

## **Advanced Dermatology & Skin Surgery - Financial Policies**

### **Fees, Payment Policy and Insurance**

For each visit to our office, we will ask you to provide the information needed to verify your insurance coverage and file your insurance claim. If you are unable to provide adequate insurance information, we will require that you pay in full for services rendered at the time of the visit. We participate with many insurance carriers and it is your responsibility to insure that we participate with your particular plan. Because your insurance policy is a contract between you and your insurance company, it is your responsibility to know and understand your plan's requirements and policies regarding co-payments, co-insurance, deductibles, and benefits. Should your insurance carrier deny a claim, we will make a reasonable attempt to help you resolve the disputed issues. In the event your health plan determines a service to be "not covered"; you will be responsible for the complete charge. In that event we will bill you, and payment is due upon receipt of the statement. Please keep copies of all billing information so that you can follow-up with claims with your insurance company if it becomes necessary. If your insurance carrier has not paid in FULL within 45 days the balance due may become your responsibility.

### **Surgery, Procedure and Office Visit Fees**

Depending on your insurance plan, a deposit may be required to schedule certain procedures with the balance due in full at the time the procedure is performed. Deductibles (including HSA plan deductibles), and coinsurance are due at the time that medical services are rendered. Prior balances and copayments may be collected at check-in. All past due balances are required to be paid in full before new services are rendered.

If an overpayment occurs, your account will be credited, you may either leave that amount on your account as a credit or request a refund providing there is no outstanding balance owed on your account. Please allow 10-14 business days for refunds to be processed and mailed to you.

### **Lab Billing**

If a biopsy is performed please be aware of the diagnosis notification and billing process: Advanced Dermatology is pleased to be able to have a dermatopathology lab and a qualified dermatopathologist as part of our practice. This enhances the care that we are able to provide to you and simplifies the billing process. Advanced Dermatology will file an insurance claim for each biopsy or excision processed in our on-site lab. These services will be billed under the names of the laboratory physicians, Dr. Zivony and Dr. Swick, for the portion of services they provide to process your biopsy. Once insurance processes your claim, if there is a patient balance, you will receive a statement from Advanced Dermatology. You will see Drs. Zivony and Swick as billing providers on your statement for the services they provided in the lab even if you did not see these providers during your recent office visit.

### **Medicaid**

Medicaid patients must present a current Medicaid card and be prepared to pay any applicable co-payments. If you do not bring your current Medicaid card and applicable co-payment, your appointment will be rescheduled.

### **Usual and Customary Rates**

Our practice is committed to providing the best treatment for our patients, and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determinate of usual and customary rates.

### **Minor patients**

A parent or guardian must accompany a patient under the age of 18 and are responsible for consent of treatment and full payment. Unaccompanied minors will not be treated.

### **Missed Appointments**

Missed appointments represent a cost to us, to you and to other patients who could have been seen in the time set aside for you. Cancellations must be made 24 hours in advance of the scheduled appointment or we reserve the right to assess a fee.

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### **Medical Records Fee**

The authorization for release of medical records will be provided to you upon request. A signed authorization is needed to release medical records and a new release is required every 12 months. **Please allow 72 hours to process medical record requests after we have received your signed form.** In some instances, there could be a fee required for the retrieval of your medical records.

### **Collection Fee**

Statements are sent out monthly for patients with personal balances. Payment is due upon receipt of the statement. If you are unable to pay the balance in full, please contact our billing department at (828) 274-4880. Personal balances over 90 days from the date of service will be sent to our collection agency. In the event an account is turned over to an outside collection agency, patients will be responsible for an additional administrative fee and previous balance.