

Financial Policy

Here at Dr. Pop's office we are committed to providing the highest level of quality medical care and personal service to our patients. For every commitment, there is an obligation. We feel it is the patient or guardian's responsibility to meet their financial obligations.

Because we see patients from many different insurance plans, it is impossible for us to know all the covered benefits, co-pays, and deductibles for each plan. While it is our intention to assist you, it is still your responsibility to ensure that all services rendered by Dr. Pop on your behalf are paid in full so that we can continue to stay open.

Please be advised that payment in full is expected at the time of service unless you have Medicare or your insurance has been verified by our office.

It is very important that a patient knows their insurance coverage. Insurance coverage is a binding contract between the patient and the insurance company and the doctor may not know all their policy details. Please know that the doctor provides service directly to the patient and not to the insurance company therefore the doctor or his staff will not become involved in any dispute between patient and insurance company regarding coverage. **The patients are ultimately responsible for all payments, co-payments and deductibles not covered by their insurance policy.**

Your insurance requires that you pay your deductible and co-pay at the time of service. If we are contracted with your insurance carrier, we will bill your insurance. If you do not pay your co-pay at the time of service, you may be subject to a \$10 processing fee. You will not receive a statement of balance due until after your insurance carrier has paid their portion (if any) of the charges. This balance is due within 30 days of the statement date.

The reasoning behind collection of co-pays at the time of service: In order to reduce paperwork, insurance companies created the concept of co-pays. They shared the cost savings with their clients, in other words, *You the patient* pay lower premiums because of co-pays. Physicians also agreed to lower the amount they would accept as payment in full from the insurance companies because they were promised that they would save the cost of sending statements for the co-pays. Please do not ask our receptionist to "bill you" for the co-pays.

Please be advised that if we bill your insurance company for services rendered and we do not receive payments within 45 days of the date of service, we will expect the patient to pay the balance in full.

We at Dr. Pop's office understand that there are always special needs to be considered and a special payment plan may be necessary. If this situation applies to you, please bring it to the Office Manager's attention as soon as possible.

Medicare Patients:

We accept assignment for Medicare.

Medicare will be billed for all covered services. Non-covered services will be billed to you, the patient, when allowed by Medicare. If Medicare is your only health insurance carrier, you will receive a statement after Medicare has paid their portion (if any) of the charges.

If you have supplemental insurance to Medicare and have given us the information, we will bill your Medicare supplement after Medicare has processed their portion of your claim. You will receive a statement from our office after both Medicare and your secondary insurance have paid their portion (if any) of the charges.

Patients without Insurance Coverage:

Payment at time of service is required. We accept cash, check and Visa/MasterCard. Short-term payment plans are available only in exceptional situations, and must be requested prior to the services being performed.

Non-Contracted Insurance Carriers:

As a courtesy to all our patients, we will bill an insurance with which we are not contracted with but **you, the patient, are ultimately responsible for payment.** If your insurance has not paid for the services rendered within 30 days, you will receive a statement and be expected to pay the balance in full. If we later receive payment from your insurance company we will refund any overpayment to you. If you know your deductible has not been met or the service will not be covered by your insurance, we request that you pay at the time of your visit.

Cancellation Policy:

Please notify our office at least **24 to 48 hours prior** to your scheduled appointment. Due to many inconveniences related to the “no show” situations as well as office visits cancelled too late to be able to reschedule them for other patients in need, effective January 1st, 2003 our office is implementing a **cancellation fee policy.**

Please be advised that **should you fail to cancel your office visit at least 24 hours in advance we may charge you a 25.00 \$ fee that is not refundable and is not billed to your insurance company.**