

**FINANCIAL POLICY EFFECTIVE**

The intent of this document is to inform you of West Georgia Obstetrics & Gynecology's Financial Policy. It is our objective and philosophy that all our patients receive the best possible care and service. Therefore, your complete understanding of our financial policy as it relates to your financial obligation is essential. Please read this document thoroughly. When you present to the office you will be asked to sign a form stating that you have read, understand and will comply with the information contained within this document.

You must present your current insurance card(s) to the Receptionist at each visit in order for us to file a claim on your behalf. Without this information charges will be due in full at the time of service. We will be glad to reschedule your appointment until this information can be provided. If you have more than one insurance policy, please be sure to tell the receptionist which plan is primary and which is secondary. If you have a change in your insurance company during the course of your treatment, it is your responsibility to get the updated information to our staff as quickly as possible. Any updates not received that results in the denial of your claims will become your responsibility.

If you are a member of a health plan that West Georgia OB/GYN participates with, we will submit your claim to your insurance company. We are obligated, as part of our contract with the insurance managed care organizations, to collect your co-pay, co-insurance and deductible *before* you are seen. In the event a health plan determines a service to be "Non-Covered", or "Not a Benefit" the patient will be responsible for all charges. For your information please verify with your insurance company prior to your office visit so that you will have a clear understanding what is covered by your plan and what you are responsible for.

If West Georgia OB/GYN does not participate with your insurance carrier, or you have NO Insurance, payment in full will be required by you at the time services are rendered. Our Billing Department will send a bill to your insurance company as a courtesy to you. However, no contractual adjustments will be taken.

We are currently not accepting any NEW Medicare patients. **Effective Jan 1, 2010 we will no longer be Participating Providers with Medicare.** We will still file your claims to Medicare; however the patient is responsible for payment in full at the time of service. Medicare will send all payments directly to the patient and file your secondary insurance.

Any patient over the age of 18, or an emancipated minor, will be held financially responsible for all charges incurred. The parent who accompanies the minor patient to their first visit will be financially responsible for all charges incurred. ***Due to HIPPA no information will be released on any patient over the age of 18 to anyone, unless a signed authorization is on file by the patient.***

West Georgia OB/GYN accepts Cash, Checks, VISA, Master Card, American Express and Discover Card as payment for services rendered.

A \$35.00 fee will be assessed for any check returned for insufficient funds. At that time only cash, credit card or money order will be accepted for payment.

There is a \$35.00 fee for Medical Records released to the patient, Attorneys, or other third party. However, if applicable, a complimentary copy of your records will be sent to the physician of your choice.

All past due patient balances over 60 days will be charged a \$10.00 late fee until paid in full or referred to collection agency. In the event your account is turned over to an outside agency for collection you will be responsible for all collection fees, including attorney fees. All Collection balances must be paid in full before future appointments can be made.

If you require completion of FMLA or Disability Forms the first form will be complimentary. There will be a \$5.00 charge for each additional form which must be paid at the time the forms are dropped off.

We are not currently accepting NEW Medicaid patients. Established Medicaid patients are required to bring proof of eligibility to each visit. They are also responsible for any "Non-Covered" expense.

A Representative from the Business Office will contact your insurance company to verify benefits on all **OBSTETRICAL** patients. We will estimate the portion that will be due from you and set this up on a monthly payment plan. This estimated balance is due in full by your 32<sup>nd</sup> week of pregnancy. Your first payment will be due at your second Office Visit. Any incidental balance is due in full each month in addition to you monthly global payment.

We verify insurance and pre-certify all **SURGICAL** procedures, CT-Scans, and MRI's. Your deposit will be due at your pre-operative appointment. A Business Office Representative will contact you as soon as your file is completed with your financial obligation.

If you must cancel/reschedule your appointment, please contact our office a minimum of 24 hours notice. Failure to comply with this policy will result in a \$35.00 charge. The decision to waive will be determined by Management.

Cancellations are requested five, (5) business days prior to the scheduled procedure. Failure to do so will result is a charge of \$50.00 for office procedures, and \$100.00 for Surgeries. Decision to waive will be determined by Management.

By signing below, I agree that I understand the Financial Policies of West Georgia Obstetrics & Gynecology, P.C.

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Signature of Patient or Responsible Party

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Please Print the Name of Patient

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Date