## FINANCIAL POLICIES

The professional services provided by the center are for your benefit. All fees charged by this center are your responsibility. All balances are due 60 days from the date of service. For your convenience, we accept cash, credit card, and check.

## *Insurance*

Medical Business Services will bill Medicare, Medicaid, and Contracted payers as defined in our contract. Commercial or Auto insurances are billed as a courtesy and we will make every effort to collect benefits on the insurer's behalf for a period of 60 days. After 60 days from the date of service, the account will be treated as a selfpay account and you will be required to submit payment in full or make acceptable arrangements for payment. You must pre-authorize all procedures with your insurance company. If for some reason, your procedure date is changed, please contact our billing office and notify your insurance company of the change. Failure to do so may alter your reimbursement with a denial or loss, making it your financial responsibility. You have authorized the assignment of your insurance benefits to this facility for services rendered. Professional care is provided to you, our patient, not to an insurance company. Thus, the insurance company is ultimately responsible to you, the patient, and you are responsible to the doctor and the imaging center. In order for us to file your insurance, we need to be provided with COMPLETE AND ACCURATE insurance information to avoid delays in payment (i.e.: name, address, group, etc. of your primary and secondary insurance). Failure to provide us with correct information could possibly result in you being responsible for your account. You are responsible for all fees not covered by your insurance company. This includes deductibles, co-pays, coinsurance, and reasonable and customary fee differences. Our office cannot accept responsibility for negotiating a settlement on a disputed claim. If you dispute the amount of payment made by your insurance company, you should contact your insurance carrier, your human resources department, or your agent directly.

## **Payment**

- All self pay visits should have a quote obtained BEFORE the service is provided and the payment should be made at time of service. There is a 30% cash discount provided to self pay patients who pay at time of service.
- All other patient balances applied by insurance are due upon receipt of a patient billing statement. There are payment plans available with minimum monthly due amounts. Should you need assistance in payment of your medical care, please let us know immediately.
- Any balance due from the patient and not paid within 90 days will be referred to an external collection agency for placement.

The services provided by our physicians is the professional fee. The services and supplies provided for your procedure is the facility fee. These may or may not be billed separately. Pathology, anesthesia or laboratory services, if utilized, will be billed separately by the provider of these services. In these instances, the provider of these services will bill you or your insurance company.

## **Unpaid Accounts**

Patients will receive two statements, two letters, phone calls, and text messages, if able, before being referred to an external collection agency. Any payments received after the debt has been released to the collection agency will be reported to them for review and to apply to any existing debt. The collection agency will determine if the debt is satisfied or uncollectable and will report that info back to Medical Business Services. Patients with unpaid delinquent accounts or accounts which have been written to bad debt or collection may be denied treatment if not deemed medically necessary.