

Parkcrest Orthopedics Financial Policy

Dear Patient:

Please review each section to acknowledge that you have read and understand our office policies. These guidelines are in place to provide our patients with the highest level of care and services.

-If we participate in your insurance, you are required to pay for all co-payments at the time of your visit. In the event that there is a remaining balance due after your claim processes, you will be billed for the balance. Any FMLA paperwork has a \$25.00 fee and payment is expected at the time of drop off or before faxing in your paperwork to your employer.

-If our office is not filing insurance for you, a payment of \$180.00 must be paid at your first visit and then the remaining balance will be billed to you. If needed, a payment plan can be set up with our billing department after that first payment is made with our office.

-It is your responsibility to know how your insurance policy works. We are not responsible for notifying you that a referral might be needed for an appointment. Unfortunately, all plans are different and we cannot know all of the details of every plan. Parkcrest Orthopedics does not accept any third-party liability insurance nor will they file any claims. It is your responsibility to file any claims arising from any personal injury or accident claims.

- We may ask to see your insurance card at each visit. We do this so we can bill your insurance company correctly. We need to review the card even if it has not changed. If you do not have your most updated insurance card and the charges for your visit are denied by your insurance company, you will be financially responsible for the balance for that visit.

-We ask for a 24 hour cancellation notice. We understand that some emergencies arise and are unavoidable. Our goal is to offer your appointment to someone who needs it and we cannot do this if a cancellation is not done in a timely manner. If you miss your appointment without notification a \$25.00 fee will be applied to your account.

- We accept cash, check, Visa, Mastercard, Discover and American Express. We will be charging a \$25.00 fee for any and all checks returned by your bank.

- As a courtesy, we try to confirm your upcoming appointments by a phone call and/or email. Circumstances do not always allow us to reach you. Therefore, please do not count on a call from us to remind you of your appointment. If you have questions about a date or time for your appointment, please call our office at 314-997-1777.

-In the event of non-payment by your insurance company and your balance is not paid within 90 days and other arrangements have not been made, the balance could be turned over to our collection agency and a fee of 25% of the total balance will be added to your account.

Your signature below signifies your understanding and willingness to comply with these policies.

Print Name: _____ Date of Birth: _____

Signature: _____ Date: _____