Office Financial Policy Agreement

Thank you for choosing Westford Dermatology for your medical care. We are committed to providing you with quality, personal health care, and appreciate your commitment to adhere to this Office/ Financial Policy Agreement. By understanding our policy, we can provide you with the best service. Agreement with this policy is required for all medical care.

Except as indicated below, payment is required at the time services are provided unless other arrangements have been made in advance. We accept cash, personal in-state checks, VISA, MasterCard, Discover and American Express credit cards. There is a \$40.00 service charge for returned checks.

As a courtesy to other patients, we request you arrive on time. If you arrive more than 15 minutes late, you may be asked to wait or reschedule. For after hours/weekend emergencies, please call the office first. A message will guide you to the Doctors on-Call.

INSURANCE: We participate in most managed care plans and will bill your insurance plan as may be necessary. If we do not participate with your managed care plan, payment in full is required at the time of service, unless other arrangements have been made in advance. We may be able to bill your plan as a courtesy to you and credit your account if we receive any additional payment. Knowing your insurance benefits – including eligibility, covered benefits, and medically necessary procedures is your responsibility; please contact customer services at your insurance company for questions you may have regarding your coverage. **You are responsible for any charges not covered by your plan.**

Proof of Insurance. All patients must complete and/or update our Patient Information Form at each office visit. You must furnish valid and up-to-date proof of insurance coverage and a copy of your driver's license. If you provide false or expired insurance information you will be responsible for the balance of the claim. Please notify us of any changes in insurance coverage prior to time of service. Insurance denials for termination of coverage will be automatically billed to you.

Co-payments and deductibles. All co-payments and unsatisfied deductibles must be paid at the time of service. By contractual law your insurance company requires us to charge for, and you to pay for, all required co-payments, coinsurances, deductible and non-covered services.

Claim submission. We will submit your insurance claims and assist you in any way reasonable to help get your claim paid. Your insurance company may need you to supply information directly to them. It is your responsibility to comply with their request in a timely manner. Massachusetts insurance law requires your insurance company to provide timely payment. Please be aware that the balance of your claim is your responsibility to pay whether or not your insurance company has paid. We are not a party to your insurance contract.

Referrals. If your managed care plan requires approval or authorization for referrals it is your responsibility to inform the office of this requirement prior to your visit. you as the patient take the responsibility of providing up to date and accurate insurance information and getting your referral. If a referral is not provided and your insurance denies any claim because of a lack of referral then it is your responsibility to pay the bill.

ADMINISTRATIVE SERVICES, CHARGES AND PATIENT RESPONSIBILITIES:

Missed appointments. Broken appointments represent not only a cost to us, but also an inability to provide services to others who could have been seen in the time set aside for you. We require 24 hour notice of cancellation to avoid a \$50 cancellation fee. We provide as a courtesy, reminder calls and texts however it is your responsibility to remember your appointment.

Prescription refills. New prescriptions will not be issued without first seeing your Physician. Prescriptions for acute care or chronic conditions are written with an appropriate number of refills to complete the course of treatment or to last until your next scheduled appointment. You must see a Physician or Physician Assistant at least once a year in order to continue to receive medication refills for any chronic conditions. The law requires a physical examination as the basis for prescribing and dispensing a controlled substance.

Requests for medical records. In accordance with Massachusetts law, there must be a written requests for the release of medical records. Our turn around time for releasing medical records is 2 business days. Also after the printing of 10 pages there is a fee of .10 cents per page.