Financial Assistance Program determination process. Holds may be placed on accounts without payment arrangements and future appointments may not be scheduled until past balances are fulfilled. 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 may 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 referred to a collections agency.

Signature of Patient / Legal Guardian	Date
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