

## INNOVATIVE DERMATOLOGY OFFICE POLICIES

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 this office. In order to establish optimal relations with our patients and avoid misunderstanding and confusion regarding our payment policies, our staff is trained to consistently inform you of the financial payment policies of this office. Payment is required for all services at the time they are rendered unless you are in a prepaid plan in which we participate. For those patients in a prepaid plan applicable co-payments and deductibles will be collected. We are currently contracted with many PPO insurance carriers including: Aetna, Blue Cross, Cigna, Humana, Medicare, PHCS, Unicare, and United Healthcare.

- The patient understands that all charges for services in this office are ultimately his/her responsibility.
- If we participate (are contracted) with a commercial insurance plan under which you are covered, we will bill the carrier for all charges for services rendered. You will be responsible for the annual deductibles, co-payments, coinsurances, and charges for non-covered or cosmetic services. In the event that we are not aware of a charge that is not covered by your plan, you will be billed for the balance after we obtain an explanation of benefits from your insurance carrier.
- Office visits: If your co-pay is not indicated on your insurance card, you will be asked to pay 20% of the charge. (BCBS not included) If your payment results in an overpayment after your insurance paid its portion of the charge, a refund will be issued to you.
- Refill policy: Patients are given enough medication to sustain them until their next visit. A follow-up visit is required for prescriptions that were written over a year ago. Depending on the situation the patients may be given a one time refill to carry them over until their follow-up visit.
- Cancellation policy: Patients are required to cancel 24 hours prior to their appointment. As a courtesy the office attempts to remind you of your appointment, but ultimately it is the patients' responsibility to remember their scheduled appointment. The fee for late cancellations (less than 24 hours) or a missed appointment is \$30.00 for a routine visit, and \$50.00 for a surgical appointment.
- Transfer of records charges to patient or another physician: \$15.00-\$25.00 for small charts and \$40.00-\$50.00 for charts over 15 pages. Payment is due before the chart can be copied and sent.
- Co-pay rebilling charges: As many patients are presenting old insurance cards displaying incorrect co-pay amounts, there will be a service charge if \$20.00 of additional billing is required, due to the fact that patient co-pay wasn't paid in full at the time of your visit. Please make sure your insurance card is current.
- Insurance rebilling charge: If your insurance claim requires a second submission because of incorrect insurance policy information, there will be an additional \$25.00 charge which will be the responsibility of the patient, and not the insurance company. If the correct insurance information is not obtained before the claim filing deadline of your insurance company, the patient will be responsible for the entire cost of the visit.
- Patients will be subject to a \$30.00 processing fee for returned checks.
- There will be a service charge of \$30.00 if your account is turned over to collections. For patient balances over \$75.00 the service charge is \$40.00.

We hope you will understand the necessity for implementing these office policies. By signing below, the patient acknowledges the notification.

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Patient/Guardian Signature

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Date