

GERIG SURGICAL ASSOCIATES, P.C.

FINANCIAL POLICY

We are committed to providing you with the best possible medical care. We are available to work with you if you have special financial needs. The following information is provided to avoid any misunderstanding or disagreement concerning payment for professional services.

Our office participates in a variety of insurance plans. It is your responsibility to:

- Update our office of any insurance policy change.
- Obtain the necessary physician referral or pay all office fees at the time of service or completion of services. NOTE: If the referral has not been obtained or received, you will be asked to sign an Insurance Referral Waiver.
- Remit payment for medical care not covered under you insurance (deductible, co-pays, non-covered services, etc.) at the time of service.
- Be prepared to pay your co-pay before each visit. Payment may be made by cash, check or credit card.
- All private pay fees will be collected at the time of service.

**Medicare Patients: If you have signed up for a new Medicare plan and/or have a secondary insurance plan, we will need a copy of this card in addition to your traditional Medicare card. If we do not receive the proper insurance information from you to bill the correct Medicare plan, you will be billed and responsible for any charges incurred until we receive this information.**

If we do not participate in your insurance program, our office is happy to file the claim, however, payment in full is expected from you within 30 days unless special financial arrangements have been made.

For patients 17 years or younger, a parent or guardian must accompany them and sign below (exception: patients 17 years or younger declared emancipated minors). It is the parent (or guardian) bringing the minor that is responsible to bring the necessary referrals and insurance cards and also to make any payment due at the time of service.

Our charges are determined by what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.

If you have any questions about your insurance, we are happy to help you. Specific coverage issues, however, should be directed to your insurance company's member services department (the phone number on your insurance card).

Our practice firmly believes that a good physician/patient relationship is based upon understanding and communication.

Please sign below to indicate you have read and agree to this Financial Policy.

*I understand and agree to this Financial Policy:*

\_\_\_\_\_  
Signature of Patient or Responsible Party

\_\_\_\_\_  
Date