

PATIENT FINANCIAL POLICY

PATIENT NAME: _____ DATE: _____

We are committed to providing you and your family the best possible care. In order to achieve this, we need your assistance as we explain our payment policy. Please read over the details of this form carefully. We will be happy to file your insurance for you. In order to file insurance, you must:

- Provide our office with a current insurance ID card. We must make a copy of this card for our files.
- If your insurance requires a referral, it is your responsibility to get a referral from your PCP (primary care physician), to our office, prior to your appointment. Be aware, it is always your responsibility to get new referrals as needed throughout your treatment. Failure to obtain valid and current referrals may result in insurance charges being charged to the patient.
- Co-pays are due at the time of service. Be aware that you are responsible for meeting all deductibles and/or co-insurance amounts required by your policy.

It is your responsibility to inform us of any changes in your insurance coverage or employment. Please verify, with your insurance company that Dr. Moore is an "in network provider" for your insurance. Your insurance is a contract between you, your employer, and your insurance company.

We will file Medicare and a secondary or supplemental policy. You will receive a bill for any amount approved by Medicare but not paid by your secondary plan.

If you do not have your insurance card or if insurance cannot be verified before you check out, you are required to sign a waiver stating you understand that you, personally, are responsible for the balance at the time services are rendered.

In order to be treated at Arlington Center for Dermatology, you must:

- Present your driver's license (or photo ID if not a licensed driver). We must make a copy of this for our files. This confirms your identity and protects your privacy.

Payment for cosmetic products and /or procedures is required in full at the time services are rendered.

Please Note:

- Be aware that treatment using liquid nitrogen (often called "freezing" or "LN2") is considered a **surgical procedure** by insurance, and must be billed as a surgery. If your policy has a surgical deductible all "freezing" procedures will be billed as a surgery and you are responsible for meeting that deductible.
- LN2 treatment may require more than one visit for effectiveness of treatment. Second, third and follow-up treatments of the same lesions with LN2 may be required by the provider. All follow-up treatments of LN2 will be charged to the patient and/or to his or her insurance.
- Any Patch Testing requires co-pay for each visit of the test, which is usually three (3) visits. Please confirm with your insurance company that patch tests will be paid for by your insurance contract. Not all insurance companies will pay for patch testing.
- In accordance with Federal Law and per the stipulations of your Insurance contact, whenever you are seen by a medical provider, you will be responsible for making a copayment. You must pay this co-payment on the same day you see the provider.

We realize that temporary financial problems may affect timely payment of your account. If problems do arise please contact us promptly for assistance in managing the account.

Also be aware that if your insurance has not paid within 60 days, the full amount becomes your responsibility. We accept cash, checks, Visa, and MasterCard.

I have read and understand this financial policy and agree to abide by the terms and expectations listed above.

Patient or legal guardian of patient signature: _____