

Carteret Ob-Gyn Financial Policy

Carteret Ob-Gyn Associates is committed to providing our patients with the best possible medical care and minimizing administrative cost. Our financial policy has been established with these objectives in mind and to avoid any misunderstanding or disagreement concerning payment for professional services.

Carteret Ob-Gyn accepts cash, checks, most credit cards and Care Credit.

Patient Registration Form

All patients are required to complete the Patient Registration form annually and provide a copy of your current insurance card prior to seeing the provider. We can only file your insurance claim if we have the complete information required by your plan. **If you cannot provide the receptionist with sufficient insurance information at the time of the visit, we will consider the entire bill to be the patient's responsibility and full payment will be due at the time of service.**

Patients with Insurance

Our office participates with numerous insurance companies and managed health care plans. For patients that are members of one of these plans, our business office will submit a claim for services rendered. *Please contact your insurance company prior to your visit to determine if we participate with your plan.* If your plan does not pay for services, you will be responsible for payment.

Co-payments, deductibles, co-insurance, and any outstanding balances are due at the time of service. Services not covered by insurance are the patient's responsibility and payment in full is due at the time of the visit.

If your Insurance policy shows that it is in the "federally mandated grace period", we consider this as having no insurance and you will be considered self-pay for all services until you are no longer showing in the "federally mandated grace period" on your insurances website.

Credit Card on file

We participate with Credit Card Plus/Elavon. This service allows you to store your credit card on file and pre-authorizes transactions automatically. This service is PCI compliant. The practice will use Card-on-File to get pre-authorization to automatically collect outstanding balances after the patient's insurance company has processed the claim. The stored credit card can be used to pay co-pays at future visits. The patient will receive an email notification 5 (five) days prior to the payment being processed.

Patients without Insurance

Patients that do not have insurance are expected to pay for professional services at the time of service.

If a patient feels that she may require financial assistance, notify the receptionist before you see the physician for referral to the appropriate financial counselor. The Affordable Care Act provides insurance options for uninsured patients. For more information visit: <https://www.healthcare.gov/>. You may also contact your local Department of Social Services to see if you qualify for DSS assistance with your health care.

Medicaid Recipients

NC Medicaid eligibility will be verified at the time of service. A \$3.00 co-payment applies to all NC Medicaid recipients except those services specifically exempt by law. Non-eligible patients will be considered self-pay.

Minor Patients

Minors, under the age of 18, are required to have a parent or legal guardian present at the appointment to provide consent for treatment unless the treatment/care falls under the North Carolina Law statute 90-21.5.

Missed Appointments

Unless cancelled at least 24 hours in advance, we reserve the right to charge your account at the usual office visit rate for each missed appointment. Multiple missed appointments may result in dismissal from the practice. Please help us serve you and all our patients better by keeping scheduled appointments.

Medical Records request

A patient's initial request for a copy of their medical record is at no cost. Additional requests are subject to the North Carolina General Statutes 90-411 fee rates.

FMLA, work, physical or disability forms

There is a \$15 charge for the completion of each of the following forms: work, military, and/or disability forms, etc.
There is a \$40 charge for school physical exams. This includes the completion of the required documents.
FMLA forms are completed at no charge.

Collection policy

If a balance remains after insurance has processed the claim(s), up to three (3) statements will be sent to the patient. If the patient fails to pay the balance, one collection letter will be sent prior to the account being sent to Online Collections.