

POPE PAUL VI INSTITUTE PHYSICIANS, PC Financial Policy

WELCOME TO POPE PAUL VI INSTITUTE. We look forward to providing you with the highest quality care and trust. We hope you will find our staff friendly and helpful. Our office participates with many major insurance companies. Due to the complexities of individual insurance plans, it is impossible for us to know the specifics about your policy/network benefits. So, we recommend that you familiarize yourself with your insurance Plan and its Deductibles, Co-Insurance and Co-Pay Responsibilities.

INSURANCE:

- We are "Preferred Providers" with several insurance plans. As a courtesy to you, we will submit medical claims to your insurance company. Any additional co-payment, deductibles and/or co-insurance will be billed to you, the patient, as indicated by your insurance carrier on their Explanation of Benefits (EOB). Your insurance company will mail you an EOB outlining the services rendered and the portion of the bill which is your responsibility. But, if our Doctors do not participate with your insurance plan, you are responsible for payment. The insurer may send the payment directly to you and therefore, we will bill you for full payment.
- Due to the many different insurance products available, our staff cannot guarantee your eligibility and coverage. Be sure to check with your insurer's member benefits department about services and preferred physicians before your appointment. Many web sites have erroneous information and are not a guarantee of coverage. You are responsible for obtaining a properly dated referral if required by your insurer and you will be responsible for payment if your claim denies for the lack of one. Not all insurance plans cover all services. In the event that your insurance plan determines a service to be "not covered", you will be responsible for the complete charge.
- Please have your current insurance ID Card available at each visit so we can avoid insurance claim filing errors. If at any time your insurance should change, our office must be notified immediately of the change to accurately file claims.
- The cost of medical care is determined by the nature and complexity of your illness or the reason for your visit. The re is no "flat rate" for examinations and treatment. Insurance is a contract between you and your insurance company. As a service to you, our office makes every reasonable effort to obtain payment according to your coverage. Regardless of the type of insurance coverage you have, you are ultimately responsible for paying your medical bills, if your insurance company denies your claim(s), the office will bill you for those charges. It is, at all times, your responsibility to follow up on all requests from your insurance company regarding your claims; and, to address any questions regarding the processing of your claims with your insurance company.

NON-COVERED SERVICES:

- Out of town patients that have blood drawn locally and mailed to POPE PAUL VI INSTITUTE/National Hormone Laboratory are responsible for shipping and handling charges. These charges will not be billed to insurance companies.
- We here at Pope Paul VI Institute Physicians, PC specialize in some services that are unique to our practice and are not payable by insurance. We will make you aware of those services and their charges in advance. These services will require pre-payment before services will be rendered.

SELF PAY OR OUT-OF-NETWORK PATIENTS:

• Payment for services rendered is due prior to or at the time service/treatment is given.

PAYMENT:

- Our practice accepts Visa, MasterCard, Discover, American Express and Care Credit. We also accept personal checks and cash.
- All returned checks will incur a \$35.00 returned check fee in addition to the original charge.
- Unless cancelled at least 24 hours in advance, our policy is to charge for missed appointment at the rate of \$35.00. Please help us serve you better by keeping schedule appointments.

BILLING DEPARTMENT:

- Our billing office hours are Monday thru Friday 9:00 am to 5:00 pm. Our phone number is (402) 390 -6600 option #2. If you reach the voicemail please leave a detailed message including your first and last name, date of birth and a phone number where you can be reached. We will return your call as soon as possible.
- Statements are mailed out monthly to patients with outstanding balances. All balances are expected to be paid in full upon receipt. To make special arrangements please call the billing department. Any outstanding balances that are 90 Days Past Due are considered delinquent and subject outside collection and/or legal action.

Thank you for reading and cooperating with the policies of the Pope Paul VI Institute. It is our hope that the above financial policy will allow us to provide quality care to our patients. If you have any questions or need any clarification of the above policies, please do not hesitate to contact our Business Office.

I have read and understand the practice's financial policy and I agree to be bound by its terms. I also understand and agree that such terms may be amended by the practice from time to time.

Signature of Patient	(or Guarantor,	if applicable)

Date _____