

Dermatology Associates of Coastal Carolina

PATIENT FINANCIAL POLICY

MRN: _____

Patient Name: _____

Date of Birth: ____/____/____

Thank you for choosing Dermatology Associates of Coastal Carolina.

Our goal is to avoid any miscommunication or concerns patients may have regarding our Patient Financial Policy. Thus, we would like to share the following policies with you so that you understand your responsibility regarding the charges for the services rendered to you by our office. If you have any additional questions, do not hesitate to ask any member of our team.

We value the time we have set aside to see and treat you. If you are unable to keep your appointment, we ask that you give no less than a 24-hour cancellation notice. Late cancellations and no-shows are subject to an additional fee of \$50.00 dollars. We will do our best to accommodate you if you arrive more than 15 minutes past your scheduled appointment time.

Past due accounts must be settled before your next appointment. Feel free to contact our Billing Services Department at **252-497-3458** if you have any questions regarding your account.

We participate in Medicare and will consequently file your health insurance claim on your behalf with Medicare and Medigap carriers. If you do not have Medigap, or if you have a health insurance plan with which we do not participate, we will file your claim with your secondary/supplemental carrier. If we do not receive your payment within 60 days from the date in which we file your claim, you will be sent a bill and you will be responsible for any remaining balance.

CREDIT CARD ON FILE POLICY:

To help better assist our patients with the changes in healthcare we have implemented a policy requiring a credit card held on file effective 03/01/2020. Many families have chosen high deductible health plans to help reduce cost of monthly premiums. Insurance plan's deductibles and copayments are not always known to us at the time of your visit. This feature will allow a patient's credit card information to be stored in our secure financial database. By allowing our practice to store the information, receptionists can automatically collect copays at check in as well as collecting balances due after insurance has been filed and paid their portion.

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INSURANCE PLANS:

You must present your current and valid insurance card at the time of each visit.

If we participate (in-network) with your commercial insurance plan, we will submit your claim to your carrier for services rendered. We will submit your claim to both your primary, and if applicable, secondary insurance plans.

If we do not receive payment from your primary carrier within 60 days from the date in which we file your claim, you will be sent a bill and you will be responsible for any remaining balance

Credit on Account – If you have a credit on your account of \$25 or less, we will keep your credit on file. If your credit is over \$25, we will refund the applicable amount to you

You will be responsible at the time of service for the payment of:

- a. Annual deductibles and co-insurance
- b. Co-payments. We are required by contract to collect all co-payments in full prior to your visit.
- c. Charges in full for all non-covered services or Cosmetic Services.
- d. Out of Network insurance cost

If you are not filing insurance at your visit you will be **required** to have a credit card on file. We will collect \$200.00 at the time of check in and any remaining charges will be due at check out. It is possible that additional charges may accrue for office visits and pathology after your visit.

Your specimen/culture could be sent for interpretation to an outside laboratory. The insurance information provided to our office will be sent along with your specimen/culture, so they may submit their claim to your insurance carrier for you.

Your signature below signifies that you understand and accept our Patient Financial Policy and your responsibility regarding all charges incurred by you in our office.

Patient or Guardian's Signature

Relationship to Patient

____/____/____

Today's Date