



Financial Policy

While we strive to provide the highest quality of medical care to our patients, we feel part of that care is keeping you informed of administrative policy and procedures within our office. This policy is being provided to you so that you are aware of our financial requirements. Should you have any questions about any of these policies or any other issues, please contact a staff member who will direct you to the appropriate person to answer your questions.

Payment

Any co-pays will be collected prior to seeing the physician. Co-insurance and deductibles are required to be collected day of your visit.

Elective Procedures must be paid for in advance of the procedure.

We accept check, cash, money order, Visa, American Express, Discover, and MasterCard.

Referrals

It is your responsibility to obtain a referral from your primary care physician. Referrals must be presented at the time services are rendered, if applicable.

If you need to have a referral faxed to us, our office will provide you with our fax number. If your insurance plan requires you to have a referral or other authorization, and you fail to provide that to us, your appointment will be rescheduled or your claim for that date of service will be processed via opt-out benefits, if applicable.

Elective Procedures

Payment in full is required prior to all elective procedures being performed.

Payment Plans

We are willing to work with you to arrange payment plans that are satisfactory to both parties. If you anticipate financial difficulties, please contact a member of the staff and they will be happy to assist you.

Self Pay

If you present to the office without insurance or proof of insurance, you will be considered self pay. We do offer self pay discounts, however, once this discount is applied, insurance can not be filed for those discounted services. These discounts are offered for prompt payment; however, any discounts will be voided should the account ever be placed with a collection agency.

Insurance Covered Procedures

Insurance covered procedures will be filed to the insurance, if we participate, however you are responsible for your co-insurance and deductible at the time of service.

Inability to Pay

We do have a charity care policy for patients who are uninsured or under insured and have a limited income. This requires you to provide the office with proof of income and proof of expenses. We require income tax returns, paycheck stubs, and copies of any expenses.

Failure to pay

Failure to pay your debt or failure to remain faithful to a payment arrangement may result in your account being turned over to an

outside collection agency. If your account is turned over to a collection agency, we will terminate our services to you until your account is brought current. We will provide emergency care to you for a period of 30 (thirty) days, this should be adequate time to find another physician.

Bankruptcy

We understand that sometimes it is necessary to file bankruptcy. However, once a bankruptcy is filed, we will require all future visits to be paid in full up front, regardless of insurance coverage. We will continue to file the claim to your insurance company and any payment received from the insurance that creates a credit balance will be mailed to you.

Miscellaneous Fees

- The fee for a check that is returned insufficient is \$20.00.
- A broken appointment charge may be incurred for a cancellation of an elective procedure without 48 hours' notice.
- Administrative Form Fee of \$10.00 is charged for all medical form completion including FMLA and Cancer Policy forms.
- Medical Record Copy Fee of \$20.00 for 40 pages or less and .25 for each additional page. Tennessee State Law TCA-63-2-101 mandates that the records be provided to you within 10 business days upon receipt of a written request and payment. Workers Compensation is not included in this law.
- Should an account be turned over to collections for failure to pay a debt, collection fees and attorney fees may apply.