FAMILY PRACTICE ASSOCIATES, P.C.

433 Summit Blvd, #201 ♦ Broomfield, CO 80021 ♦ 303-673-9090

FINANCIAL POLICY

Co-pays: Due at the time of service, and we reserve the right to refuse treatment. If a co-pay is not paid, a \$10 fee may be assessed to the patient's account.

Account Balances: Any past due balance (Deductibles, Co-Insurance, Non-Covered, Collections, Bad Debt) must be paid before an appointment. If upon arrival the patient is not prepared to pay, the visit may be rescheduled. A payment plan may be established for past due balances but not for current and future visits. Patient must leave a credit card on file to be run at set intervals for a payment plan.

Self-Pay: There is a 25% discount for self-pay patients. This applies to the office visit, procedures, immunization admin charges but not vaccines or tests. Self-Pay patients are required to submit a \$100 deposit prior to being seen. Deposit must be cash/charge/debit. After the visit, the charges will be determined as accurately as possible. If the patient leaves without checking out, the \$100 will be used towards the visit and no discounts will be given. Once the doctor's notes have been completed, there may be additional charges that weren't on the fee ticket at the time of service.

The patient is responsible for the balance of all charges. We will send a bill for any remaining balance for the visit.

Patients that are eligible for the Self-Pay discount:

- Has no public or private health insurance coverage
- If we are out-of-network or not contracted with the insurance company
- Patient has insurance but chooses not to bill them. We will not go back and bill your insurance later.

Patients that are NOT eligible for Self-Pay discount:

- Patient has no insurance card to present
- Patient has high deductibles or high co-pays
- Motor Vehicle Accidents

Insurance: Patient must present their insurance card at each appointment. It is the <u>patient's responsibility to know their insurance coverage prior to their appointment</u>. The patient is ultimately responsible for the balance of all charges, whether or not the insurance company pays. If there is a dispute between the patient and insurance company's decision on a claim, the patient shall pay the balance until it is settled. We do not enter into disputes over insurance benefits. We cannot provide/change diagnosis codes that may or may not be in the medical record to influence insurance reimbursement.

Physicals/Wellness Exams: Please note the physician may or may not treat acute issues during a physical. The time allowed is for the physical exam only. An additional appointment may be needed to address the acute issue. If the physician does address other issues, the patient may receive a bill for these services since they are not part of the Wellness Exam.

Cancellations: There may be a \$50 fee assessed to the patient's account if they don't call to cancel their appointment at least 24-hours in advance. The same fee applies to patients that don't come to their appointments. These fees can't be billed to insurance.

NSF Returned Checks: A \$40 fee will be assessed to the patient's account for any returned check.

Collections/Bad Debt: Any past due balances must be paid prior to setting an appointment. An overdue account may be sent to a Collections Agency after 120 days.

Auto Accidents: We will bill the patient's health insurance. For self-pay patients, payment is due in full. We don't bill auto carriers but can provide necessary paperwork so the patient can file a claim.

Workers Compensation: We do not take worker's compensation appointments.