

Olio Road Family Care
Financial Policy

Thank you for choosing us as your healthcare provider. We are committed to your treatment being successful. Please understand that payment of your bill is considered a part of your treatment. The following is a statement of our Financial Policy, which we require you to read and sign. This will remain in effect for all services rendered during your time as a patient at Olio Road Family Care.

All patients must complete a patient registration form and provide a copy of their insurance card(s).

WE ACCEPT CASH, CHECKS, OR VISA/MASTERCARD

Regarding Insurance:

If we are a participating provider in your insurance plan, we will file claims with your insurance company. As part of our insurance contract, we do require co-pays and 10% of deductibles to be paid at the time of service. Should we receive payment from your insurance company, you will receive a refund check. This bill is your responsibility whether your insurance company pays or not. We cannot bill your insurance company unless you give us your insurance information. Your insurance policy is a contract between you and your insurance company. We are not part of that contract. Please be aware that some, perhaps all, of the services provided may be non-covered services and not considered reasonable and necessary under your medical insurance plan. You may be asked to sign a date/procedure waiver if we believe that your insurance may deny payment for that service.

Usual and Customary Rates:

Our practice is committed to providing the best treatment of our patients, and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.

Adult Patients:

Adult patients are responsible for full payment at time of service.

Minor Patients:

The adult accompanying a minor or the parent(s) or guardian(s) of the minor are responsible for full payment. For unaccompanied minors, non-emergency treatment will be denied unless payment is collected prior to services rendered by cash, check, or credit-card.

Worker's Compensation:

Workers compensation will be filed if the patient notifies Olio Road Family Care upon scheduling appointment and supplies billing information upon check in. Details of the accident will be required and a worker's compensation form will be completed.

Motor Vehicle Accidents:

Payment of visits for auto accidents will be due at time of service. Olio Road Family Care will provide health insurance claim form, details of examination, etc. upon patient signature for release of records.

Missed Appointments:

Unless canceled at least 4 hours in advance, our policy is to charge for missed appointments at the rate of \$25.00. If you are 15 minutes or later for your appointment, you will have to reschedule.

Thank you for understanding our Financial Policy. Please let us know if you have any questions or concerns.

I have read the Financial Policy. I understand and agree to this Financial Policy.

Patient Name: _____

X _____
Signature of patient or responsible party

Date: _____

My Physician is: _____