

appointment. If you don't have a referral at your appointment time, your appointment may be rescheduled, and you could be charged a missed appointment fee.

The patient will be responsible for services denied by insurance due to "No Eligibility", "Non-Covered Service", or "Referral/Pre-authorization/Certification Not Obtained". You will receive a statement after your insurance carrier pays or denies coverage. Should you have questions regarding your benefits and coverage, please contact your insurance company directly.

Illinois State law requires insurance carriers to pay or deny claims within 30 days of receipt. Insurance carriers who fail to comply with these state standards are subject to additional requirements and penalties. **After your insurance provider has processed a claim with full or partial payment or denial, you will be responsible for the remaining balance, and it is due immediately.** We would process any payments due with your HSA/FSA on file first, and if declined, then use your regular credit card on file. If your insurance provider delays or withholds payment, for 90 days or longer, both the insurance and patient portions will become your responsibility.

If either HSA/FSA and regular credit card payment is declined, you will be notified and provided the opportunity to submit payment with a different credit card or in cash immediately. If you do not contact us to provide payment, your account balance is subject to be turned over to a collection agency, and you may incur a processing fee. Failure to pay bills will result in dismissal from the practice.

Out of network patients, you must pay in full at the time at time of service. You will pay at the time of arrival to your appointment for the office evaluation, and should you require any procedure, the cost will be informed after the evaluation of your condition. Payment for any procedures, laboratory, diagnostic studies required will be collected prior to those being performed. Many

Medical Records Requests, Completion of Prior Authorization forms, and Administrative

By signing this document, I am agreeing to the terms of this Financial Policy, as documented below.