



## FINANCIAL POLICIES

**Payment:** Patient Responsibility, including copays, is expected to be paid at time of service. Outstanding balances will also be requested at time of check-in. Copays are required for a PA visit the same as an MD visit. Payment Types Accepted: Cash, Check, Visa, Master Card, American Express, Discover, Money Orders. Returned Check Fee: A \$10.00 returned check fee will be charged to all accounts who have a returned check. Multiple returned checks may result in the revocation of accepting checks in the future. We do not accept post-dated checks.

**Insurance:** There are innumerable health plans today. While MLD will try to assist patients with questions, patients are ultimately responsible for reviewing their individual policies and consulting with their insurances over any concerns.

- Patients will be held liable for all amounts that meet any or all of the following:
  - o Non-covered services
  - o Not medically necessary services
  - o Copays, Coinsurances, and Deductibles.
- Failure to provide MLD with the most updated insurance within our insurances' contractual timely filing limits may result in the patient being liable for the full cost of the service.
- Patients may be asked to provide their card at each visit.
- MLD checks eligibility prior to services. If an insurance shows inactive at time of service, there may be a delay in the appointment or the patient may be treated as a self-pay patient.
- MLD participates with and files claims with a variety of health plans. If MLD does not participate with a particular plan, MLD can still file the claim in most cases. Please note that even though MLD may file the claim, payment from the insurance is not guaranteed.
- Liberty HealthShare and MediShare insurances: the patient will be responsible for full payment at the time of service. A detailed receipt for filing directly to the patient's plan will be provided at check-out.
- Sometimes, Medicare and other insurances will consider certain services as not-medically-necessary. In the event this occurs, MLD will notify the patient in advance and ask them to sign an Advanced Beneficiary Notice. The balance of these services will be patient responsibility, and MLD will ask for payment at time of service.

**Prior-Authorizations:** MLD is a specialist provider. Some insurance plans require a prior-authorization in order to make payment for your services. It is the patient's responsibility to be aware when a prior-authorization is required and to take the necessary steps to obtain the prior-authorization before the date of service. If an authorization is required and not obtained, the appointment will need to be rescheduled, or the patient may continue with the appointment as a self-pay patient.

**Self-Pay:** Self-Pay patients will be expected to make payment in full at time of service.

**Minors:** Minors must be accompanied by a parent or legal guardian. Copays or outstanding balances will still be required at time of check-in. It is the responsibility of the parent or legal guardian accompanying the minor to arrange for payment at time of service.

**Pathology:** Any pathology taken during a visit will be processed and billed to your insurance by PML Pathology. You may receive a separate bill for pathology services. Questions regarding pathology bills should be directed to PML's billing office at 828-366-1150, extension 2.

*Any questions regarding billing, please contact our billing office at 800-300-7819*

By signing below, I attest that I have read and agree to the Financial Policies of Mountain Laurel Dermatology, PLLC.

Patient Name:

Date:

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Signature of Patient or Authorized Representative or Patient/Legal Guardian:

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