



PATIENT FINANCIAL POLICY

(Please read carefully)

Welcome to our practice! Thank you for choosing us as your health care provider. In order to reduce confusion and misunderstanding between our patients and the practice, we have adopted the following financial policy. If you have any questions regarding this policy, please discuss them with our billing department. We are dedicated to providing the best possible care and service to you and regard your complete understanding of your financial responsibilities as an essential element of your care.

- Your health insurance policy is a contract between you and your insurance company. In many instances, the doctor is not involved. It is your responsibility to know the specifics of your insurance coverage and benefits.
- We have made prior arrangements with some health care plans to accept an assignment of benefits. Please call your insurance company prior to your appointment to determine if your physician is a participant in your plan. We will submit a claim to those plans for which we have a contractual agreement and will require you to pay your authorized co-payment and/co-insurance at the time of service. We will collect all co-payments and deductibles as soon as you arrive for your appointment. We accept checks, money orders, VISA, MasterCard, American Express or cash. We do not accept debit cards. It is your responsibility to be prepared to make your co-payment when you check in. If you are not able to make your co-payment, you will be asked to reschedule your appointment to a time when you are able to do so.
- If you have a health care plan that we do not have a contracting agreement with, we will prepare the claim for you on an unassigned basis. In this instance, our charges for your care and treatment for your initial visit will be due at the time of the service. We must emphasize that as Medical Care Providers, our relationship is with you, not with insurance companies, and insurance companies may calculate their reimbursement rates to you in a manner that may not fully cover your charges. It is important that you understand your health insurance policy and the coverage it provides.
- Please bring a current copy of your insurance card and current referral if required by your insurance to all of your appointments. Medicaid/Healthy Connections patients are required to bring a current copy of their card or if application is in progress, documentation from Medicaid that this will be a covered service. Healthy Connections patients also will need to bring their Healthy Connections referral or make arrangements to have it sent or faxed to our office from their Primary Care Physician **prior** to their visit. If proof of insurance is not provided, you will be expected to make payment in full at time of service.
- Please advise us of any change in address, phone number, or insurance that may occur.

For the following items, please indicate that you understand by **printing your initials**:

_____ In order to provide the best possible service and availability to all our patients, please call **as soon as possible** if you know you will need to reschedule your appointment.

_____ Not all health plans are the same nor do they all cover the same services and supplies. In the event that your health plan determines a service to be a "**non-covered service**", you will be responsible for the complete charge for that particular service. Payment is due upon receipt of a statement from our billing office. If you need to make arrangements for a payment plan, please contact our Business Office.

_____ There will be a \$20.00 charge for insufficient fund checks issued.

I have read and understand this financial policy and agree to be bound by its terms. I also understand that such terms may be amended from time to time by West Idaho Orthopedics and Sports Medicine.

Signature

Date

Print