

Financial Policy

Your insurance coverage is a contract between you and your insurance company. Please note that verification of benefits is not a guarantee of payment. Please present your insurance card each time you visit to ensure we have the proper filing information to submit claims. Otherwise, your visit may not be covered, and you will be responsible for payment.

Full payment is due at the time of service and will be collected for at the end of your appointment during check-out. This includes but is not limited to, co-pays, deductibles, co-insurance, and cost of self-pay items. For your convenience, we accept checks or credit cards. **Returned checks will be charged \$40.** If your check is returned, we reserve the right to only accept credit card payments.

We verify your insurance before every visit; however, verification of benefits is **NOT** a guarantee of payment. You may have a deductible in your insurance policy. **A deductible is the amount that your insurance company requires you to pay out of pocket for medical expenses before the insurance company will pay for medical expenses.** The deductible amount is not decided by Frederick Foot and Ankle, it is determined by your contract with your insurance company.

If you have a deductible amount with your insurance company, you will be responsible for payment in full at the time services are rendered. The amounts collected are the **estimated** amounts provided by your insurance company as insurance "allowed amount" per each service. This estimate is based on the fee schedule your insurance has provided to us. It is not guaranteed by the insurance to be accurate to date. If there is a remaining balance or credit on your account, you will be informed.

Some insurance companies have a separate deductible for Durable Medical Equipment (DME) **ONLY**. If your insurance company has notified us of this specific deductible, the staff will notify you regarding coverage, cost and information needed. Most procedures are also billed separately, and not included in the charge for an office visit.

If your insurance automatically pays for your deductible and cost through your HSA account, we will bill your insurance first. If for any reason, a service is not paid for and there is a balance on your account, you will be notified and will have 30 days to contact our office with payment.

Co-insurance will be due in full at time of service. **Co-insurance is the percentage of charges your insurance company expects you to pay out of pocket.** Co-insurance will be collected on an **estimate** of charges for each appointment. This estimate is based the free schedule your insurance company has provided to us. It is not guaranteed by the insurance company to be 100% accurate. If there is a balance or credit on your account, you will be informed.

If it becomes necessary to send you a patient balance statement, payment in full is due within 30 days of the date posted on the statement. If you have any questions or dispute the balance, it is your responsibility to contact our billing office within 30 days. Past due accounts will be subject to a late fee of \$20.00 per month and may be referred to a credit bureau and/or collection agency. If your account must be forwarded to a collection service and/or an attorney because of nonpayment, you will be responsible for all collection fees and/or attorney fees charged for these services.

Referral Policy: If you have an HMO policy that requires referrals, **it is your responsibility to obtain a referral for every visit** from your primary care physician. If a referral is not received prior to your appointment, you will be financially responsible for any charges incurred.

Late Policy: **If an appointment is missed without any notice to the office,** your account will be charged \$40. If you are more than 15 minutes late to an appointment and no openings are available at the time of your arrival, **you will be asked to reschedule.**

Disability Paperwork Policy: Completion of disability/work/school paperwork has a \$30.00 preparation fee, and all paperwork will be completed in the order received, no longer than 7 business days.

Medical Records Request: **One-week notification is needed to copy any medical records** or x-rays and proper paperwork must be completed to receive your records. Medical records can be copied for patients at the cost of \$0.76 per page plus actual postage and handling costs. There is a flat processing fee of \$10.00 for copying x-rays. For all facilities requesting medical records, other than another physician, there will be a \$22.88 preparation fee plus \$0.76 per page, as well as shipping and handling. You may also access your own patient records through the patient portal. Inquire about the portal at the front desk. These fees may be superseded by the most current fee schedule as allowed by MD law Health General Section 4-304.