

Practice Financial Policy

Thank you for choosing Endocrine & Metabolic Health Services, LLC, as your health care provider. We are committed to building a successful physician-patient relationship, and the success of your medical treatment and care. Your understanding of our Practice Financial Policy and payment for services are important parts of this relationship. For your convenience, this document discusses a few commonly asked financial policy questions. If you need further information or assistance about any of these policies, please ask to speak with our Practice Manager.

When are payments due?

You need to pay for copayments, deductibles, and any past-due balances **when you check in**, unless you've made other arrangements with our billing coordinator.

How may I pay?

You can pay with **cash, check, or credit card (Visa, Mastercard, Discover and American express)**. We only accept post-dated checks if they are part of an approved payment plan.

Do I need a referral or pre-authorization?

If your insurance plan requires a referral authorization from your primary care physician or a pre-authorization from your insurance, **you will need to contact your primary care physician or insurance company to be sure it has been obtained**. If we have yet to receive authorization prior to your appointment time, we will reschedule. Failure to obtain the referral or preauthorization may result in a lower or no payment from the insurance company, and the balance will become the patient's responsibility.

Will you bill my insurance?

Insurance is a contract between you and your insurance company. In most cases, we are not a party to this contract. We will bill your primary insurance company on your behalf as a courtesy to you. To properly bill your insurance company, we require that you disclose all insurance information, including primary and secondary insurance, as well as any change of insurance information.

It is your responsibility to notify our office promptly of any patient information changes (ie, address, name, insurance information) to facilitate appropriate billing for the services rendered to you. Failure to provide complete and accurate insurance information may result in the entire bill being categorized as a patient's responsibility.

Although we may estimate what your insurance company may pay, it is the insurance company that makes the final determination of your eligibility and benefits. If your insurance company is not contracted with us, you agree to pay any portion of the charges not covered by insurance, including but not limited to those charges above the usual and customary allowance. If we are out of network for your insurance company and your insurance pays you directly, you are responsible for payment and agree to forward the payment to us immediately.



Which plans do you contract with?

Endocrine & Metabolic Health Services, LLC, is actively working to get credentialed with insurance companies. For the most current list of accepted insurance plans, please check with our office. However, it is a good idea for you to contact your insurance company prior to your appointment and verify if we are a participating provider as per your plan.

What if my plan does not contract with you?

If we are not a provider under your insurance plan, you will be responsible for payment in full at the time of service.

What is my financial responsibility for services?

It is your responsibility to verify that the physicians and the practice where you are seeking treatment are listed as authorized providers under your insurance plan. Your employer or insurance company should be able to provide a current provider listing.

If you are unsure whether a service is covered by your plan, ultimately, it is your responsibility to call your insurance company to determine what your schedule of benefits allows, if a deductible applies, and your potential financial responsibility.

What if I don't have insurance?

Self-pay accounts are for patients who don't have insurance, whose insurance we don't accept, or who haven't provided their insurance card. This also applies to liability cases. We don't accept attorney letters or future payments. It's up to you to check if we accept your insurance. If there's a mix-up, you'll be considered self-pay until proven otherwise. **Self-pay patients need to pay in full before receiving services.** Our goal is to give you the best care at a fair cost, not to cause financial problems.

I received a bill even though I have secondary insurance.

Having secondary insurance does not necessarily mean that your services are 100% covered. Secondary insurance policies typically pay according to a coordination of benefits with the primary insurance.

What if I have billing or insurance questions?

Endocrine & Metabolic Health Services, LLC, is supported by a staff of dedicated professionals. Our billing team can assist with most financial questions and help relieve the patient/caregiver of burdensome paperwork. Please ask if you have any questions about our fees, our policies, or your responsibilities.

I received more than one bill for my service.

Please note that Endocrine & Metabolic Health Services, LLC, only bills for services rendered by our clinical team during the Visit. Sometimes, insurance companies take time to update deductibles and co-pays, which can result in you being billed twice for the same service. If you believe you have been accidentally billed twice for the same service, please get in touch with our office for clarification or resolution.



Do you bill other third parties?

We do not bill third parties for services rendered to you. Our relationship is with you and not with the third-party liability insurer or policy carrier (eg, auto or homeowner). It is your responsibility to seek reimbursement from them. You will be asked to pay in full for the services we provide you. All formalities required by your insurer and the third party should be promptly completed by you.

What if my insurance pays late?

As a courtesy to you, we bill your insurance company for services on your behalf. If any insurance company fails to process payment for services within 45 days from the date of the claim submission, the total balance will be determined to be the patient's responsibility.

Will I receive statements or bills?

It is our office policy that all accounts with pending balances be sent two statements, each one month apart. If payment is not made on the account, a single phone call will be made to try and make payment arrangements. Accounts with unpaid balances for 90 calendar days or more will be sent to an external collection agency or attorney for collection. Unpaid bills can also lead to possible discharge from the practice.

In the event an account is turned over for collections, the person financially responsible for the account will be responsible for the collections costs, including attorney fees and court costs.

Regardless of any personal arrangements that a patient might have outside of our office if you are 18 years old or older and receiving treatment, you are ultimately responsible for payment of the service. Our office will not bill any other personal party.

Do you refer unpaid bills to collection agencies?

If a patient cannot pay the balance on their account according to the financial policy will be referred to an outside collection agency or an attorney for further action.

Do you charge a penalty for returned payments?

Any charges incurred by the practice collecting balances owed to us during the collection process may be charged to the patient. **Returned checks, credit card chargebacks, or returned payments will attract a minimum \$35 penalty in addition to the balance owed.** Accounts with returned payments will be expected to make payments via cash, money order, or cashier's checks only.

Can you waive my copay?

By Law we cannot waive deductibles, coinsurances, or copays that are required by your insurance. This is a violation of insurance rules.

What if I don't pay my bill?

Patients who do not make payment arrangements risk being dismissed from the practice. Endocrine & Metabolic Health services, LLC reserves the right to dismiss patients for delinquent financial accounts on personal balances. If dismissed, medical care will not be withheld for a medical emergency for thirty days from date of dismissal.



Do you charge for completing forms?

Completing disability forms, FMLA forms, and other requested supplemental insurance forms requires time away from patient care and day-to-day business operations. **A prepayment of \$15.00 per form is required.** Please understand that to complete forms, your medical record must be reviewed, forms completed and signed by the physician, and copied into your medical record. Some of these forms can be quite complicated and tedious to fill out. Please provide us with pertinent information, especially dates of disability and return to work. We request that you allow 5 business days for this process.

Do you charge for copies of medical records?

Patients requesting copies of their medical records will not be charged a fee.

Attorneys and Insurance companies requesting medical records will be charged a \$15 fee plus postage and these fees:

- \$0.25 per page - under 100 pages
- \$0.10 per page - over 100 pages
- \$15 for an itemized bill

Expedited requests will be charged a special handling fee.

Records requested via electronic media (flash drives, CDs, DVDs, etc.) will be charged an additional \$10 device fee.

What if I missed my appointment to see the physician?

We understand that on rare occasions, issues may arise, causing you to miss your appointment when you cannot notify our office before your appointment. Should you experience any unforeseen circumstance that causes you to miss your appointment, please call our office at least 48 hours prior to having it rescheduled.

We respect our patient's valuable time and we request the same courtesy from our patients. Please extend this courtesy should you need to cancel and/or reschedule your appointment. **We reserve the right to charge \$25 for regular appointments for canceled or broken without advance notice of 2 business days**





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