

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 ALL insurance card(s); including those you have purchased or are provided by your employer, your spouse, or if under age 26, provided by your parents. ALL insurance policies MUST be disclosed.

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.***

***Carteret Ob Gyn and your insurance requires that we file for your services with your legal name. You are responsible for contacting your insurance company and updating this information. If we are unable to file for your services, you will be responsible for the charges. Most insurances have a 90-day timeframe for filing claims.***

#### **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.

#### **CareCredit**

Please visit the CareCredit website at [www.carecredit.com](http://www.carecredit.com) for more information on their financial requirements.

#### **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. A Good Faith Estimate will be provided within 3 days of the scheduled appointment. More information on the Good Faith Estimate can be found at <https://www.cms.gov/files/document/nosurpriseactfactsheet-whats-good-faith-estimate508c.pdf>

#### **NC Medicaid & HMO Medicaid Replacement Recipients**

Insurance eligibility will be verified at the time of service. A co-payment determined by your insurance applies to all NC Medicaid & HMO Medicaid Replacement recipients except those services specifically exempt by law. This co-payment will be collected at time of service. 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.

#### **No Show Policy**

Missed appointments represent a cost to us and to other patients who could have been accommodated. Appointments missed or not cancelled at least 24 hours before the appointment time will result in a \$75 fee. No show/cancellation fees are not covered by insurance and are your responsibility. This fee will need to be paid in full before you are permitted to schedule another appointment. Three (3) no shows/late cancellations within a one (1) year time span are considered excessive and will result in being dismissed from the practice.

#### **Medical Records request**

Medical records can be requested online by going to [CarteretOBGYN.com](http://CarteretOBGYN.com), Patients/Patient Documents/Request Medical Records. Record request may be 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. 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 make regular interval payments, (at least monthly payments) or pay the balance in full, one collection letter will be sent prior to the account being sent to the outside collection agency.