

Practice Financial Policy

Thank you for choosing The Medical Profession, LLC! We are committed to providing quality healthcare to each of our patients in a way that is financially responsible for both our patients and our practice.

Your clear understanding of our Financial Policy is important to our professional relationship.

HEALTH INSURANCE INFORMATION

Your health insurance is based upon a contract between the insured party's employer and the insurance company, or in some cases, between you, or other parent of the child, and the insurance company. If your employer has selected your plan, the employer customarily describes the benefits of the plan with the employee. The insurance company has the responsibility to provide supporting documentation (Plan Benefit Booklet and Enrollment Card (s)) to the insured.

The insured party and any adult who benefits from the insurance plan, or whose child receives benefits from this plan, is responsible for the following information:

1. The commencement date of the plan
2. If there is an annual deductible and if so, how much
3. If "Well Care" and Immunizations are a covered benefit
4. Which hospital the carrier is contracted with
5. Which laboratory the carrier is contracted with
6. Which imaging center the carrier is contracted with
7. The amount of your co-pay
8. Knowledge of your pharmacy benefits

(If cost is an issue, consider your pharmacy. Price of medication does vary by pharmacy.)

The parent who accompanies the child to the physician's office must be prepared to present the child's insurance card to the receptionist when checking in. The parent who accompanies the child to the physician's office must also notify the receptionist of any changes to or termination of their plan. The parent who accompanies the child to the physician's office must pay their insurance co-pay.

The contract between the "Provider of Service" (Physician) and any insurance company requires that the physician:

1. Provides quality medical care to the patient
2. Refers the patient to the correct imaging center/lab/hospital (through the information supplied by the parent)
3. Submits the claim for service to the appropriate carrier in a timely fashion
4. Accounts for any "contracted discount" with the insurance company
5. Collects co-pays, and other balances due from the patient at time of service

If you ever have questions regarding yours or your child's coverage, contact your employer or call the number listed on the back of your insurance card. Watch for your Explanation of Benefits (EOBs) from your insurance company and your monthly statement from us.

Your physician and the office staff are not the keepers of your employment benefits.

Any medical services not covered by your insurance plan are your responsibility.

PLEASE KNOW YOUR INSURANCE PLAN

SELF-PAY Billing (No Insurance)

For those patients that do not have insurance or for visits/services that are not covered by your carrier, we expect you to:

1. Pay at the time of your visit in full. If you elect to be a cash-pay patient, we will offer a 20% discount off total charges providing the charges are paid in full at time of service.